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·990

Return of Organization Exempt From Income Tax

2011

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

Open to Public

OMB No 1545-0047

Department of the Treasury

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

		■ The organization may have to use a copy of this return to satisfy state re		Inspection
A F	or the	2011 calendar year, or tax year beginning , and e		
B C	heck if a	applicable C Name of organization UNITED STEELWORKERS LOCAL 13-1327	D Employer i	identification number
A	ddress	change Doing Business As	71-6066864	
□N	ame ch	ange Number and street (or P O box if mail is not delivered to street address) Room/suite	E Telephone	
┌┌	itial retu	PO BOX 631	(870) 898-33	322
⊟⊤	erminate		(0/0/000 00	
=	mended		G Gross recei	ipts \$ 204,15
=		on pending F Name and address of principal officer	H(a) is this a group return	
^	ppiicatic	VELMA PERKINS PO BOX 631, ASHDOWN, AR 71822	H(b) Are all affiliates incl	= =
			If "No," attach a list	
I Ta	x-exem	pt status501(c)(3) X 501(c) (5) ◀ (insert no) 4947(a)(1) or 527	·	
J W	ebsite		H(c) Group exemption no	umber ▶ 0260
K Fo	rm of o	rganization Corporation Trust Association X Other ► LABOR UNIC L Yea	er of formation 1968	M State of legal domicile AF
P	art I	Summary		
	1		AL UNION ENFOR	CED COLLECTIVE
	-	BARGAINING AGREEMENT TO BETTER THE WORKING CONDITIONS OF T		
8		REPRESENTATION TO ITS MEMBERS		
Activities & Governance				
Ver	2	Check this box If the organization discontinued its operations or disposed of more that	n 25% of its net assets.	
မိ	3	Number of voting members of the governing body (Part VI, line 1a)		3
ණ ගු	4	Number of independent voting members of the governing body (Part VI, line 1b)	,	4
vitie	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	′ . ·	5 3
A cti	6	Total number of volunteers (estimate if necessary)	· .	6
	7a	Total unrelated business revenue from Part VIII, column (C), line 12		7a
	b	Net unrelated business taxable income from Form 990-T, line 34		7b
			Prior Year	Current Year
_	8	Contributions and grants (Part VIII, line 1h)		
Revenue	9	Program service revenue (Part VIII, line 2g)		200,53
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,72
œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e).		1,89
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0 204,15
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
80	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10).		74,25
use	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0	, _	
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		57,25
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		0 131,50
	19	Revenue less expenses. Subtract line 18 from line 12		0 72,65
Sets or Balances			Beginning of Current	
sset	20	Total assets (Part X, line 16)	335	,772 408,42
(<i>((()</i>))	21	Total liabilities (Part X, line 26)		0
<u> </u>		Net assets or fund balances. Subtract line 21 from line 20	335	,772 - 408,42
	rt II	Signature Block		
∑ Unde	r penalt	ties of perjury, I declare that I have examined this return, including accompanying schedules and statement is true, correct, and complete—Beclaration of preparer (other than officer) is based on all information of wh	nts, and to the best of my	knowledge
J and t	eller, it		ich preparer has any know	_
_∑ Sig	n	Signature of officer RECEIVED	Data	7-2012
Her			Date	
		VELMA PERKINS, TREASURER Type or print name and title		-
<u>න</u>			Date	PTIN
∾Pai	d	Print/Type preparer's name	1	neck if
Pre	nare:		se	elf-employed
	:pare: • Oni:		Firm's EIN	
US		Firm's address	Phone no	
Mar	the II	RS discuss this return with the preparer shown above? (see instructions)		Yes N
ivia)		to allocate this lotain with the property chown above. (see ilistrational)	•	· · · — · · · · · · · · · · · · · · · ·

	90 (2011) UNITED STEELWORKERS LOCAL 13-1327	71-6066864	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission: THE MISSION STATEMENT OF THE ORGANIZATION INCLUDES BUT IS NOT LIMITED TO ON BEH MEMBERS; COLLECTIVE BARGAINING, GRIEVANCE PROCEDURES, ARBITRATION, STRIKE BEN EDUCATION, ORGANIZE AND TO IMPROVE THE WORKING CONDITIONS OF ITS MEMBERS	ALF OF ITS IEFITS,	
2	Did the organization undertake any significant program services during the year which were not listed of the prior Form 990 or 990-EZ?	n Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Tyes	X No
4	Describe the organization's program service accomplishments for each of its three largest program service expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to regrants and allocations to others, the total expenses, and revenue, if any, for each program service repo	eport the amount o	d by of
4a	(Code:) (Expenses \$ 0 including grants of \$ 0) (Revent THE LOCAL UNION CONTINUES IN AN ONGOING EFFORT TO DEFEND AND ENFORCE THE NEG BARGAINING AGREEMENT FOR OUR MEMBERS WAGES BENEFITS AND WORKING CONDITIONS RELATED INCOME AND EXPENSES ARE USED TO CARRY OUT THESE ACTIVITIES. THE LOCAL CONTINUALLY STRIVING TO MAINTAIN OR ACCOMPLISH IMPROVEMENTS FOR OUR MEMBERS	OTIATED COLLECT STHE MEMBERS UNION IS	S DUES AI
4b	(Code:) (Expenses \$ 0 including grants of \$ 0) (Reven		
4c	(Code:) (Expenses \$ 0 including grants of \$ 0) (Reven	ue \$	
4d	Other program services. (Describe in Schedule O.)		
4e	(Expenses \$ 0 including grants of \$ 0) (Revenue \$	0)	

Part IV Checklist of Required Schedules

			Yes	No
4	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		163	-
1		4		
_	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</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,	_		
J	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	-		V
_	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			V
_	"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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	4	1	<i>j</i> #
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		×
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1.0		 ^
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		Х
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"			Ϊ́
~	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		<u>x</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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		_ x_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			Ī
-	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		_ x_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions).	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			Ť
. •	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
. =	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

ı aı	Officering of Negative Scientification	-		
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization		Yes	No
21	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	<u> </u>		
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	274		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u> </u>
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? <i>If</i> "Yes," complete Schedule L, Part III	27		v
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	-		X
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	,		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
C	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? <i>If</i> "Yes," <i>complete Schedule M</i>	29		_X_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N,</i>	30		
٠.	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	_		\ , .
25-	III, IV, and V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? Did the organization receive any payment from or engage in any transaction with a controlled entity within	35a		X
b	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	330		_
- •	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? If "Yes," complete Schedule R, Part			
	VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990	(2011)

orm 990 (2011)	UNITED STEELWORKERS LOCAL 13-1327		Page
Part V	Statements Regarding Other IRS Filings and Tax Compliance		
	Check if Schedule O contains a response to any question in this Part V		

			T	==
10	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . 1a 0	Γ	Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	İ		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
·	gaming (gambling) winnings to prize winners?	1c	\mathbf{x}^{-}	├ ⁻
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	<u> </u>	<u> </u>	1
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a35			1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	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? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	ļ	X
b	If "Yes," enter the name of the foreign country: ▶			3
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	 	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	ļ	X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	├—	₩
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a	 	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		1
7	Organizations that may receive deductible contributions under section 170(c).	OD	 	-
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		:	1 3
•	and services provided to the payor?	7a	نعا	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		†
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			14
е	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		↓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		ļ
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	ļ	\downarrow
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. Did the organization make any taxable distributions under section 4966?	9a	-	
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	 	+-
10	Section 501(c)(7) organizations. Enter:	- 55	1	t
. а	Initiation fees and capital contributions included on Part VIII, line 12		1	1 :
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1	1	
11	Section 501(c)(12) organizations. Enter:	1 1	1	1 1
а	Gross income from members or shareholders		1	'
b	Gross income from other sources (Do not net amounts due or paid to other sources	1	}	'
	against amounts due or received from them)	ļ	}	, "
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	Ļ.,	
þ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year .		ļ	1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		 	ـــــ
a	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.		1	1
þ	Enter the amount of reserves the organization is required to maintain by the states in which	İ		1
_	the organization is licensed to issue qualified health plans	┨	1	
C 1/15	Enter the amount of reserves on hand	14a		X
14a	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b	_	+^
<u> </u>	ii res, nas it nieu a ronni rzo to report mese payments: ii rvo, provide an explanation in schedule O	1 1 7 13		—

F	00 (0044) LINITED STEEL WORKERS LOCAL 40 4007	22224		•
	10 UNITED STEELWORKERS LOCAL 13-1327 71-600 Toler Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for 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	r a "No)"	eage 6
Sect	ion A. Governing Body and Management	_		
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a			3
	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.		~	Attended Section
b	Enter the number of voting members included in line 1a, above, who are independent . 1b			3
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
_	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Х	
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?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	<u>X</u>	L
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			A STATE
	the year by the following:	<u>-</u>		.3
a	The governing body?	8a	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	X	—
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			١
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	L	<u>X</u>
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	ode.)		T
40-	Did the experimetion have lead about an homeless as officiated?	40-	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
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?	406		
110	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	10b		
_		11a		X A
b 120	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	42-	-	3
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	X	
b C	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes,"</i>	120	-	
·	describe in Schedule O how this was done	12c		V
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		x
15	Did the process for determining compensation of the following persons include a review and approval by	'-		
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			· marř.
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			<u></u>
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			1
	with a taxable entity during the year?	16a		l x 🗆

	with a taxable entity during the year?	16a]	Х
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 take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	- 1	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501	(c)(3)s	only)	

X Upon request Another's website 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public.

Own website

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ VELMA PERKINS PO BOX 631, ASHDOWN, AR 71822

•											
Form 990 (2011)	UNITED STEELWORKERS LOCA	AL 13-1327							71-60668	64	Page 7
Part VII	Compensation of Officers, Dire	ctors, Trustee	es, K	ey	Em	ploye	ees, F	lighest Comp	ensated		
	Employees, and Independent C										_
	Check if Schedule O contains a re	esponse to any	y que	stic	n in	this	Part \	√II	•		oxdot
Section A.	Officers, Directors, Trustees, Key	Employees, an	d Hig	hes	t Co	ompe	nsate	d Employees		_	
1a Complete	this table for all persons required to be	e listed. Report o	comp	ens	atior	n for t	he cal	endar year endi	ng with or within	the	
organization's	s tax year.										
	of the organization's current officers,		•				luals c	r organizations)	, regardless of a	imount	
-	tion. Enter -0- in columns (D), (E), and										
	of the organization's current key empl										
	e organization's five current highest co reportable compensation (Box 5 of Fo)
	and any related organizations.	Jilli VV-2 aliu/Ol	DUX /	OI 1	UII	11 109	9-WIIO	C) of filore triair	\$100,000 IIOIII	II I C	
•	of the organization's former officers, k	ev employees	and h	iahe	est o	ompe	ensate	d employees wh	no received more	e than	
	reportable compensation from the orga							a omployees w	10 10001100 11101	Julian	
	of the organization's former directors		-		_			ty as a former d	irector or trustee	of the	
	more than \$10,000 of reportable comp										
•	in the following order: individual trusted demployees; and former such persons		nstitu	tion	al tn	ustee	s; offic	cers; key employ	ees; highest		
	is box if neither the organization nor a		uzatio	on c	omo	ensat	ted an	v current officer	. director, or trus	stee.	
		l			(C						
		1			Posit	-					
	(A)	(B)					an one	(D)	(E)	(F	•
	Name and Title	Average hours per				rector/ti	both an rustee)	Reportable compensation	Reportable compensation	Estim amou	
		week (describe	악ā	Ы	9	emp Key	Hg	from the	from related organizations	oth comper	
		hours for	Individual to or director	랿	Officer	y en b	Former Highest	organization	(W-2/1099-MISC)	from	
		related organizations	Individual trus or director	Institutional tr		employee Key employee	ğ .	(W-2/1099-MISC)		organi and re	
		in Schedule	🖁	اجا		ğΙ	줮			organiz	

(A) Name and Title	(B) Average hours per	box,	unles er an	neck ss pe	rson	e than one the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the thick the t	an ee)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) JAMES STAGGERS PRESIDENT	8.00			х				11,881	0	0
(2) CLINT CHANDLER VICE PRESIDENT	4.00			х				11,057	0	0
(3) DAVID BOULDEN FINANCIAL SECRETARY	8.00			х				4,970	0	0
(4) VELMA PERKIN TREASURER	8.00			х				6,617	0	0
(5) KEVIN KESTERSON RECORDING SECRETARY	4.00			х				3,787	0	0
(6) GARY HINERMAN GREIVANCE CHAIR	8.00			х				7,670	0	0
					_				-	
									·	
(10)										
(11)										
(12)										
(13)	<u> </u>									
(14)								-		

										_ _			
Form 9	90 (2011) UNITED STEELWORKERS LO	OCAL 13-1327								71-6066	3864	P	age 8
Pa	art VII Section A. Officers, Directors, Tr		nplo	yee	s, a	ınd	High	est	Compensated	Employees (col	ntinue		
	(A) Name and title	(B) Average hours per	bοx,	unles	Pos neck ss pe	rson	e than is both or/trus	h an	(D) Reportable compensation	(E) Reportable compensation from related organizations (W-2/1099-MISC)		(F) stimate	_
			Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)		oth compe from organ and re	other npensat rom the panization displays the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the panization of the pa	on ed
(15)													
(16)							-						
(17)													
(18)													
(19)													
(20)													
(21)													
(22)											-		
(23)													
(24)													
(25)													
1b	Sub-total							•	45,982	0			0
C	Total from continuation sheets to Part VII,	Section A						•	0	0			0
d						•	_••	. •	45,982	0			0
2	Total number of individuals (including but not reportable compensation from the organization		listed	ab	ove 0	e) wl	ho re	ceiv	ved more than \$	100,000 of			
3	Did the organization list any former officer, die employee on line 1a? <i>If</i> "Yes," <i>complete Sche</i>					yee	e, or h	high 	est compensate	ed .	3	Yes	No X
4	For any individual listed on line 1a, is the sum the organization and related organizations greindividual										4	-	X
5	Did any person listed on line 1a receive or according converse rendered to the organization? If "									ndividual		i	

3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated	1	2.2	; 2
	employee on line 1a? If "Yes," complete Schedule J for such individual	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such		_	* was made
	individual	4		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual		, 	
	for services rendered to the organization? If "Yes," complete Schedule J for such person	5	L	<u> </u>

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

	(A) Name and business address	(B) Description of services	(C) Compensation
			0
			0
			0
			. 0
			0
2	Total number of independent contractors (including but not limited to those listed about more than \$100,000 of compensation from the organization	ve) who received	,

Part IX Statement of Functional Expenses UNITED STEELWORKERS LOCAL 13-1327

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						
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses	
1	Grants and other assistance to governments and					
	organizations in the United States. See Part IV, line 21	.0			v. 11	
2	Grants and other assistance to individuals in the				•	
	United States See Part IV, line 22	0			·	
3	Grants and other assistance to governments,				1	
	organizations, and individuals outside the					
	United States See Part IV, lines 15 and 16	0	_			
4	Benefits paid to or for members	0				
5	Compensation of current officers, directors,	45.000				
_	trustees, and key employees	45,982			· · · · · · · · · · · · · · · · · · ·	
6	Compensation not included above, to disqualified					
	persons (as defined under section 4958(f)(1)) and	o				
7	persons described in section 4958(c)(3)(B) Other salaries and wages	9,413				
7 8	Pension plan accruals and contributions (include	3,413				
0	section 401(k) and 403(b) employer contributions).	0				
9	Other employee benefits	0			-	
10	Payroll taxes	18.856				
11	Fees for services (non-employees):	10,000				
	Management	0				
b	Legal	4,003				
c	Accounting	0			· · · · · · · · · · · · · · · · · · ·	
ď	Lobbying	0				
e	Professional fundraising services See Part IV, line 17	0	,			
f	Investment management fees	0				
g	Other	0				
12	Advertising and promotion	0				
13	Office expenses	3,314				
14	Information technology	0				
15	Royalties	0				
16	Occupancy	7,139				
17	Travel	27,062		,		
18	Payments of travel or entertainment expenses					
	for any federal, state, or local public officials	0				
19	Conferences, conventions, and meetings	1,095				
20	Interest	0	-			
21	Payments to affiliates	0			ļ	
22	Depreciation, depletion, and amortization	0	0	0		
23 24	Insurance Other expenses. Itemize expenses not covered	<u> </u>				
24	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	PER CAPITA FEES	8,942				
b	DONATIONS TO CIVIC ORGANIZATIONS	3,247				
c	FEES AND DUES REMITTANCE	2,450				
ď		0				
e	All other expenses	0				
25	Total functional expenses. Add lines 1 through 24e	131,503	0	0		
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 if					
	following SOP 98-2 (ASC 958-720)					

71-6066864

Form 990 (2011) UNITED STEELWORKERS LOCAL 13-1327

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	. 210,745	1	283,396
	2	Savings and temporary cash investments	. 2.10,7.19		0
	3	Pledges and grants receivable, net	. 0	3	0
	4	Accounts receivable, net	. 0	4	0
	5	Receivables from current and former officers, directors, trustees, key			:
		employees, and highest compensated employees. Complete Part II of]
		Schedule L	0	5	0
	6	Receivables from other disqualified persons (as defined under section		_	
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing	g		,
		employers and sponsoring organizations of section 501(c)(9) voluntary	-		7
\$		employees' beneficiary organizations (see instructions)	.	6	0
Assets	7	Notes and loans receivable, net	0		0
ğ	8	Inventories for sale or use	. 0	8	0
	9	Prepaid expenses and deferred charges	. 0	9	0
	10a	Land, buildings, and equipment. cost or			,
		other basis. Complete Part VI of Schedule D 10a 125,0	027		
	b	Less. accumulated depreciation 10b	0 125,027	10c	125,027
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities See Part IV, line 11	. 0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34) .	. 335,772	16	408,423
	17	Accounts payable and accrued expenses	0	17	0
	18	Grants payable	0	18	0
	19	Deferred revenue	. 0	19	0
	20	Tax-exempt bond liabilities	0		0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
Liabilities	22	Payables to current and former officers, directors, trustees, key			1
Ħ		employees, highest compensated employees, and disqualified			
iat	۱.,	persons Complete Part II of Schedule L	0		0
_	23	Secured mortgages and notes payable to unrelated third parties .	0		0
	24	Unsecured notes and loans payable to unrelated third parties . Other liabilities (including federal income tax, payables to related third	.	24	0
	25	parties, and other liabilities not included on lines 17-24). Complete			į
		Part X of Schedule D	0	25	0
	26	Total liabilities. Add lines 17 through 25	0		0
		Organizations that follow SFAS 117, check here ► X and	<u>_</u>		
S	İ	complete lines 27 through 29, and lines 33 and 34.			
Š		•	225 772		400 400
<u>a</u>	27	Unrestricted net assets	335,772		408,423
8	28	Temporarily restricted net assets	. 0		0
Š	29	·	0	25	<u> </u>
7		Organizations that do not follow SFAS 117, check here ▶			
Net Assets or Fund Balances		and complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds	0		0
As	31	Paid-in or capital surplus, or land, building, or equipment fund	0		0
et	32	Retained earnings, endowment, accumulated income, or other funds .	005.770		0
Z	33	Total net assets or fund balances	. 335,772		408,423
	34	Total liabilities and net assets/fund balances	335,772	34	408,423

Form 9	90 (2011) UNITED STEELWORKERS LOCAL 13-1327	71	1-6066864	Pa	ge 12
Part	XI Reconciliation of Net Assets	-			
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		204	1,154
2	Total expenses (must equal Part IX, column (A), line 25)	2			,503
3	Revenue less expenses. Subtract line 2 from line 1	3		72	2,651
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		335	5,772
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0
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		408	3,423
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.				Carlo Markett
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>
b	Were the organization's financial statements audited by an independent accountant?		2b		<u> </u>
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig the audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O.	ın			A. Alexander
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both.	•		-	7.2
	Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audit		3b		
	Togained dudit of addito, explain why in contedute o and december any stope taken to undergo such addit	··	1	990	(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.

OMB No 1545-0047 2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990. ► See separate instructions.

Employer identification number Name of the organization UNITED STEELWORKERS LOCAL 13-1327 71-6066864 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . 1 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) . . 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised No funds are the organization's property, subject to the organization's exclusive legal control? Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(i)? . . . In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X.

_	•
Page	4

Part									ıed)	
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant									
	use of its collection items (check all that ap	ply).	_	7						
а	Public exhibition		d	Loan	or exchange p	progran	ns			
b	Scholarly research		e	Other						
С	Preservation for future generations									
4	Provide a description of the organization's Part XIV.	collections and	explair	n how they	further the o	rganiza	tion's exempt p	urpose ir	1	
5	During the year, did the organization solicit assets to be sold to raise funds rather than							Ye	s 🗌	No
Part	IV Escrow and Custodial Arrange	ments. Comp	lete if t	he organ	ization answ	ered "	Yes" to Form	990. Par		
	IV, line 9, or reported an amount			_				•		
1a	Is the organization an agent, trustee, custo				ntributions or	other a	ssets not			
	included on Form 990, Part X?							Ye	s 🔙	No
þ	If "Yes," explain the arrangement in Part XI	IV and complete	e the fo	llowing tal	ble.					
								Amount		
C	Beginning balance			•		1 <u>c</u>				
d	Additions during the year	•	• •			1d		·		
e	Distributions during the year					1e 1f				0
f	Ending balance		V 1				· I		- 🔯	—— <u> </u>
2a	Did the organization include an amount on		X, line	21?		•		Ye	s X	No
b Part	If "Yes," explain the arrangement in Part XIV Endowment Funds. Complete if		ion and	swered "\	es" to Form	aan I	Part IV line 10	<u> </u>		
ган		Current year		nor year	(c) Two years		(d) Three years bac		ur years	back
1a	Beginning of year balance .	, carrette year	(3) (1)	,	(0)		(4,	(0),10	,	3
b	Contributions									7
C	Net investment earnings, gains,									9,
	and losses .									
d	Grants or scholarships									
e	Other expenditures for facilities									
	and programs									- 4
f	Administrative expenses					_				
g	End of year balance Provide the estimated percentage of the cu	0	halana	0		0		0		
2	Board designated or quasi-endowment	inent year end	%	e (iiile 19,	column (a)) i	ieiu as.				
a b	Permanent endowment	%	/0							
c	Temporarily restricted endowment	%								
•	The percentages in lines 2a, 2b, and 2c sh	·	%.							
3a	Are there endowment funds not in the poss			ation that a	are held and a	adminis	tered for the	_		
	organization by.								Yes	No
	(i) unrelated organizations .							3a(i)		
	(ii) related organizations	•	•				•	3a(ii)		
b	If "Yes" to 3a(ıı), are the related organization						•	3b		
4_	Describe in Part XIV the intended uses of t									
Part					Ĭ					
	Description of property	(a) Cost or othe (investment		1 ' '	ost or other is (other)		Accumulated epreciation	(d) Bo	ok valu	е
	Lond	(iiivesuner		+	<u> </u>		- preciation			0 000
1a h	Land		<u> </u>	+	40,000 72,000		0			0,000 2,000
b c	Buildings	·		-	72,000		0			<u>2,000</u> 0
d	Equipment			+	13,027		0		1	3,027
e	Other			+	10,027		0		·	0
	I. Add lines 1a through 1e. (Column (d) mus	t equal Form 99	90, Par	t X, colum	n (B), line 10((c).)			12	5,027

UNITED STEELWORKERS LOCAL 13-1327 71-6066864 Schedule D (Form 990) 2011 Page 3 Investments—Other Securities. See Form 990, Part X, line 12 Part VII (a) Description of security or category (c) Method of valuation (b) Book value (including name of security) Cost or end-of-year market value 0 (1) Financial derivatives 0 (2) Closely-held equity interests 0 0 0 (B) 0 0 0 0 0 0 O Total (Column (b) must equal Form 990, Part X, col (B) line 12) ol Investments—Program Related. See Form 990, Part X, line 13. Part VIII (c) Method of valuation (a) Description of investment type (b) Book value Cost or end-of-year market value 0 (1)0 (2) 0 (3) 0 (4) ol (5) 0 (6)0 (7) 0 (8) 0 (9) (10)0 Total. (Column (b) must equal Form 990, Part X, col (B) line 13) 0 Other Assets. See Form 990, Part X, line 15. Part IX (a) Description (b) Book value (1) 0 (2) 0 (3)0 (4) 0 0 (5) 0 (6) 0 (7) 0 (8) 0 (9) 0 (10)Total. (Column (b) must equal Form 990, Part X, col (B) line 15.). 0 Other Liabilities. See Form 990, Part X, line 25. (a) Description of liability (b) Book value (1) Federal income taxes 0 0 (2) 0 (3) 0 (4)0 (5) (6)0 (7) 0 (8) 0 (9)

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).

<u>(10)</u> <u>(</u>11)

Total (Column (b) must equal Form 990, Part X, col (B) line 25)

0

0

Sched	ule D (Form 990) 2011			Page 4
Par	XI Reconciliation of Change in Net Assets from Form 990 to	Audited Financia	Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	0
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	0
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	0
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	·
6	Investment expenses		6	
7	Prior period adjustments		7	
8			8	
9	Total adjustments (net). Add lines 4 through 8	•	9	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines	3 and 9	10	0
Par			per 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	2a		
b	Donated services and use of facilities	2b	- 1/2	
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	0
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a		
b	Other (Describe in Part XIV)	_4b		
С	Add lines 4a and 4b		4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			0
Par	Reconciliation of Expenses per Audited Financial Stateme	ents With Expens	es per Return	
1	Total expenses and losses per audited financial statements		. 1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIV.)	2d		
е	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1	i i i	. 3	0
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	45	**	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV.)	4b	——————————————————————————————————————	0
C	Add lines 4a and 4b		4c 5	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	o.)		0
	Supplemental Information	Sent III limes to and	4. Dort IV lines 1	h
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; F 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Pa			
	oart to provide any additional information.	irt Ain, iiiles zu anu -	+b Also Complete	•
นแจ	all to provide any additional information.			
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UNITED STEELWORKERS LOCAL 13-1327 71-6066864 Schedule D (Form 990) 2011 Page 5 Part XIV Supplemental Information (continued)

Schedule D (Form 990) 2011

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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.

Open to Public Inspection

Employer identification number

UNITED STEELWORKERS LOCAL 13-1327	71-6066864
Form 990 Part VI Section A Line 6 THE LABOR ORGANIZATION HAS	FULL DUES PAYING MEMBERS
Form 990 Part VI Section A Line 7a THE LABOR ORGANIZATIONS A	CTIVE MEMBERS EACH HAVE ONE VOTE &
ELECT OFFICERS OF THE GOVERNING BODY EVERY THREE YEAR	ARS AS SPECIFIED IN THE CONSITUTION
Form 990 Part VI Section A Line 7b THE LABOR ORGANIZATIONS A	CTIVE MEMBERS EACH HAVE ONE VOTE &
APPROVE ALL DECISIONS OF THE GOVERNING BODY & DECISION	NS THAT ARISE DURING SCHEDULED MEMBERSHIP
MEETINGS	
Form 990 Part VI Section B Line 11b THE LABOR ORGANIZATIONS	FINANCIAL OFFICERS & PRESIDENT
REVIEW THE FORM BEFORE FILING	
Form 990 Part VI Section B Line 19 THE LABOR ORGANIZATION DO	ES NOT ROUTINELY MAKE SUCH
DOCUMENTS AVAILABLE TO THE PUBLIC	

Schedule O (Form 990 or 990-EZ) (2011)		Page ∠
Name of the organization	Employer identification number	
UNITED STEELWORKERS LOCAL 13-1327	71-6066864	
		
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