

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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.

OMB No 1545-0047

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 2011, and ending D Employer Identification Number Check if applicable INTL UNION OF OPERATING ENGIN LOCAL 139 39-0368025 Address change P O BOX 130 Telephone number Name change PEWAUKEE, WI 53072 (262) 896-0139 Initial return Terminated G Gross receipts \$ 10,020,871 Amended return H(a) Is this a group return for affiliates? Application pending F Name and address of principal officer Yes H(b) Are all affiliates included? Same As C Above Yes If 'No.' attach a list (see instructions) 4947(a)(1) or 501(c)(3) X 501(c) (5 (insert no.) Tax-exempt status Website: ► N/A H(c) Group exemption number L Year of Formation 1938 Trust X Association Other > M State of legal domicile Corporation Form of organization Summary Briefly describe the organization's mission or most significant activities TO ELEVATE THE TRADE OF OPERATING ENGINEERS AND IMPROVE THE SOCIAL, ECOMONIC AND WORKING CONDITIONS OF ITS MEMBERS Check this box ► I if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 <u>0</u> 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 44 6 Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7 a b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 4,534. 8 Contributions and grants (Part VIII, line 1h) 7,120. 8,725,942. 8,934,758. 9 Program service revenue (Part VIII, line 2g) 119,469. 179,276. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 32,570. 12,121. Total revenue -- add lines 8 through 11 (must equal Part VIII, column (A), line 12) 8,885,101. 9,130,689. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 189,445 115,283. Benefits paid to or for members (Part IX, column (A), line 4) 5,535,583 4,902,498. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e). . 4,278,674 3,949,384. 10,003,702. 8,967,165. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -1,118,601163,524. Revenue less expenses Subtract line 18 from line 12. Beginning of Current Year End of Year RECEIVED 15, 124, 328. 14,361,729 Total assets (Part X, line 16) Š 2,545,263 1,685,662. 21 Total liabilities (Part X, line 26) JUL 0 9 2012 Net assets or fund balances Subtract line 21 from 12,579,065 12,676,067. Part II Signature Block Under penalties of perjury. I declare that I have examined this return, including accompanying schedules complete Declaration of prepare (orner) an officer) is based on all information of which prepare rines a and statements, and to the best of my knowledge and belief, it is true, correct, and Date Sign Here record m Type or print name and title Wagli 2 PTIN Print/Type preparer's name P00499757 Andrew Hein self-employed Paid Preparer ► Levinson Simon Hein & Bilkey , Use Only ► 566 West Lake Street, Suite 300 Firm's EIN > 36-3701668 312-655-0037 Chicago, IL 60661-1414 Phone no May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2011)

Form	990 (2011) INTL UNION OF OPERATING ENGIN LOCAL 139	39-0368025	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		\Box
1	Briefly describe the organization's mission:		
	TO ELEVATE THE TRADE OF OPERATING ENGINEERS AND IMPROVE THE SOC	IAL, ECOMONIC AN	ID .
	WORKING CONDITIONS OF ITS MEMBERS.		
2	Did the organization undertake any significant program services during the year which were not listed	on the prior	
_	F . 000 000 F73	Yes	X No
	If 'Yes,' describe these new services on Schedule O		110
3	Did the organization cease conducting, or make significant changes in how it conducts, any program :	services? Yes	X No
3	If 'Yes,' describe these changes on Schedule O.	scivices:	110
4	· · · · · · · · · · · · · · · · · · ·	rucos, as moasurad by a	vnoncoc
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the	amount of grants and all	ocations to
	others, the total expenses, and revenue, if any, for each program service reported.	J	
4 a	(Code: \$ including grants of \$)	(Revenue \$)
	TO ORGANIZE WORKERS FOR THE ECONOMIC, MORAL AND SOCIAL ADVANCEM	ENT OF THEIR CON	NDITION
	AND STATUS. THE ORGANIZATION HAD A MEMBERSHIP OF 8,738 AT THE E	ND OF THE REPORT	ING
	PERIOD.	<u> </u>	
	100100.		
41	(Code:) (Expenses \$ including grants of \$)	(Revenue \$)
		·	
		·	
		·	
		·	
4	c (Code) (Expenses \$ including grants of \$)	(Revenue \$)
			
		. 	
			-
			
	d Other program services. (Describe in Schedule O)	····	
-		\$)
	(Expenses \$ including grants of \$) (Revenue e Total program service expenses ►	y	
BA		For	m 990 (2011)
	TEEA0102L 07/05/11	FOII	550 (2011)

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		<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3_	Х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
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		Х
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		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		, h-	,
a	Did the organization report an amount for land, buildings and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI	11 a	Х	
t	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	11 b		х
(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	11 c		Х
C	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	11 d		х
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11f		x
	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	Х	
t	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	<u> </u>	X
14	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
l	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		х
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		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		<u>x</u>
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		х
20	aDid the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		<u> </u>

Page 4

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	x	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23	x	
24 a	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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		x
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		
25 a	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	-	
t	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		х
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_		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).	•		. 1
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	ļ	X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
ď	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		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29_	ļ	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31_		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
	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		х
	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		X
	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	 	Х
1	b 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	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	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	_	Х
38	Note. All Form 990 filers are required to complete Schedule O	38_	X	(0011)

form 990 (2011) INTL UNION OF OPERATING ENGIN LOCAL 139 39-036802	<u> </u>		age
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 19	1		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.]	ŀ	, .
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming]		İ
(gambling) winnings to prize winners?	1c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 44			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	х	
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	-	x
b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule Q</i>	3 b		
			_
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	l	Х
b If 'Yes,' enter the name of the foreign country: ▶		<u> </u>	
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	1		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c	 	
· · · · · · · · · · · · · · · · · · ·			
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		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6ь		
7 Organizations that may receive deductible contributions under section 170(c).	-	, ,	
•	`.	<u> </u>	
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b	-	<u> </u>
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			1
Form 8282?	7c	1	<u> </u>
d if 'Yes,' indicate the number of Forms 8282 filed during the year	_	İ	-
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u> </u>
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	70		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	1,8	+	
Form 1098-C?	7 h	ļ	├
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?	8		-
9 Sponsoring organizations maintaining donor advised funds.	-	+	<u> </u>
a Did the organization make any taxable distributions under section 4966?	9a	J	1
b Did the organization make a distribution to a donor, donor advisor, or related person?	96	+	
10 Section 501(c)(7) organizations. Enter	<u> </u>	+	
a Initiation fees and capital contributions included on Part VIII, line 12	1		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	┪	١.	
11 Section 501(c)(12) organizations. Enter	┨	,	ł
a Gross income from members or shareholders	1.	1	1.
	┥.	,	`
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).]		٠.
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 <i>a</i>	<u> </u>	<u> </u>
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year. 12b	4		1
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			1
a Is the organization licensed to issue qualified health plans in more than one state?	13a	4	—
Note. See the instructions for additional information the organization must report on Schedule O			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand		<u> </u>	<u> </u>
14a Did the organization receive any payments for indoor tanning services during the tax year?	148		Х

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

Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response to any question in this Part VI Section 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 . If there are material differences in voting rights among members 23 of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent 1 b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X 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 4 Х since the prior Form 990 was filed? 5 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Х See Schedule O 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? See Schedule Q 7 a X b Are any governance decisions of the organization reserved to (or subject to approval by) members, See Sch O Х stockholders, or other persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a Х a The governing body? X 8b b Each committee with authority to act on behalf of the governing body? Is there any officer, director or 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10: 10 a Did the organization have local chapters, branches, or affiliates? . b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Х 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a Х b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12c See Schedule O Х 13 13 Did the organization have a written whistleblower policy? 14 X 14 Did the organization have a written document retention and destruction policy? 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? 15a a The organization's CEO, Executive Director, or top management official 15b Х **b** Other officers of key employees of the organization... See Schedule O 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 b 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 taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Another's website 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 during the tax year.

See Schedule O State the name, physical address, and telephone number of the person who possesses the books and records of the organization. TERRY MCGOWAN N27 W23233 ROUNDY DR PEWAUKEE WI 53072 262-896-0139

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

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.								tee			
		(C)									
(A) Name and title	(B) Average hours per week	(do no unles	t chec s per and a	Posi ck mo son is direc	ition ore the s both tor/tr	an one n an offi ustee)	box, cer	compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	(describe hours for related organiza- tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W 2/1099-MISC)	from the organization and related organizations	
(1) SHAUN MCHUGH	- 40			77]	04.650		52 022	
Trustee	40	-		X				94,658.	0.	52,022.	
(2) DANIEL SPERBERG Fin Sec	20			х				31,866.	0.	5,068.	
(3) BILL DREYER	1 20	 	Н	Λ	_		┪	31,000.		3,000.	
AUDITOR	 3			Х				392.	0.	0.	
(4) GLENN ROLOSON											
E-BOARD	3			X				2,352.	0.	0.	
(5) RICKY GREUEL											
E-BOARD	3_			Х				2,156.	0.	0.	
(6) TERRY MCGOWAN					ł						
BUS MGR/PRES	40			Х	_		_	158,948.	0.	56,245.	
(n) DAVID VELIE, JR.	_				ŀ						
E-BOARD	3			X		<u> </u>	<u> </u>	2,352.	0.	0.	
(8) SHANE GRIESBACH							1				
E-BOARD	40			Х				104,651.	0.	56,245.	
(9) CHARLES WARNER	4	ì		})	}	}			
Vice President	40	<u> </u>		Х	ļ	ļ	L_	128,799.	0.	56,245.	
(10) DARRIN BURSAW	_	1									
AUDITOR	3	↓		X	L_	<u> </u>	└	0.	0.	<u> </u>	
(11) DANIEL SCHULTZ	٠.,			١							
FORMER TRUSTEE	40	ļ	<u> </u>	X	_	<u> </u>	├	50,536.	0.	28,925.	
(12) SAM SMITH	٠.,										
Conductor	40		_	X	<u> </u>		-	94,800.	0.	53,432.	
(13) JIM AXTMAN	4		ĺ	١	ĺ	ĺ	ļ	0.156			
E-BOARD	3	 	⊢	X	_		├-	2,156.	0.	0.	
(14) MATTHEW ISON	4 _	}	}		1	ļ				•	
E-BOARD	3	<u></u>	Ш	Х		Щ.		2,156.	0.	0.	

Part VII Section A. Officers, Directors, Trust	ees, r	<u>\ey</u>	Em			es,	and	Highest Com	pensated Empi	oyees	(cor	<u>11)</u>
•		1		•	C)							
(A)	(B) Average		not ci	heck	ition more	than	one	(D) Reportable	(E) Reportable	Fe	(F) timated	
Name and title	hours	offic	cer an	d a d	irecto	or/trus	tee)	compensation from the organization	compensation from related organizations	amou	nt of ot	ther
	week (describ	or a	Inst	Officer	ē	BH	Former	(W-2/1099-MISC)	(W-2/1099 MISC)	fr	om the	
	e	ndividual trustee or director	nstitutional	cer	en	Highest compensated employee	eq			an	anizatio d relate inizatio	d ns
	for related	2 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	mai		employee	e c	,					
	organi- zations	stee	trustee		**	pens						
	Sch O)		1 68			e e						
(15) TIM GOETZ		-				-	 					
Trustee	40			Х	L	<u> </u>		94,725.	0.		46,	103.
(16) CRAIG GLOVER					1		1					
E-BOARD	3	<u> </u>		X		<u> </u>	╙	2,156.	0.			0.
(17) PATRICK B NELSON			ľ				ļ		_			
Trustee	40	<u> </u>		X	<u> </u>	<u> </u>	ļ	94,989.	0.		51,	<u> 569.</u>
(18) RANDY PATROW					Ì		1					
AUDITOR	40	 _	ļ.,	X	ļ	↓_	ļ	94,863.	0.		53, ʻ	<u>432.</u>
(19) DANIEL R WESTLUND, JR		l			ĺ							
FORMER AUDITOR	40_	┡		X	├ ─	├-	↓	80,846.	0.		49,	<u> 396.</u>
(20) RODNEY J BESSETT	4.0			١.,	}			106 401	, '			c1 0
Treasurer	40	├-		X	}	┼	₽	126,431.	0.		55,	<u>610.</u>
(21) STEVEN BUFFALO	40			١,,		1		100 003	, !		F C '	0.4.5
GUARD	40	┢	-	X	-		-	100,893.	0.		30,4	245.
(22) JEFFEREY J VERHEYEN	3			X		l		2,548.	0.			0
E-BRD (23) RICHARD J MILNER	 _3 _	\vdash	\vdash	^	 	╁╌		2,540.	<u> </u>			0.
E-BOARD	3			x	1		Ì	3,186.	0.			0.
(24) JEFFREY ARTUS	<u> </u>	1				✝╌	T		<u></u>			
E-BOARD	3	1		X	ł	1		1,764.	0.	}		0.
(25) RYAN OEHLHOF	1					Τ						
REC SEC	40			Х				128,804.	0.		56,	245.
1 b Sub-total					_		•	576,710.	0.	254,750.		
c Total from continuation sheets to Part VII, Section	A						•	1,044,769.	0.	457,634.		
d Total (add lines 1b and 1c)							<u> </u>	1,621,479.	0.			<u>384.</u>
2 Total number of individuals (including but not limite	d to th	ose	liste	d at	oove	e) wh	no re	eceived more than	\$100,000 of report	able cor	npen	sation
from the organization > 7												т
										Γ	Yes	No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such i	or trus Individu	stee, <i>ial</i>	key	em	iploy	yee,	or h	nighest compensat	ed employee	3		X
4 For any individual listed on line 1a, is the sum of re	portab	le co	omo	ensa	atior	n and	d oth	ner compensation	from	-		
the organization and related organizations greater t	han \$1	50,0	000?	If "	Yes	con	nple	te Schedule J for			Х	
such individual				•	•	•	• •			4	_^	+-
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,'	comper comple	nsati ete S	on tr iche	rom dule	any J fo	unr Orsu	elati ıch p	ed organization or o <i>erson</i>	individual .	5		X
Section B. Independent Contractors												
1 Complete this table for your five highest compensa	ted ind	eper	nden	t co	ntra	ctor	s th	at received more t	han \$100,000 of	- tov va		
compensation from the organization. Report compe	iisatioi	1 101	trie	Cale	enua	ar ye	ar e					
(A) Name and business address (B) Description of services					Compe	C) nsatio	on					
BAUM SIGMAN AUERBACH & NEUMAN, LTD 200 W. ADAMS STREET, SUITE CHICAG LEGAL 321,36					361.							
	321)											
				_							_	
2 Total number of independent contractors (including	but no	ot lim	nited	to	thos	e lis	ted	above) who receive	ed more than	•		

\$100,000 in compensation from the organization ► 1

Form 990

Continuation Sheet for Form 990

OMB No 1545-0047

2011

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

INTL UNION OF OPERATING ENGIN LOCAL 139

Part VII | Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Employees										
(A)	(B)	Posi	tion ((Check		hat app	lv)	(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1b99-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
DENNIS LUCIANI FORMER PRES	40			Х				59,916.	0.	25,602.
ROB KAHL PUB REL CORD	40					Х	!	154,536.	0.	10,000.
				_						
										· · · · · · · · · · · · · · · · · · ·
			_				_			
					_					
				_						
			-		_					<u> </u>
			_	_						
			_	_			-			
			_	_	_					
		_	_	_	_		-			
			_							
	<u> </u>			-		-	-			
			-	-			<u> </u>			
				-	-		-			
			-	-			-			
		-		-	-		\vdash			
	Щ	<u> </u>	L	<u>L_</u>	L.,			<u> </u>		<u> </u>

Par	t 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
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns. b Membership dues c Fundraising events. d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above. g Noncash contributions included in lns 1a-1f: h Total. Add lines 1a-1f	4,534.			
	Business Code	1/331.			, , ,
PROGRAM SERVICE REVENUE			0 715 506		,
9	2a Membership Dues & Assessments 900099	8,715,586.	8,715,586.		
H H	b RENTL INC TX EXMPT_PURPOS 532000	219,172.	219,172.		
핑					
. ₹	c				
8	d				
ş	e				
용	f All other program service revenue				
Ž		8,934,758.			
-	3 Investment income (including dividends, interest and		, , , , , ,		147 610
	other similar amounts)	147,618.			147,618.
	4 Income from investment of tax-exempt bond proceeds ►				
	5 Royalties ▶				
	(i) Real (ii) Personal		1111		, -,
ļ				7.	
1	6a Gross rents	1	1 , - , 1,	1	
	b Less rental expenses		` " -	,	
	c Rental income or (loss)				
		, ,			, , ,
	d Net rental income or (loss)				 -
	7a Gross amount from sales of (i) Securities (ii) Other		· ·.		
	assets other than inventory 877, 696. 44, 144.	the second			
			157.7	1. 1. 1.	
	b Less: cost or other basis		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	" , " ,	
	and sales expenses 866, 373. 23, 809.				
	c Gain or (loss) 11, 323. 20, 335.				•
	d Net gain or (loss)	31,658.			31,658.
		32/333.	1 1		. ,
1.1	8a Gross income from fundraising events				
Ä	(not including \$, , ,	," '
₩.	of contributions reported on line 1c).	,			. "
띭	See Part IV, line 18		•	,	•
OTHER REVEN			1;	· ,	1 ,
Ĕ	b Less direct expenses b	•		1	
•	c Net income or (loss) from fundraising events ▶				
	9a Gross income from gaming activities. See Part IV, line 19 . a	,	14		
	1		1.,		1
	b Less: direct expenses b			``	
	c Net income or (loss) from gaming activities				<u> </u>
	10a Gross sales of inventory less returns		1 -	•	1
	10a Gross sales of inventory, less returns and allowances	1 1 1 1	172	'	I ' '.
				,	
	b Less cost of goods sold . b			1-	
	c Net income or (loss) from sales of inventory		<u> </u>		1
	Miscellaneous Revenue Business Code	•			1
	11a GRIEVANCES 900099	12,121.	12,121.		
				 	
	b			ļ	
	c				<u> </u>
	d All other revenue				
		12,121.	<u> </u>	 	
	C Total: Add lines Hallid.			 	170 076
	12 Total revenue. See instructions	9,130,689.	8,946,879.	0.	. 179,276.

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 response to any question in this Part IX										
Do 1 6b, 1	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses						
	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	96,283.			•						
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	19,000.		-							
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16										
	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	2,169,327.	· · · · · · · · · · · · · · · · · · ·								
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	Other salaries and wages	1,553,319.									
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	512,634.									
9	Other employee benefits	411,163.									
10	Payroll taxes	256,055.									
	Fees for services (non-employees)			 							
	Management										
	DLegal	369,712.		 							
	Accounting	57,483.		† · · · · · · · · · · · · · · · · · · ·							
	Lobbying	37,403.		 							
	Professional fundraising services. See Part IV, line 17		•								
	- · · · · ·			 							
	Investment management fees Other	47,103.									
-		237,447.		 							
	Advertising and promotion	252,539.	······································	 							
13	Office expenses	49,340.									
14	Information technology	45,340.			, .						
15	Royalties	275,584.									
16	Occupancy	224, 994.		· · · · · · · · · · · · · · · · · · ·							
17	Travel	224,994.									
18	Payments of travel or entertainment expenses for any federal, state, or local public officials										
19	Conferences, conventions, and meetings	173,361.									
20	Interest	83,092.	<u> </u>	ļ							
21	Payments to affiliates	1,324,376.									
22	Depreciation, depletion, and amortization	485,929.		 							
23		93,271.		ļ. —							
	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.)	i i									
;	ORGANIZING EXPENSE	83,718.		<u> </u>							
1	Printing and Publications	82,222.									
	Postage and Shipping	53,246.									
	CONTRACT ADMIN. EXP.	26,004.									
	e All other expenses	29,963.									
	Total functional expenses. Add lines 1 through 24e	8,967,165.									
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										
	SOP 98-2 (ASC 958-720)				<u> </u>						

Pa	rt X	Balance Sheet				
		•		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1,220,380.	1	1,020,591.
- (2	Savings and temporary cash investments .	,	1,663,896.	2	1,441,150.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net .	,		4	
	5	Receivables from current and former officers, director and highest compensated employees. Complete Part		1	5	•
	6	Receivables from other disqualified persons (as define persons described in section 4958(c)(3)(B), and contributions organizations of section 501(c)(9) voluntar organizations (see instructions)			6	
Ş	7	Notes and loans receivable, net			7	
SSET	8	Inventories for sale or use .			8	
s	9	Prepaid expenses and deferred charges		1,159.	9	51,038.
	10 a	Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D	10a 12,210,100.			, •
	b	Less: accumulated depreciation.	10b 4,445,659.	8,257,268.	10 c	7,764,441.
	11	Investments – publicly traded securities		3,580,113.	11	3,670,706.
	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		401,512.	15	413,803.
	16	Total assets. Add lines 1 through 15 (must equal line	34)	15,124,328.	16	14,361,729.
	17	Accounts payable and accrued expenses		460,103.	17	358,055.
	18	Grants payable	[18	
	19	Deferred revenue .			19	
Ļ	20	Tax-exempt bond liabilities			20	
Å	21	Escrow or custodial account liability Complete Part I	1		21	
L	22	Payables to current and former officers, directors, truinighest compensated employees, and disqualified per of Schedule L	stees, key employees, rsons Complete Part II		22	
į	23	Secured mortgages and notes payable to unrelated th	nird parties .	2,076,841.	23	1,313,107.
S	24	Unsecured notes and loans payable to unrelated third	parties		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	•	8,319.	25	14,500.
	26	Total liabilities. Add lines 17 through 25.		2,545,263.	26	1,685,662.
- E T		Organizations that follow SFAS 117, check here ►	X and complete lines	• •		
Ŧ		27 through 29 and lines 33 and 34.				,
Ş	27	Unrestricted net assets .		12,579,065.	27	12,676,067.
人のとして	28	Temporarily restricted net assets			28	-
	29	Permanently restricted net assets			29	
R	1	Organizations that do not follow SFAS 117, check he	ere ► 🔲 and complete		ĺ	
E		lines 30 through 34.		-	1	٠.
FUZO	30	Capital stock or trust principal, or current funds	•		30	
B A L	31	Paid-in or capital surplus, or land, building, or equipn	nent fund		31	
Ê	32	Retained earnings, endowment, accumulated income	, or other funds .		32	
AZCE S	33	Total net assets or fund balances		12,579,065.	33	12,676,067.
Š	34	Total liabilities and net assets/fund balances		15,124,328.	34	14,361,729.

BAA

Form 990 (2011)

Form 990 (2011) INTL UNION OF OPERATING ENGIN LOCAL 139	9-0368025		Pa	ige 12
Part XI Reconciliation of Net Assets				
Check if Schedule O contains a response to any question in this Part XI.		<u> </u>		X
	1 - 1			
1 Total revenue (must equal Part VIII, column (A), line 12)	11			<u> 589.</u>
2 Total expenses (must equal Part IX, column (A), line 25)	2		67,1	
3 Revenue less expenses. Subtract line 2 from line 1	3			524.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).		12,5		
5 Other changes in net assets or fund balances (explain in Schedule O) See Schedule O	. 5		66,	<u>522.</u>
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	12,6	76,0	067 _.
Part XII Financial Statements and Reporting			-	
Check if Schedule O contains a response to any question in this Part XII				\Box
			Yes	No
1 Accounting method used to prepare the Form 990: Cash X Accrual Other	·	1 1		
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				,
2a Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a		<u>X</u>
b Were the organization's financial statements audited by an independent accountant? .		2b	X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	of the audit,	2c	X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				- 1
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were separate basis, consolidated basis, or both:	ssued on a	.	, i	1
X Separate basis Consolidated basis Both consolidated and separate basis		- /	i	,
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single	3a		x
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required audit	3b		
BAA		Form	990	(2011)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below.

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

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

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

•	Section 501(c)(4), (5), or (6) or	rganizations: Complete Part III.						
Name	e of organization			Employer identifica	tion number			
IN	TL UNION OF OPERATI	NG ENGIN LOCAL 139		39-036802				
Pa	rt I-A Complete if the or	ganization is exempt under section	on 501(c) or is a s	ection 527 organiz	ation.			
1	Provide a description of the	organization's direct and indirect political c	ampaign activities in I	Part IV.				
2	Political expenditures .			. ►\$				
3	Volunteer hours							
Pa	rt I-B Complete if the or	ganization is exempt under section	on 501(c)(3).					
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	►\$				
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	▶\$				
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year?		Yes No			
4	a Was a correction made?				Yes No			
	b If 'Yes,' describe in Part IV				····			
		ganization is exempt under section						
1	Enter the amount directly exp	pended by the filing organization for section	n 527 exempt function	n activities > \$				
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities							
3	Total exempt function expenditures. Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b							
4	Did the filing organization file	Form 1120-POL for this year? .			Yes X No			
5	organization made nayments	and employer identification number (EIN) For each organization listed, enter the arons received that were promptly and direct Laction committee (PAC) If additional spa	nount paid from the fi	ılıng organization's fund	is Also enter the			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-			
(1)	OPERATING ENGINEERS 139 CONDUIT	N27 W23233 ROUNDY DRIVE PEWAUKEE, WI 53072	80-0459262		395.			
(2)	OPERATING ENGINEERS	N27 W23233 ROUNDY DRIVE	80~0459252		195.			
(2)	139 FED PAC	PEWAUKEE, WI 53072						
(3)	OPERATING ENGINEERS STATE PAC	N27 W23233 ROUNDY DRIVE PEWAUKEE, WI 53072	91-2107611		46,000.			
(4)								
(5)								
					 -			

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

(6)

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011	INTL UNION OF	OPERATING ENGI	N LOCAL 139	39-036	
Part II-A Complete if t section 501(i	he organization i 1)).	s exempt under sec	tion 501(c)(3) and	d filed Form 5768 (e	lection under
A Check ► if the filin	g organization belong	s to an affiliated group (and list in Part IV eac	ch affiliated group memb	er's name,
		nare of excess lobbying			
B Check ► If the filin	<u> </u>	d box A and 'limited con	trol' provisions apply		
(The term '	Limits on Lobbying expenditures' means	Expenditures amounts paid or incurre	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	•				
b Total lobbying expenditu	_	• ,	yıng)		
c Total lobbying expenditu		1b)			
d Other exempt purpose e	·	, ,			
e Total exempt purpose ex	kpenditures (add lines	ic and id)		<u> </u>	
f Lobbying nontaxable am both columns.	ount Enter the amou	nt from the following tab	le in		
If the amount on line 1e, colu	ımn (a) or (b) is: The	lobbying nontaxable ar	nount is:		
Not over \$500,000		% of the amount on line 1e.			
Over \$500,000 but not over \$1,		0,000 plus 15% of the excess		The second secon	
Over \$1,000,000 but not over \$		5,000 plus 10% of the excess			3.2
Over \$1,500,000 but not over \$		25,000 plus 5% of the excess of	ver \$1,500,000		
Over \$17,000,000		000,000.			2 5 7 257
g Grassroots nontaxable a					
h Subtract line 1g from lin i Subtract line 1f from line	·		••		
• • • • • • • • • • • • • • • • • • • •			•	<u> </u>	<u> </u>
j If there is an amount of section 4911 tax for this	ner than zero on eithe year?	r line 1h or line 1i, did th	e organization file Fo	orm 4720 reporting	Yes No
(Some	4-) e organizations that n columns l	ear Averaging Period Unade a section 501(h) ele elow. See the instruction	nder Section 501(h) ection do not have to ns for lines 2a throu	complete all of the five gh 2f.)	
	Lobbyii	ng Expenditures During	4-Year Averaging Pe	riod	
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	-				
f Grassroots lobbying expenditures					
BAA				Schedule C (For	rm 990 or 990-EZ) 2011

Page 3 Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (b) For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description Yes No of the lobbying activity. Amount 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 a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? a 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? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? . . - . . . b If 'Yes,' enter the amount of any tax incurred under section 4912 c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A | Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No 1 Were substantially all (90% or more) dues received nondeductible by members? 1 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? 3 Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) Part III-A, line 3, is answered 'Yes.' Dues, assessments and similar amounts from members. 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2 a a Current year 2b **b** Carryover from last year 2 c 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B, line 1 Also, complete this part for any additional information.

Schedule C (I	orm 990 or 990-EZ) 2011 INTL UNION OF OPERATING ENGIN LOCAL 139 Supplemental Information (continued)	39-0368025	Page 4
Part IV	Supplemental Information (continued)		
		·	
~		· 	
~			
~		· 	
~			
~			
			<u>-</u>

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 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
2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

INT	L UNION OF OPERATING ENGIN LO	CAL 139	39-0368025
Par	the organization answered 'Yes' to	r Advised Funds or Other Similar Fur o Form 990, Part IV, line 6.	nds or Accounts. Complete if
	the organization this world in the	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year).		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and dor funds are the organization's property, subject	nor advisors in writing that the assets held in to the organization's exclusive legal control?	donor advised Yes No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private benefits.	the benefit of the donor or donor advisor, or fo	nds can be or any other Yes No
Pai	t II Conservation Easements. Compl	ete if the organization answered 'Yes	to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by	y the organization (check all that apply)	
	Preservation of land for public use (e.g., r	recreation or education) Preservation	of an historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organizati	on held a qualified conservation contribution in	n the form of a conservation easement on the
	last day of the tax year		Hold of the Ford of the You Year
	Total acceptance of acceptance acceptance		Held at the End of the Tax Year
	Total number of conservation easements.		2a
	Total acreage restricted by conservation ease		26
	Number of conservation easements on a certi	` ,	——————————————————————————————————————
•	Number of conservation easements included in structure listed in the National Register	• • • •	2d
3	Number of conservation easements modified, tax year ►	transferred, released, extinguished, or terminate	ated by the organization during the
4	Number of states where property subject to co		<u></u>
5	Does the organization have a written policy re and enforcement of the conservation easemet	garding the periodic monitoring, inspection, honts it holds?	andling of violations, Yes No
6	Staff and volunteer hours devoted to monitori	ng, inspecting, and enforcing conservation ea	sements during the year
7	Amount of expenses incurred in monitoring, ii	nspecting, and enforcing conservation easeme	ents during the year
8	Does each conservation easement reported o	n line 2(d) above satisfy the requirements of s	ection
Ū	170(h)(4)(B)(i) and section $170(h)(4)(B)(ii)$?		LYes No
9	conservation easements	to the organization's financial statements that	describes the organization's accounting for
Ра	rt III Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical Treasures, owered 'Yes' to Form 990, Part IV, line	or Other Similar Assets.
1.	a If the organization elected, as permitted unde art, historical treasures, or other similar asset in Part XIV, the text of the footnote to its fina	is held for public exhibition, education, or rese	enue statement and balance sheet works of arch in furtherance of public service, provide,
	b If the organization elected, as permitted under historical treasures, or other similar assets he following amounts relating to these items:	er SFAS 116 (ASC 958), to report in its revenueld for public exhibition, education, or research	e statement and balance sheet works of art, i in furtherance of public service, provide the
	(i) Revenues included in Form 990, Part VIII	, line 1	. ►\$
	(ii) Assets included in Form 990, Part X		. ▶\$
2	If the organization received or held works of a amounts required to be reported under SFAS	art, historical treasures, or other similar assets 116 (ASC 958) relating to these items	for financial gain, provide the following
	a Revenues included in Form 990, Part VIII, line		> \$
	b Assets included in Form 990, Part X .		► \$

Schedule D (Form 990) 2011 INTL						<u> 39-036</u>			Page 2
Part III Organizations Maintai	ning Colle	ections	of Art, Histo	orical Treasu	res, or C	Other Similar Ass	ets (cc	ntınu	ed)
3 Using the organization's acquisition items (check all that apply):	on, accession	n, and o		-		nat are a significant u	se of its	collec	tion
à Public exhibition			\blacksquare	or exchange pre					
b Scholarly research			e [] Other	·					
c Preservation for future genera									
4 Provide a description of the organ Part XIV.							se in		
5 During the year, did the organizat assets to be sold to raise funds r	tion solicit or ather than to	receive be mai	donations of a ntained as part	rt, historical trea of the organizat	isures, or colle	other similar ction?	Yes		No
Part IV Escrow and Custodial line 9, or reported an a	Arrangen amount on	nents. Form	Complete if 990, Part X,	the organizatine 21.	tion ansv	wered 'Yes' to For	m 990	, Part	:IV,
1 a Is the organization an agent, trus included on Form 990, Part X?		n, or ot		y for contributio	ns or other	r assets not	Yes		No
b If 'Yes,' explain the arrangement	ın Part XIV	and com	plete the follow	ung table.					
							Amount		
c Beginning balance			• • • • • • • • • • • • • • • • • • • •	••	•	1c			
d Additions during the year .	•			• •		1d			
e Distributions during the year	•	•			•	1e 1f			
f Ending balance.2a Did the organization include an a			Dort V. Ivan 21	•	•				No
b If 'Yes,' explain the arrangement			ran A, ille 21				Yes	L	740
Part V Endowment Funds. Co			anization an	swered 'Yes'	to Form	990 Part IV line	10		
Part V Endowment runds. Co	(a) Curren		(b) Prior year		years back	(d) Three years back		our year	s hack
1 a Beginning of year balance.	(a) curren	t year	(b) Thor yea	(6) 1 10	years back	(u) Tince years back	(-(-)	our year.	3 Dack
b Contributions							 		
·						1	1 .		-
c Net investment earnings, gains, and losses	_						,	,	
d Grants or scholarships			-					-	
Other expenditures for facilities and programs					· · · · · · · · · · · · · · · · · · ·		,	را س <u>ر</u>	
f Administrative expenses.			ļ			<u> </u>			•
g End of year balance .			L			<u> </u>	<u> </u>		
2 Provide the estimated percentage		ent year	end balance (li	ine 1g, column ((a)) held as	s.			
a Board designated or quasi-endov			*						
b Permanent endowment ►		ģ							
c Temporarily restricted endowmer		1.1	* *						
The percentages in lines 2a, 2b,	and 2c shou	ia equai	100%.						
3a Are there endowment funds not a organization by:	in the posses	ssion of	the organization	n that are held a	and admini	istered for the	ſ	Yes	No
db - data - a							3a(i)		
							3a(ii)		
b If 'Yes' to 3a(II), are the related of							3ь		
4 Describe in Part XIV the intended	-		-						<u></u>
Part VI Land, Buildings, and).	***************************************			
Description of property		(a) Cos	st or other basis nvestment)		other	(c) Accumulated depreciation	(d)	Book va	alue
1 a Land	· - 			1,112			1	,112	,228.
b Buildings.	•			8,689		2,551,867.	6	,138	,110.
c Leasehold improvements.					,184.	62,184.			0.
d Equipment .				1,303		1,097,961.			,461.
e Other				1,042		733,647.			<u>,642.</u>
Total Add lines 1s through 1s. (Colum	nn (d) mint	agual E	um aga Dad V	column (B) In	0 10(0)	▶	. 7	761	111

Schedule **D** (Form 990) 2011

BAA

(a) Description of liability (b) Book value

(1) Federal income taxes
(2) DEPOSITS HELD 8, 260.
(3) PAYROLL WITHHOLDINGS 6, 240.
(4)
(5)
(6)
(7)
(8)
(9)
(10)
(11)
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) 14, 500.

2 FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Schedule D (Form 990) 2011 INTL UNION OF OPERATING ENGIN LOCAL 139	39-0368025	Page 4
Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1 Total revenue (Form 990, Part VIII, column (A), line 12)		9,130,689.
2 Total expenses (Form 990, Part IX, column (A), line 25)		8,967,165.
3` Excess or (deficit) for the year. Subtract line 2 from line 1		163,524.
4 Net unrealized gains (losses) on investments		-66,522.
5 Donated services and use of facilities		
6 Investment expenses		
7 Prior period adjustments		
8 Other (Describe in Part XIV.)		
9 Total adjustments (net). Add lines 4 through 8		-66,522.
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		97,002.
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return	
1 Total revenue, gains, and other support per audited financial statements		9,064,167.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	-	
a Net unrealized gains on investments 2a -66, 5	.22.	
b Donated services and use of facilities		
c Recoveries of prior year grants	\neg	
d Other (Describe in Part XIV.)		
e Add lines 2a through 2d.	2e	-66,522.
3 Subtract line 2e from line 1		9,130,689.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	7,	
a 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 must equal Form 990, Part I, line 12).	-	9,130,689.
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses		
Total expenses and losses per audited financial statements	. 1	8,967,165.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	- ,	
a Donated services and use of facilities . 2a	1 1	
b Prior year adjustments		
c Other losses . 2c		
d Other (Describe in Part XIV.)		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	8,967,165.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIV.)		
c Add lines 4a and 4b	4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	8,967,165.
Part XIV Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part V, line 4; Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also cor any additional information.	art IV, lines 1b an uplete this part to	d 2b; provide
		_
BAA TEEA3304L 05/25/11	Schedule D	(Form 990) 2011
##F#F 1 11 11 11 11 11 11 11 11 11 11 11 11	Jon Gudic D	~ J JJJJ EUTT

Schedule D	(Form 990) 2011	INTL UNION OF Information (cont	OPERATING	ENGIN LO	CAL 139		39-036802	5 Pag	e 5
Part XIV	Supplemental	Information (cont	inued)						
				- 					
,									
				- 					
		_							
				-					
									
					- -				
- -	-								
	 -		- -						
	·								
					- -				
	. 								
	. -		· -						
					_ _	 .			
									. _ _
									
								- 	. -
			_						
								_ 	 -

SCHEDULE I

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

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

2011

Open to Public Inspection

Employer identification number 39-0368025 Part I General Information on Grants and Assistance INTL UNION OF OPERATING ENGIN LOCAL 139 Department of the Treasury Internal Revenue Service Name of the organization

tantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and		
grants or assistance, the grantees' eli	•	
Does the organization maintain records to substantiate the amount of the	the selection criteria used to award the grants or assistance?	
Does the organization	the selection criteria	

2

XYes

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Complete if the organization answered 'Yes' to Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to

Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed

ייי איניייייייייייייייייייייייייייייייי							
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) JOBS FIRST COALITION PO BOX 2071				c			ADV GROUP DEVOTED TO JOB CREATION
BROOKFIELD, WI 53008	27-0755923 501 (C) 4	501 (c) 4	. 000,12				TRANSFERS TO
(2) LOCAL 139 STATE PAC				c			PAC-MEMBER DUES
PEWAUKEE, WI 53072	91-2107611 527	527	46,000.				
(3) MISCONSIN TRANSPIN BLDRS ASSO 1 S. PINCKNEY STREET, STE 300 MADISON, WI 53072	39-0138120 501 (c) 6	501 (c) 6	20,000.	0.			FEDERAL LOBBYING COST
<u></u>							
Ø							
(8)							
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
2 Enter total primber of section 501(c)(3) and povernment organizations listed in the line 1 table	3) and government o	roanizations listed	in the line 1 table			•	0
	ons listed in the line	1 table				•	3
		-			2001111	Schadu	Schodule 1 (Form 990) (2011)

Schedule I (Form 990) (2011)

TEEA3901L 06/01/11

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

Page 2 39-0368025

Schedule I (Form 990) (2011) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (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 (e) Method of valuation (book, FMV, appraisal, other) ORGANIZATIONS RECEIVING SIGNIFICANT DONATIONS AS TO THE USE OF THE FUNDS RECEIVED THE BOARD AND MEMBERSHIP APPROVES ALL DONATIONS MADE BY THE LOCAL. DONATIONS ARE MADE UPON REQUESTS FROM VARIOUS ORGANIZATIONS. THE LOCAL WILL INQUIRE WITH (d) Amount of non-cash assistance 19,000 Schedule I (Form 990) (2011) INTL UNION OF OPERATING ENGIN LOCAL 139 Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S. (c) Amount of cash grant (b) Number of recipients SCHOLARSHIPS TO ELIGIBLE (a) Type of grant or assistance DEPEND OF MEMBERS Part III 8 ന 4 വ 9

BA

SCHEDULE J (Form 990)

Compensation Information

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

OMB No 1545-0047

nen to Bublic

Department of the Treasury Internal Revenue Service Name of the organization

INTL UNION OF OPERATING ENGIN LOCAL 139

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Employer identification number

39-0368025

Part I Questions Regarding compensation				
			Yes	No
1a Check the appropriate box(es) if the organization provided an VII, Section A, line 1a. Complete Part III to provide any r	y of the following to or for a person listed in Form 990, Part elevant information regarding these items.		``.	
First-class or charter travel	Housing allowance or residence for personal use	:		۱ ۱ ا
Travel for companions	Payments for business use of personal residence	1 1	2.	, · · ·
Tax indemnification and gross-up payments	Health or social club dues or initiation fees	1 . 1	٠ ا	- 4
Discretionary spending account	Personal services (e.g., maid, chauffeur, chef)		~	
		1 1	٠	!
b If any of the boxes on line 1a are checked, did the organ reimbursement or provision of all of the expenses describ	ization follow a written policy regarding payment or bed above? If 'No,' complete Part III to explain	1b	_	
2 Did the organization require substantiation prior to reimb trustees, and the CEO/Executive Director, regarding the	ursing or allowing expenses incurred by all officers, directors, items checked in line 1a?	2		
3 Indicate which, if any, of the following the filing organizal CEO/Executive Director Check all that apply Do not che establish compensation of the CEO/Executive Director E	tion used to establish the compensation of the organization's ick any boxes for methods used by a related organization to explain in Part III	*	- ·	, , ,
Compensation committee	Written employment contract	1 2	<u>}</u> *-	, . ;
Independent compensation consultant	Compensation survey or study	1	`.,	
Form 990 of other organizations	Approval by the board or compensation committee	<i>₩</i> .	- · ;	,
		1. 7	. :	
4. Downer the year old any consent total on Fermi 200. Book	VIII. Carting A. Ivan In with appear to the films are maken			
or a related organization	VII, Section A, line 1a with respect to the filing organization		_ `	
a Receive a severance payment or change-of-control paym	nent?	4a	_	Х
b Participate in, or receive payment from, a supplemental		4b	$\neg \neg$	Х
c Participate in, or receive payment from, an equity-based		4c		Х
If 'Yes' to any of lines 4a-c, list the persons and provide	•			٠.
Only section 501(c)(3) and 501(c)(4) organizations must	complete lines 5-9.		· ·	l .
5 For persons listed in Form 990, Part VII, Section A, line contingent on the revenues of:	1a, did the organization pay or accrue any compensation		`	- ['] '
a The organization?		5a		Ĺ
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 contingent on the net earnings of	1a, did the organization pay or accrue any compensation		,	-
a The organization?	•	6a		
b 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 described in lines 5 and 6? If 'Yes,' describe in Part III	1a, did the organization provide any non-fixed payments not	7		
	or accrued oursuant to a contract that was subject to the initial	8		
9 If 'Yes' to line 8, did the organization also follow the rebisection 53 4958-6(c)?		9		

39-0368025

Page 2

INTL UNION OF OPERATING ENGIN LOCAL 139

Schedule J (Form 990) 2011 INTL UNION OF OPERATING ENGIN LOCAL 139

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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable columns (D) and (E) amounts for that individual

		(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC	MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	, o	(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(i)(b)	in prior Form 990
TERRY MCGOWAN	€	158,160.	0	788.	32, 455.	23,790.	$-\frac{215,193}{}$	0
-	(E)	1 1	0.	0.	0.		0.	0
SHANE GRIESBACH	Θ	104,276.		375.	32, 455.		$\frac{160,896}{1}$	0.
2		0	0 1 1 1 1	0	0.		0.	0.
CHARLES WARNER	Θ	128,407.		392.	32, 455.		185,044.	0.
m		0 1 1 1	0	0.	0.		0.	0.
RODNEY J BESSETT	١.	125,999.	0.	432.	32,140.	23,470.	182,041.	0.
4	 	!	0	0.	0.	0.	0.	0.
STEVEN BUFFALO		ı		232.	32, 455.	23, 790.	157,138.	0.
ıs	Í I 1	.0	0	0	0.	0	0.	0.
RYAN OEHLHOF		128,407.		397.	32, 455.	23,790.	185,049.	0.
9		0	0	0	1	0		0.
ROB KAHL	€	153, 635.		901.	10,000.	0.	164,536.	0
7		0.1	0 1 1 1 1 1 1	0.	0.	0.		0.
					1	1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
œ	: : : : :	 						
	()				1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	! ! ! ! !	1 1 1 1 1
6	(1)							
	ω		1 1 1 1 1 1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 1 1 1 1 1	1 1 1 1 1 1 1
10	<u>(i)</u>							
	(0)			 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
11								
	(0)		 	1 1 1 1		1 1 1 1 1 1 1 1	1 1 1 1 1 1	1 1 1 1 1 1
12	(E)							
_	(0)		1 1 1 1 1 1 1 1 1	1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 1 1 1 1	
13	(1)							
_	(0)	1 		1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
14	(3)							
	(O)	1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1				1 1 1 1 1 1
15	(E)							
		1 1 1 1 1	1 1 1 1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!
16	<u>(ii</u>							1177 177
ВАА				TEEA4102L 01/	01/24/12		ocie	Schedule J (roini 990) 2011

Schedule J (Form 990) 2011 INTL UNION OF OPERATING ENGIN LOCAL 139 Part III Supplemental Information Complete this part to provide the information explanation or descriptions required for Part I lines 1a. 1b.	39-0368025 Page 3
Complete this part to provide the information, explanation, or descriptions required for Part I, lines Ia, Ib, 3, 4a, 4b, 4c, 3a, Part II. Also complete this part for any additional information.	, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 6, 10f
· (
· · · · · · · · · · · · · · · · · · ·	
{ 	
·	,
· (1
.	
.	1
	! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! !
	Schedule J (Form 990) 2011

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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.

INTL UNION OF OPERATING ENGIN LOCAL 139
<u>Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder</u>
REGULAR MEMBERS REPRESENT JOURNEYMEN AND FOREMEN. APPRENTICES REPRESENT MEMBERS WHO
HAVE NOT YET REACHED JOURNEYMEN STATUS. THESE MEMBERS PAY FULL DUES. OWNER OPERATORS
PAY DUES AT A RATE OF \$50 PER MONTH BECAUSE THESE MEMBERS ARE NOT REQUIRED TO PAY
WORKING DUES. "S" MEMBERS PAY DUES AT A RATE OF TWO TIMES THEIR HOURLY RATE.
RETIRED/DISABLED MEMBERS PAY DUES AT \$10 PER MONTH DUE TO THEIR EMPLOYMENT STATUS.
Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body
MEMBERS ELECT OFFICERS EVERY THREE YEARS FOLLOWING PRESCRIBED PROCEDURES IN THE
UNION'S BYLAWS.
Form 990, Part VI, Line 7b - Decisions of Governing Body Approval by Members or Shareholders
PER THE CONSTITUTION OF THE INTERNATIONAL UNION OF OPERATING ENGINEERS, ALL ACTS OF
THE EXECUTIVE BOARD SHALL BE REVIEWABLE BY THE LOCAL MEMBERSHIP BUT SHALL BE
MAINTAINED IN FULL FORCE AND EFFECT, SUBJECT TO REVOCATION BY ACTION OF THE
MEMBERSHIP OF THE LOCAL IF TAKEN AT THE NEXT SUBSEQUENT MEMBERSHIP MEETING FOLLOWING
THE ADOPTION OF THE ACT IN QUESTION.
Form 990, Part VI, Line 11b - Form 990 Review Process
THE EXECUTIVE BOARD AUTHORIZES THE BUSINESS MANAGER AND SECRETARY TREASURER TO
REVIEW THE FORM 990 BEFORE IT IS FILED.
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts
THE WRITTEN CONFLICT OF INTEREST POLICY IS INCLUDED IN THE BYLAWS OF THE LOCAL AND
THE CONSTITUTION OF THE INTERNATION UNION OF OPERATING ENGINEERS. ANY MEMBER OR
EMPLOYEE OF THE ORGANIZATION CAN CONTACT IUOE (AN AFFILIATED ORGANIZATION ALSO
GOVERNED BY THE CONSTITUTION) WITH ANY COMPLAINT ARISING UNDER THE CONSTITUTION, OR
ANY OTHER DISCIPLINARY RULE, REGULATION, PRACTICE OR PROCEDURE ADOPTED BY IUOE.
THE US DEPARTMENT OF LABOR REQUIRES ALL NON-CLERICAL EMPLOYEES TO REPORT ON FORM

Schedule O (Form 990 or 990-EZ) 2011 Name of the organization TAYET MATION OF OPERATING ENGIN LOCAL 130	Page 2 Employer identification number 39-0368025
INTL UNION OF OPERATING ENGIN LOCAL 139	
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enfo	
LM-30 POTENTIAL SITUATIONS WHERE THERE MAY BE CO	ONFLICTS OF INTEREST. THIS
INFORMATION IS OPEN TO THE PUBLIC	
Form 990, Part VI, Line 15b - Compensation Review & Approval	Process for Officers & Key Employees
OFFICERS AND KEY EMPLOYEES COMPENSATION IS APPRO	OVED BY THE MEMBERSHIP.
Form 990, Part VI, Line 19 - Other Organization Documents P	Publicly Available
THE LOCAL'S BYLAWS AND THE CONSTITUTION OF THE I	INTERNATIONAL UNION OF OPERATING
ENGINEERS IS AVAILABLE THROUGH THE US DEPARTMENT	OF LABOR, OLMS, ONLINE PUBLIC
DISCLOSURE ROOM. THE CONSTITUTION IS FILED UNDE	ER THE INTERNATIONAL UNION OF
OPERATING ENGINEERS, WHO FILES THE INFORMATION O	ON BEHALF OF ALL AFFILIATED
ORGANIZATIONS. IN ADDITION, OUR ORGANIZATION FI	LES AN ANNUAL FINANCIAL REPORT WITH
THE DEPARTMENT OF LABOR WHICH CAN ALSO BE OBTAIN	NED ON THE ONLINE PUBLIC DISCLOSURE
ROOM.	

2011

Schedule O - Supplemental Information

Page 1

Client 139UN

INTL UNION OF OPERATING ENGIN LOCAL 139

39-0368025

6/29/12

03 07PM

Form 990, Part XI, Line 5 Other Changes in Net Assets or Fund Balances

Net Unrealized Gains or Losses on Investments .

Total $\frac{$ -66,522.}{$ -66,522.}$

(Rev January 2012)

Application for Extension of Time To File an **Exempt Organization Return**

Department of the Treasury Internal Revenue Service

OMB No 1545-1709

File a separate application for each return. If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box X • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits. Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Employer identification number (EIN) or Name of exempt organization or other filer, see instructions Type or print X 39-0368025 INTL UNION OF OPERATING ENGIN LOCAL 139 File by the due date for filing your return See Number, street, and room or suite number. If a P O box, see instructions Social security number (SSN) P O BOX 130 instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions PEWAUKEE, WI 53072 01 Enter the Return code for the return that this application is for (file a separate application for each return) Application Is For Return Application Return Code ls For Code Form 990-T (corporation) Form 990 01 Λ7 Form 1041-A Form 990-Bl 02 08 Form 990-EZ 01 Form 4720 09 Form 5227 Form 990-PF 04 10 Form 990-T (section 401(a) or 408(a) trust) 05 Form 6069 11 06 12 Form 990-T (trust other than above) Form 8870 ■ The books are in the care of TERRY MCGOWAN Telephone No. ► 262-896-0139 FAX No. ► If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ▶ If it is for part of the group, check this box ▶ I and attach a list with the names and EINs of all members the extension is for. 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15, 20 12, to file the exempt organization return for the organization named above. The extension is for the organization's return for. X calendar year 20 11 or tax year beginning , 20 , and ending Final return 2 If the tax year entered in line 1 is for less than 12 months, check reason | Initial return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 3a|\$ 0. nonrefundable credits. See instructions

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions

payments made Include any prior year overpayment allowed as a credit

0.

36|\$