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

OMB No 1545-0047

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

Open to Public

				
AI	or the	2011 calèndar year, or tax year beginning JUL 1, 2011 and ending	JUN 30, 2012	
В	Check if	C Name of organization	D Employer identific	cation number
ε	pplicable	UNITED ASSOCIATION OF JOURNEYMEN AND 210		
	Addres change	S TOGAT		
ᆮ	Name	Doing Business As	35_2·	116536
H	lchange □linitial		•	
F	retum □Termin-	Number and street (or P O box if mail is not delivered to street address) Room/st	•	
F	_lated	2001 EAST OSKE PEACE	(219	942-7224
느	Amend	City or town, state or country, and ZIP + 4	G Gross receipts \$	745,988.
	_Applica	MERRIDDAL, IN 40410	H(a) Is this a group re	turn
	pendin	F Name and address of principal officer:DAVID MISCH	for affiliates?	Yes X No
		2901 E. 83RD PLACE, MERRILLVILLE, IN 4641	O H(b) Are all affiliates inc	luded? Yes No
$\overline{\Gamma}$	Гах-ехе	mpt status:		list (see instructions)
		PLUMBERSLOCAL210.ORG	H(c) Group exemption	•
_		organization Corporation Trust Association X Other ► LABOR L y	and of formation 2000 M	State of local dominio TM
			ear of formation 2000 N	1 State of legal domicile 111
		Summary	TNAME CAROD M	ACCURATION AND
e		· — — — — — — — — — — — — — — — — — — —	INATE LABOR M	ATTERS AND
au	-	TO ADMINISTER TO ANY LABOR PROBLEMS OF MEMBE		<u> </u>
Ĕ	2 (Check this box 🕨 📖 if the organization discontinued its operations or disposed of m	nore than 25% of its net as	sets.
Š	1 8	lumber of voting members of the governing body (Part VI, line 1a)	3	17
g	4 1	lumber of independent voting members of the governing body (Part VI, line 1b)	4	15
S	1	otal number of individuals employed in calendar year 2011 (Part V, line 2a)	5	4
ij	1	otal number of volunteers (estimate if necessary)	6	0
Activities & Governance	1	•	 	0.
¥	1	otal unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	br	Net unrelated business taxable income from Form 990-T, line 34	7b	
			Prior Year	Current Year
ē	8	Contributions and grants (Part VIII, line 1h)	0.	0.
Revenue	9 F	Program service revenue (Part VIII, line 2g)	629,137.	650,611.
ě	10	nvestment income (Part VIII, column (A), lines 3, 4 and Vol E	3,443.	502.
ш	11 (Other revenue (Part VIII, column (A), times 5,00 8 90, 10e, and 11e)	96,576.	94,875.
		otal revenue add lines 8 through 11 (must equal Part VIII, powlan (A) Hipe 12)	729,156.	745,988.
	1 -	Grants and similar amounts paid (Part IX, column (4), lines 1.3)	5,440.	3,565.
		Benefits paid to or for members (Part I Column (A), line 4)	0.	0.
		160\	400,828.	412,321.
Expenses			400,626.	
Ë		Professional fundraising fees (Part IX, column (A)) (1)	U •	0.
쏬		otal fundraising expenses (Part IX, column (D) line 25)	250 051	
	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	352,974.	317,129.
	18 7	otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	759,242.	733,015.
	19 F	Revenue less expenses. Subtract line 18 from line 12	<30,086.	> 12,973.
Net Assets or Fund Balances			Beginning of Current Year	End of Year
ian	20 7	otal assets (Part X, line 16)	904,865.	916,546.
ASS	21 7	otal liabilities (Part X, line 26)	37,695.	36,403.
₹ĕ	22 1	let assets or fund balances. Subtract line 21 from line 20	867,170.	880,143.
D.	art II	Signature Block	001/1100	000/1438
-			4	
		ties of perjury, I declare that I have examined this return, including accompanying schedules and sta	•	/ knowledge and belief, it is
true	, correct	and complete Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge	
		David Misel	11-6	7-12
Sig	n	Signature of officer	Date	
Her	e	DAVID MISCH, BUSINESS MANAGER		
		Type or print name and title		
		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Paid		BERNARD J. SULLIVAN Banuard J. Sullivan	11/5/14 if self-employe	P01208664
	F	Firm's name BANSLEY & KIENER, L.L.P. C. M.	Firm's EIN ▶	36-2152389
•	⊢	Firm's address 8745 W HIGGINS	Y FIIII S EIN	33 2132303
USC	Jiiiy	7	n	2121262 2700
_	=	CHICAGO, IL 60631	Phone no (312)263-2700
May	the IR	S discuss this return with the preparer shown above? (see instructions)		X Yes No
IVIC	1110 111	12 LHA For Paperwork Reduction Act Notice, see the separate instructions.		Form 990 (2011)

4e Total program service expenses

Other program services (Describe in Schedule O.)

including grants of \$

Form 990 (2011)

) (Revenue \$

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Part IV	Checklist	of	Required	Schedules

İ			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_		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	_3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect]
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
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		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		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_		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, VIII, IX, or X			
	as applicable.			1
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		Х	
	Part VI	11a		
Ь	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	446	1	x
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b		
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
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	116		
ď	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
۰	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X	11e	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		Х
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
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
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		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	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			,,
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			1,
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b_	000	
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Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u>X</u>
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 2º If "Yes," complete Schedule I, Parts I and III	22_		<u>X</u>
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		<u> </u>
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		X
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	•			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
ь	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	۵		
	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	000		х
07	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	ļ	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial		İ	
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	27		х
00	of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21		
28	instructions for applicable filing thresholds, conditions, and exceptions):			
а		28a	•	Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	<u> </u>	X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
Ŭ	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		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			ļ —
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			İ
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b		ŀ		١,,
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	<u> </u>	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	1		
	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			х
•	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	 	 ^-
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	20	X	
	Note. All Form 990 filers are required to complete Schedule O	38	_ <u>^</u>	1

Form **990** (2011)

LOCAL 35-2116536 Form 990 (2011) 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 3 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a Ō 1ь b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming X (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 4 filed for the calendar year ending with or within the year covered by this return Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2ь Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3ь 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country. See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts Х 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Х 5b b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5с 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible? ва b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6ь were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 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? 7b b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year 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 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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 Sponsoring organizations maintaining donor advised funds. 9 a Did the organization make any taxable distributions under section 4966? 9a **b** Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter. 10a a Initiation fees and capital contributions included on Part VIII, line 12 10ь b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter 11a a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12b b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 13a a is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13c c Enter the amount of reserves on hand

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14b

X

14a Did the organization receive any payments for indoor tanning services during the tax year?

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

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Part VI 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.

	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
	Check if Schedule O contains a response to any question in this Part VI			X				
<u>Sec</u>	tion A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 17							
	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 0							
b	Enter the number of voting members included in line 1a, above, who are independent 15							
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		Х				
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?	5		X				
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?							
6	Did the organization have members or stockholders?	6	X					
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	X					
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	X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
a	The governing body?	8a	X					
b	Each committee with authority to act on behalf of the governing body?	8b	Х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)							
			Yes	No				
10a	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?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990							
12a		12a		Х				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b						
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe							
	ın Schedule O how this was done	12c						
13	Did the organization have a written whistleblower policy?	13	_	X				
14	Did the organization have a written document retention and destruction policy?	14	ļ	X				
15	Did the process for determining compensation of the following persons include a review and approval by independent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a		Х				
b	Other officers or key employees of the organization	15b		Х				
	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	1						
	taxable entity during the year?	16a	ļ	X				
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		<u> </u>				
<u>Sec</u>	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed $ ightharpoonup$ IN							
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) and 990-T (Section 501(c)(3)s only) are	availat	le					
	for public inspection. Indicate how you made these available. Check all that apply.							
	Own website							
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncıal					
	statements available to the public during the tax year.							
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion: 🕨	-					
	DAVID MISCH - (219)942-7224							
13200	2901 E. 83RD PLACE, MERRILLVILLE, IN 46410							

01-23-12

LOCAL

Part VIII 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

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

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)			(0	>)		,	(D)	(E)	(F)
Name and Title	Average hours per week	box, offic	not c unle	Posi heck ss pe id a d	more rson i	than is bot	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustae or director	institutional trustae	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) DAVID MISCH	45.00			, ,				70 207	0	EE 252
BUSINESS MANAGER	45.00			X		<u> </u>		79,287.	0.	55,253.
(2) MATT TERRY	45.00			v				00 056	0.	50 76A
BUSINESS AGENT	45.00	-		X			_	80,956.	<u> </u>	59,764.
(3) MICHAEL GREENYA	0.50			X				0.	0.	0.
PRESIDENT	0.30			Λ		├	 			
(4) SALVADOR ESPINO	0.50			Х				0.	0.	0.
VICE-PRESIDENT (5) RAYMOND CRAWFORD	0.50	-							-	
(5) RAYMOND CRAWFORD RECORDING SECRETARY	0.20			х				0.	0.	0.
(6) DAVID KOUNTZ		-	<u> </u>		-	 	-	,		
TREASURER	0.20			Х				0.	0.	0.
(7) DANNY GRONENDYKE		† –								
INSIDE GUARD	0.20			Х				0.	0.	0.
(8) KEITH KLEINFELDT										
EXECUTIVE BOARD	0.20			Х			<u>. </u>	0.	0.	0.
(9) SCOTT DEGROOT										_
EXECUTIVE BOARD	0.20			X				0.	0.	0.
(10) ROBERT DEPYSSLER						}			_	_
EXECUTIVE BOARD	0.20		ļ	Х		<u> </u>	ļ	0.	0.	0.
(11) MARK MOSE							l			
EXECUTIVE BOARD	0.20		<u> </u>	X		_	<u> </u>	0.	0.	0.
(12) MIKE VANDERTUUK			1	l						
FINANCIAL BOARD	0.20		<u> </u>	X		┢	_	0.	0.	0.
(13) KEVIN HOOGEVEEN	0.00			,,					_	_
FINANCIAL BOARD	0.20	 		Х		<u> </u>	 	0.	0.	0.
(14) ALEX CORIANO	0.00						l		_	
FINANCIAL BOARD	0.20		-	X	1	 	├	0.	0.	0.
(15) LEE CULVER	0.20			l.				0.	0.	0.
EXAMINING BOARD	0.20	 		X		-	┼-	· · ·	· ·	<u>.</u>
(16) MICHAEL BINDR	0.20			х				0.	0.	0.
EXAMINING BOARD	0.20	-	-	^	-	1	1	 		J .
(17) KENNETH DODRILL JR.	0.20			X				0.	0.	0.
EXAMINING BOARD	0.20		Ц.	1.23	1	1				Form 990 (2011)

132007 01-23-12

Form **990** (2011)

35-2116536

35-2116536 Page 8

	t VII Section A. C	Officers, Directors, Tru	stees, Key Er	mple	oyee	s, a	nd l	High	est	Compensated Employ	ees (continued)				9
	(A) Name an		(B) Average hours per	(do	not c	Pos heck ss pe	C) Itior more erson		one h an	(D) Reportable compensation	(E) Reportable compensation		am	(F) Imate ount o	-
			week (describe hours for related organizations in Schedule O)	stee or director	Institutional frustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC	other compensation from the organization and related organizations			e on ed
										1					
												. –			
1b	Sub-total									160,243.).	115	5,0	17.
	Total (add lines 1b							>		160,243.	().	115	0,0	0. 17.
<u> </u>	Total number of Indi- compensation from	_	ot limited to th	ose	liste	ed al	bove	e) wh	no re	eceived more than \$100	,000 of reportable			Yes	0 No
3	-	list any former officer, aplete Schedule J for s		uste	e, ke	y er	nplo	уее,	or	highest compensated e	mployee on		3	res	X
4	For any individual lis		ım of reportab							her compensation from for such individual	the organization		4		Х
5	rendered to the orga	anization? If "Yes," com							elat	ed organization or indivi	dual for services		5		X
1		for your five highest co								that received more than		ensa	ition fr	om	
	the organization rie	(A) Name and business			ONI					(B) Description of s		Cc	(C) ompen		1
	-														
									_			-			
2		ependent contractors (i		ot lı	mıte	d to		se lis	sted	d above) who received m	nore than		···-		
	w roo,ood or comper	Today non the organi	LULIOIT P						_		I	F	orm 9	90 (2	2011)

Page 9 Part VIII Statement of Revenue (D) (A) (B) (C) Revenue excluded from Total revenue Related or Unrelated tax under sections 512, 513, or 514 exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1a 1 a Federated campaigns b Membership dues 1b c Fundraising events 1c 1d d Related organizations 1e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 9 Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f **Business Code** 900099 497,656. 497,656 2 a ASSESSMENT Program Service Revenue 900099 117,009 117,009. DUES 900099 24,000. 24,000. RENTAL INCOME 11,946. 11,946. 900099 FINES e All other program service revenue 650,611 Total. Add lines 2a-2f 3 Investment income (including dividends, interest, and 502 502. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 5 (II) Personal (ı) Real 6 a Gross rents **b** Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less. direct expenses \blacktriangleright c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses \blacktriangleright c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 900099 ADMINISTRATIVE FEE 59,962. 59,962 DEATH FUND 900099 34,413. 34,413. c MISCELLANEOUS INCOME 900099 500. 500. d All other revenue 94,875 Total. Add lines 11a-11d 745,988. 745,486.

502.

Total revenue. See instructions

12

132009 01-23-12

Form 990 (2011)

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 responsor include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b, 8	3b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
	Grants and other assistance to governments and	2 5 6 5			
	organizations in the United States See Part IV, line 21	3,565.	·		
	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				·· ···································
	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,	162 160			
	trustees, and key employees	163,169.			•
	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	67.600			
	Other salaries and wages	67,608.			
	Pension plan accruals and contributions (include	110 041			
	section 401(k) and section 403(b) employer contributions)	118,041.			
	Other employee benefits	42,229.			
	Payroll taxes	21,274.			
	Fees for services (non-employees):				
а	Management	10 560			
	Legal	12,568.			
	Accounting	15,939.			
	Lobbying				
	Professional fundraising services. See Part IV, line 17		· · · · · · · · · · · · · · · · · · ·		
	Investment management fees				
_	Other	4 020			
	Advertising and promotion	4,828.			
	Office expenses	18,157.			
	Information technology				
	Royalties	10 040			
	Occupancy	10,048.			
	Travel	11,218.			
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0.503			
	Conferences, conventions, and meetings	9,503.			
	Interest	121 770			
	Payments to affiliates	131,778.	··· ·····		
	Depreciation, depletion, and amortization	34,440. 5,859.	131		<u> </u>
	Insurance	3,839.			·····
	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)	25 270		<u> </u>	
-	DEATH FUND BENEFIT	35,370.			
	REPAIRS & MAINTENANCE	6,941.			
	SECRETARIAL FEES	5,360.			
	MISCELLANEOUS	4,973.	 		
	All other expenses	10,147.			
	Total functional expenses. Add lines 1 through 24e	733,015.			
	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation	į.		1	

132010 01-23-12

Form **990** (2011)

LOCAL 35-2116536 Page 11 Form 990 (2011) Part X Balance Sheet (A) (B) Beginning of year End of year 67,314. 67,709. Cash - non-interest-bearing 1 405,835. 355,570. 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 894,066. basis. Complete Part VI of Schedule D 10a 414,131. 431,716. 479,935. 10b b Less: accumulated depreciation 10c 11 Investments - publicly traded securities 11 12 Investments · other securities See Part IV, line 11 12 13 Investments · program-related. See Part IV, line 11 13 14 Intangible assets 14 13,332. 15 Other assets See Part IV, line 11 0. 15 916,546. 904,865. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 17 Accounts payable and accrued expenses 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees. highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of 37,643. 36,403. 25 Schedule D 37,695. 36,403. Total liabilities. Add lines 17 through 25 X and complete Organizations that follow SFAS 117, check here

> 916,546. Form 990 (2011)

880,143.

585,258.

294,885.

Net Assets or Fund Balances

27

29

30

31

32

33

lines 27 through 29, and lines 33 and 34.

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Organizations that do not follow SFAS 117, check here

Unrestricted net assets

Temporarily restricted net assets

Permanently restricted net assets

complete lines 30 through 34.

Total net assets or fund balances

575,411.

291,759.

867,170.

904,865.

27

28

29

30

31

32

33

34

UNITED ASSOCIATION OF JOURNEYMEN AND 210

Form	1990 (2011) LOCAL	<u> 35-2</u>	2116536	Pag	ge 12				
Pa	rt XI Reconciliation of Net Assets								
	Check if Schedule O contains a response to any question in this Part XI								
		. 1	741	- ^	88.				
1	Total revenue (must equal Part VIII, column (A), line 12)								
2	Total expenses (must equal Part IX, column (A), line 25)								
3	Revenue less expenses. Subtract line 2 from line 1	3			73.				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	86	<u> </u>	70.				
5	Other changes in net assets or fund balances (explain in Schedule O)	ther changes in net assets or fund balances (explain in Schedule O)							
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	880) <u>, 1</u>	43.				
Pa	rt XII Financial Statements and Reporting								
	Check if Schedule O contains a response to any question in this Part XII				X				
				Yes	No				
1	Accounting method used to prepare the Form 990 Cash Cash Other MODIFIE	D CAS	<u>SH</u>						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х					
b	Were the organization's financial statements audited by an independent accountant?		2b		X				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,							
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	<u></u>				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.							
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a							
	separate basis, consolidated basis, or both:								
	Separate basis X 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				
h	If "Yes " did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audi	t 🗀						

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form **990** (2011)

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

UNITED ASSOCIATION OF JOURNEYMEN AND 210 LOCAL

Employer identification number 35-2116536

organization answered "Yes" to Form 990, Part IV. line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate value at end of year 3 Aggregate value at end of year 4 Aggregate value at end of year 5 Did the organization in property, subject to the organization's exclusive legal contro? Did the organization in property, subject to the organization's exclusive legal contro? Did the organization in grantees, donor, and donor advisors in writing that grant funds can be used only for charitable purpose and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible purpase sending grantees, donor, and donor advisor, or for any other purpose conferring impermissible purpase sending for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible purpase sending? Perticularly and the property of the organization (check all that apoly) Prosecution of land for public use (e.g., recreation or education) Preservation of land for public use (e.g., recreation or education) Preservation of an instruction assements on a conservation easement on the last qualified conservation in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements C Number of conservation easements in educed in (c) acquired after 6/1706, and not on a historic structure listed in the National Register Number of conservation have a written peloky regarding the periodic monitoring, inspection, handling of violations, and enforcement or monitoring, inspection, and enforcing conservation easements during the year > \$ No boose the organization have a written peloky regarding the periodic monitoring, inspection, handling of violations, and enforcency conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(k) n) In Part XV, describe him the organi	Pa	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
Total number at end of year Aggregate contributions to (during year) Aggregate value at end of year Det the organization informal idenors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Dot the organization inform all grantiess, 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 impermisable private benefit? Part II Conservation Essements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation essements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of and for public use (e.g., recreation or education) Preservation of on a trial habitat Preservation of open space Complete line 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation essement on the last day of the tax year. Total number of conservation essements Total screage restricted by conservation essements Total acreage restricted by conservation essements Number of conservation essements included in (c) acquired after \$117/06, and not on a historic structure listed in the National Register Number of conservation essements modified, transferred, released, extinguished, or terminated by the organization during the tax year: Number of states where property subject to conservation essements in located by the organization have a written policy regarding the periodic monitoring, inspection, and enforcing conservation essements during the year by and escition 170(h)(4)(B)(i) A mount of states where property subject to conservation essements in the requirements of section 170(h)(4)(B)(ii) For an acress of the conservation essements in property of the property of the property of the property of the property of the property o		organization answered "Yes" to Form 990, Part IV, line	e 6.	
2 Aggregate contributions to (during year) 3 Aggregate value at end of year 5 Did the organization informal conors and donor advisors in writing that the assets held in donor advised funds are the organization informal conors and donor advisors in writing that the assets held in donor advised funds are the organization informal 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 impermissable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissable private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Preservation of land for public use (e.g., recreation or education) Preservation of an histonically important land area Preservation of olar for public use (e.g., recreation or education) Preservation of an entitle distribution of a certified histonic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement in the last day of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements micluded in (e) acquired after 8/17/06, and not on a histonic structure listed in the National Repister Number of conservation easements micluded in (e) acquired after 8/17/06, and not on a histonic structure listed in the National Repister Number of conservation easements micluded in (e) acquired after 8/17/06, and not on a histonic structure listed in the National Repister Number of conservation easements micluded in (e) acquired after 8/17/06, and not on a histonic structure listed in the National Repister Number of conservation easements in thickles? Number of conservation easements in thickles? Number of conservation easements in thickles? Solve the history o			(a) Donor advised funds	(b) Funds and other accounts
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 funds are the organization in form all donors and donor advisors on writing that grant tunds 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? Port II Conservation Easements. Complete if the organization (sheck all that apphy) □ Preservation of Land for public use (e.g., recreation or education) □ Preservation of and for public use (e.g., recreation or education) □ Preservation of an atural habitat □ Preservation of and for public use (e.g., recreation or education) □ Preservation of a certified historic structure □ Preservation of a certified historic structure □ Preservation of a certified historic structure □ Preservation of oneservation easements □ Agy of the tax year. a Total number of conservation easements □ Total number of conservation easements □ Total number of conservation easements included in (e) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements included in (e) acquired after 8/17/06, and not on a historic structure listed in the National Register 4 Number of states where property subject to conservation easements is located ► 5 Deas the organization have a written policy registration easements in located or violations, and enforcement of the conservation easements in thotal? 5 Deas each conservation eavement in included in (e) acquired after 8/17/06, and not on a historic structure listed in the National Register 5 Deas the organization have a written policy registration easement is located ► 7 Amount of expanization have a written policy registration easement is located ► 8 Amount of the conservation easements in holds? 9 In Part XIV, describe how the organization reports conservation easements during the year ► \$ 10 In Part	1	Total number at end of 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 funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chartable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible purposes and not for the benefit of the donor or donor advisor. Portion of purpose the purpose and the donor or donor advisor or for any other purpose conferring impermissible purpose and not for the benefit of the organization control or for any other purpose conferring impermissible purpose and not for the benefit of the organization control purpose conferring impermissible purposes and the donor advisor of any other purpose conferring impermissible purpose and on the donor advisor of the control purpose conferring impermissible purposes and the donor advisor of the control purpose conferring impermissible purposes and the donor advisor of the control purpose conferring impermissible purposes and not for the purpose conferring impermissible purposes and the donor advisor of the control purpose conferring impermissible purposes and the donor advisor of any other purposes conferring impermissible purposes and the donor advisor of any other purposes conferring impermissible purposes and the donor advisor of any other purposes of the tax year. A total number of conservation easements and control purpose and purpose of conservation easements modified, transferred, released, exting	2	Aggregate contributions to (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 funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chartable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible purposes and not for the benefit of the donor or donor advisor. Portion of purpose the purpose and the donor or donor advisor or for any other purpose conferring impermissible purpose and not for the benefit of the organization control or for any other purpose conferring impermissible purpose and not for the benefit of the organization control purpose conferring impermissible purposes and the donor advisor of any other purpose conferring impermissible purpose and on the donor advisor of the control purpose conferring impermissible purposes and the donor advisor of the control purpose conferring impermissible purposes and the donor advisor of the control purpose conferring impermissible purposes and not for the purpose conferring impermissible purposes and the donor advisor of the control purpose conferring impermissible purposes and the donor advisor of any other purposes conferring impermissible purposes and the donor advisor of any other purposes conferring impermissible purposes and the donor advisor of any other purposes of the tax year. A total number of conservation easements and control purpose and purpose of conservation easements modified, transferred, released, exting	3			
5 Dot the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are 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 impermissable purpose benefit? Part II	4			
6 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 impermissable private benefit? Part II Conservation Easements	5		writing that the assets held in donor advi	sed funds
mnpermissible private benefit? Part 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 Protection of natural habitat Preservation of an historically important land area Protection of natural habitat Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2 a through 2 of the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. A Total number of conservation easements Held at the End of the Tax Year 2a		are the organization's property, subject to the organization's	exclusive legal control?	Yes No
Impermissible private benefit? Yes No Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.	6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	e used only
Impermissible private benefit? Yes No Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.		for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring
Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. 1 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 Protection of natural habitat Preservation of personal protection of natural habitat Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements Preservation of conservation easements 5 Total acreage restricted by conservation easements 6 Number of conservation easements included in (e) acquired after 8/17/06, and not on a historic structure listed in the National Register 8 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year				
Preservation of land for public use (e.g., recreation or education) Preservation of a natural habitat Protection of natural habitat Preservation of a certified historic structure Preservation of poen space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements c 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 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 ▶ 4 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(0) 9 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),	Par		ganization answered "Yes" to Form 990,	Part IV, line 7.
Protection of natural habitat	1	Purpose(s) of conservation easements held by the organization	ion (check all that apply)	-
Protection of natural habitat		Preservation of land for public use (e.g., recreation or e	education) Preservation of an hi	storically important land area
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d 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 ▶ 4 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 5 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ 5 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(B)(B)(B)(B)(B)(B)(B)(B)(B)(B)(B)(B)				tified historic structure
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 132051 01-23-12

Schedule D (Form 990) 2011

UNITED ASSOCIATION OF JOURNEYMEN AND 210

Sche	dule D (Form 990) 2011 LOCAL								16536	
Pai	t III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures, c	or Other	Simil	<u>ar Asse</u>	ts (contine	ued)
3	Using the organization's acquisition, accession	on, and other record	ds, chec	k any of the	following tha	it are a sigi	nıfıcant	use of its	collection i	tems
	(check all that apply):									
а	Public exhibition	c			hange progra	ams				
þ	Scholarly research	e	اــا :	Other						
C	Preservation for future generations									
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.									
5	During the year, did the organization solicit or					er sımılar a	ssets		٦.	
	to be sold to raise funds rather than to be ma								Yes	<u> No</u>
Par	t IV Escrow and Custodial Arrang reported an amount on Form 990, Par	-	ete if the	e organizatio	on answered	"Yes" to F	orm 990), Part IV, I	ine 9, or	
1a	is the organization an agent, trustee, custodia	an or other intermed	diary for	contribution	ns or other as	sets not in	cluded			
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing	table:						
									Amount	
С	Beginning balance						1c			
đ	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?					<u></u>	Yes	L No
<u>b</u>	If "Yes," explain the arrangement in Part XIV.									
Pa	t V Endowment Funds. Complete if	the organization ar	swered	"Yes" to Fo	rm 990, Part	IV, line 10	·			
		(a) Current year	(b) F	rior year	(c) Two year	rs back (d	1) Three y	years back	(e) Four y	ears back
1a	Beginning of year balance								*** · *** · *** · **	,,, -', ,
b	Contributions									
c	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses				ļ					,, ,, ,, ,,
9	End of year balance								<u> </u>	
2	Provide the estimated percentage of the curr	ent year end baland	e (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c shou	•								
За	Are there endowment funds not in the posses	ssion of the organiz	ation tha	at are held a	and administe	ered for the	organi	zation	Γ	
	by:									es No
	(i) unrelated organizations								3a(i)	
_	(ii) related organizations								3a(ii)	
Ь	If "Yes" to 3a(II), are the related organizations	•							3b	
4	Describe in Part XIV the intended uses of the									
Pal	t VI Land, Buildings, and Equipm				T			. 1		
	Description of property	(a) Cost or o			t or other		umulate		(d) Book	value
		basis (investr	nent)		(other)	depr	eciation		EΛ	000
	Land				0,000.	1	37,7	21		<u>,000.</u>
b	Buildings				8,298.					,003.
	Leasehold improvements				7,616.		15,9 26,5			,333.
	Equipment				37,428.		33,8			
	Other		V - '				22,0			,571. ,935.
<u>i ota</u>	. Add lines 1a through 1e (Column (d) must ed	quai ⊢orm 990, Part	X, colur	nn (B), line	IU(C))		_		4/9	, 733.

Schedule D (Form 990) 2011

Part X Other Liabilities. See Form 990, Part X, line 25.	
(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DUE TO OTHER FUNDS	36,403.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
	26 402

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

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 2. FIN 48 (ASC 740)

132053

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

UNITED ASSOCIATION OF JOURNEYMEN AND 210 LOCAL

Employer identification number 35-2116536

FORM 990, PART I, ITEM K, OTHER ORGANIZATION TYPE:

LABOR UNION

FORM 990, PART VI, SECTION A, LINE 6: THE UNION IS A LABOR ORGANIZATION WHOSE MAIN OBJECTIVE IS TO COORDINATE LABOR MATTERS AND TO ADMINISTER TO ANY LABOR PROBLEMS OF ITS MEMBERS. THE UNION'S MEMBERS ARE THOSE COVERED INDIVIDUALS WHO WORK FOR EMPLOYERS SUBJECT TO THE COLLECTIVE BARGAINING AGREEMENT WITH THE UNION.

FORM 990, PART VI, SECTION A, LINE 7A: THE OFFICERS OF THE UNION ARE ELECTED TO THEIR POSITION BY THE UNION MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7B: THE UNION'S MEMBERSHIP CONSISTS OF INDIVIDUALS WORKING FOR EMPLOYERS UNDER A COLLECTIVE BARGAINING AGREEMENT WITH THE UNION AND INDIVIDUALS WHO HAVE RETIRED FROM THE UNION. A MEMBER IS ONE WHO HAS SATISFIED ITS REQUIREMENT FOR MEMBERSHIP AND IS IN GOOD STANDING WITH THE UNION. DEPENDING ON THE TYPE OF MEMBERSHIP STATUS A MEMBER HAS DETERMINES THE VOTING RIGHTS OF THE MEMBER. JOURNEYMAN, RETIRED JOURNEYMAN AND LIFE MEMBER JOURNEYMAN HAVE FULL VOTING RIGHTS ON ALL PRODUCTION WORKERS AND APPRENTICES HAVE NO VOTING RIGHTS. MATTERS.

FORM 990, PART VI, SECTION B, LINE 11: THE GOVERNING BODY AUTHORIZES THE BUSINESS MANAGER TO REVIEW AND APPROVE THE FILING OF THE FORM 990.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE FOR INSPECTION UPON REQUEST.

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

Schedule O (Form 990 or 990-EZ) (2011)

Name of the organization UNITED ASSOCIATION OF JOURNEYMEN AND 210 LOCAL	Employer identification number 35-2116536
FORM 990, PART XI, LINE 1	
THE UNION'S ACCOUNTING METHOD TO PREPARE THE FORM 990 IS	A MODIFIED
CASH BASIS. REVENUE AND THE RELATED ASSETS ARE RECOGNIZE	D WHEN RECEIVED
RATHER THAN WHEN EARNED, AND EXPENSES ARE RECOGNIZED WHE	N PAID RATHER
THEN WHEN INCURRED, EXCEPT FOR THE CAPITALIZATION AND DE	PRECIATION OF
PROPERTY AND EQUIPMENT.	
FORM 990, PART XII, LINE 2C	
THE BUSINESS MANAGER AND THE FINANCE BOARD SELECTS THE I	NDEPENDENT
ACCOUNTANTS. THE OVERSIGHT OF THE REVIEW OCCURS BY THE B	USINESS
MANAGER. THERE HAS BEEN NO CHANGES IN THIS PROCESS FROM	THE PRIOR YEAR.
	·····
	······

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ▶ See separate instructions. UNITED ASSOCIATION OF JOURNEYMEN AND 210 ▶ Attach to Form 990. LOCAL Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

2011. Open to Public Inspection OMB No 1545-0047

Employer identification number 35-2116536

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Part

	gullo								(B)	Section 312(b)(13)	entity?	Yes No
€	Direct controlling entity							elated tax-exempt	(ı)	Direct controlling	entity	_
(e)	End-of-year assets		:				į	one or more r			tion	_
					•	 		cause it had	(e)	Public charity	status (if section	501(c)(3))
চ	Total Income							Part IV, line 34 be	(p)	Exempt Code	section	
<u>ව</u>	Legal domicile (state or foreign country)							nswered "Yes" to Form 990,	(၁)	Legal domicile (state or	foreign country)	
(a)	Primary activity							i ons (Complete if the organization a	(q)	Primary activity		
(a)	Name, address, and EIN of disregarded entity							Identification of Related Tax-Exempt Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year)	(a)	Name, address, and EIN	of related organization	
								Part II				

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

Schedule R (Form 990) 2011

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527

INDIANA

CONTRIBUTIONS TO STATE AND

MAKES POLITICAL

PLUMBERS LOCAL UNION 210 POLITICAL ACTION COMMITTEE - 37-1505960, 2901 EAST 83RD

PLACE, MERRILLVILLE, IN 46410

LOCAL CANDIDATES

UNITED ASSOCIATION OF JOURNEYMEN AND 210

Schedule R (Form 990) 2011 LOCAL

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

Page 2

35-2116536

General or Percentage managing ownership Percentage Schedule R (Form 990) 2011 ownership Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) 3 Yes Share of end-of-year assets Code V-UBI amount in box n 20 of Schedule J K-1 (Form 1065) y Share of total income ate allocations? Disproportion-Yes No Ξ Type of entity (C corp, S corp, or trust) Share of end-of-year assets <u>6</u> Direct controlling entity Share of total income ত্ত Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicile (state or foreign country) **e** Primary activity Direct controlling entity চ (c)
Legal
domicile
(state or
foreign Primary activity <u>@</u> Name, address, and EIN of related organization Name, address, and EIN of related organization 132162 01-23-12 Part IV

UNITED ASSOCIATION OF JOURNEYMEN AND 210 LOCAL

Page 3

35-2116536

Schedule R (Form 990) 2011 LOCAL

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

2011	(066 m	Schedule R (Form 990) 2011		21	132163 01-23-12
					(9)
					(5)
					(4)
					(9)
					(2)
					(1)
		amount involved		type (a-r)	
		(d) Method of determining	(c) Amount involved	(b) Transaction	(a) Name of other organization
		elationships and transaction thresholds.	his line, including covered re	ho must complete t	2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds
×		11			r Other transfer of cash or property from related organization(s)
×					a Other transfer of cash or property to related organization(s)
×		1р			
×		0+			o Reimbursement paid to related organization(s) for expenses
×		1n			n Sharing of paid employees with related organization(s)
×		E		on(s)	m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
×	_	=		nization(s)	l Performance of services or membership or fundraising solicitations by related organization(s)
×		<u> </u>		nization(s)	k Performance of services or membership or fundraising solicitations for related organization(s)
×		<u>:</u>			i Lease of facilities, equipment, or other assets from related organization(s)
×		=			i Lease of facilities, equipment, or other assets to related organization(s)
×		# +			b Exchange of assets with related organization(s)
×		at.			
×		 			f Sale of assets to related organization(s)
×		16			e Loans or loan guarantees by related organization(s)
×		10			d Loans or loan guarantees to or for related organization(s)
×		10			c Gift, grant, or capital contribution from related organization(s)
×		1b			b Gift, grant, or capital contribution to related organization(s)
×	\prod	1a			a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
		Parts II-IV?	elated organizations listed ir	s with one or more r	1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
ટ્ટ	Yes				Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

UNITED ASSOCIATION OF JOURNEYMEN AND 210 LOCAL

35-2116536 Page 4

Schedule R (Form 990) 2011 LOCAL

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

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

(h) (i) (i) (k) Dapropor- Code V-UBI General or Percentage bonate amount in box 20 managing ownership	disa							
Perc	<u> </u>	- ···						
G) neral or anaging	Yes No							
Ger 20 ma	न -							-
P X X Q	ule K 1065)			:				
Code V-	Sched			:				
ame	وا د		<u> </u>					
(h)	Allocations?							_
	<u>≅l ≻</u>							
of year	year ts							
(g) Share of	assets							
9, 9	D							
, jo_	. e							
(f) Share of	income							
(e) Are all Partners sec 501(c)(3)	excluded from tax orgs? under section 512-514) Yes No		-				-	
Arc Partne	ەر ۲ 93							
come ted,	tax 2-514							
(d) nant inc , unrela	from 512							
(c omina ated, u	Section							
Pred (relg	under							
<u>a</u> 6						 		
(c) Legal domicile	country)							
) Sgal o	COU			,				
<u> </u>	<u>ō</u>							
(b) Primary activity								
(b)								
Prim								
(a) (b) (c) (d) (d) (d) (d) (e) Address, and EiN Primary activity Legal domicile (related, unrelated,			<u> </u>		 ·		<u> </u>	
z								
lg El								
(a) Name, address, and EIN								
(a) address,	5							
He, a								
Nar								
				1				

Schedule R (Form 990) 2011

UNITED ASSOCIATION OF JOURNEYMEN AND 210 35-2116536 Page 5 LOCAL Schedule R (Form 990) 2011 Part VII Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

132165 01-23-12

2011 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	No o	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction	
	BUILDINGS							,	***************************************				
\sim	2BUILDING	080100SL	SI	39,001	9	450,724.	•••••		450,724.	126,164.		11,557.	
ന്	/EMENTS	VARIESSL	TS	.000	16	298,298.).		298,298.	203,689.		12,276.	
	* 990 PAGE 10 TOTAL BUILDINGS FURNITURE & FIXTURES					749,022.		o	749,022.	329,853.	o o	23,833,	
*C H		VARIESSI	īsī	000.	9 #	37,428.			37,428.	32,389.		1,468.	
	* 990 PAGE 10 TOTAL FURNITURE & FIXTUR TRANSPORTATION EQUIPMENT			***************************************		37,428.		0	37,428.	32,389.	0	1,468.	
10	GAUTOMOBILE	VARIESSL		5.00 1	16	26,823.	· .,		26,823.			2,980.	
(T)	SAUTOMOBILE	082808SI		5.00	16	30,793.			30,793.	17,449.		6,159.	
	* 990 PAGE 10 TOTAL TRANSPORTATION EQU					57,616.		0	57,616.	17,449.	0	9,139.	
	LAND												
	r T	VARIESE	·ਮੁੱ			50,000.			.000,03			.0	
	AND					50,000.		0	50,000.	0	ó	0	,
	* GRAND TOTAL 990 PAGE 10 DEPR			•		894,066.		0	894,066.	379,691.	0	34,440.	

(D) - Asset disposed

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

4562

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

990

OMB No 1545-0172

Name(s) shown on return

Business or activity to which this form relates

Identifying number

UNI LOC	TED ASSOCIATION OF AL	JOURNEYM	EN AND		M 990 1	PAGE 10		35-2116536
Par	Election To Expense Certain Propert	y Under Section 17	79 Note: If yo	ou have any lis	ted property,	complete Par	t V before y	ou complete Part I
1 M	aximum amount (see instructions)						1	500,000.
2 To	otal cost of section 179 property place	d in service (see	instructions)			2	
3 T	nreshold cost of section 179 property	before reduction	ın lımıtatıon				3	2,000,000.
4 R	eduction in limitation. Subtract line 3 fr	om line 2. If zero	or less, ente	er -0-			4	
_	ollar limitation for tax year Subtract line 4 from line		•		e instructions		5	· · · · · · · · · · · · · · · · · · ·
6	(a) Description of pro			(b) Cost (busin		(c) Elect	ed cost	· .,,
7 11	sted property. Enter the amount from	line 29		<u> </u>	7			
	otal elected cost of section 179 proper		in column (c) lines 6 and			8	
	entative deduction Enter the smaller	•	iii colamii (c), iii ics o and	•		9	
	arryover of disallowed deduction from		110 Form 45	62			10	**
	usiness income limitation. Enter the sn	•			ro) or line 5		11	-
	ection 179 expense deduction. Add lin		•		•		12	
	arryover of disallowed deduction to 20				▶ 13		12	
	Do not use Part II or Part III below for				P 13			
Par					de listed pror	orty I		· ··· · · · · · · · · · · · · · · · ·
	pecial depreciation allowance for quali			-	<u>-</u>			
	•	ned property (oth	ier man iiste	d property) pi	aced in Servic	e duning	14	
	re tax year	-tion					14	
	roperty subject to section 168(f)(1) elec	SHOR					15	34,440.
Par	ther depreciation (including ACRS) MACRS Depreciation (Do not	include listed pr	operty \ (Se	a instructions	`		16	34,440.
2 641	t the inventor bepreciation (bollow	include listed pr	 	ection A	,			
47 14	ACRC dedications for accepts alread to				1		17	
	ACRS deductions for assets placed in	-	•	•		▶ □	¬ ├ ''	
10 Ity	ou are electing to group any assets placed in servi Section B - Assets I						iation Syste	,
	(a) Classification of property	(b) Month and year placed in service	(c) Basis fo (business/i	or depreciation nvestment use instructions)	(d) Recovery period			(g) Depreciation deduction
19a	3-year property							
b	5-year property	1 1					1	
	7-year property	1 1			†-·			
d	10-year property	1 1						
e	15-year property	1 1			 			
	20-year property	1						
	25-year property		· · · · · · · · · · · · · · · · · · ·		25 yrs.		S/L	
a	20 your property	/			27 5 yrs.	ММ	S/L	
h	Residential rental property	',	-		27 5 yrs	MM	S/L	
		' ,			39 yrs	MM	S/L	
i	Nonresidential real property	· ,			33 yıs	MM	S/L	6 <u></u>
	Section C - Assets Pl	aced in Service	During 201	1 Tax Year U	sing the Alte			tem
20a	Class life						S/L	
b	12-year	1		•	12 yrs.		S/L	
	40-year	 , 		··	40 yrs.	ММ	S/L	
Par		·				1 111111		
	sted property. Enter amount from line	28					21	
	otal. Add amounts from line 12, lines 1		es 19 and 9	0 in column (a), and line 21			
E	nter here and on the appropriate lines	of your return. Pa	artnerships a	and S corpora			22	34,440.
	or assets shown above and placed in so	•	e current yea	ar, enter the	23			

13421105 792784 BJS1502

ONITED ASSOCIATION OF JOURNEYMEN

Form 4562	(2011)	LOCAL	35-211653	36 Page 2
D	Linkari Dana artu /	la alcoda acotamana bolan	and an athenral ball and a second and a second and a second as a second as a second as a second as a second as	

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

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

	Section A -	Depreciation	on and Other I	nforma	tion (Ca	ution: S	See the	instruc	tions for li	mits for p	asseng	er auton	nobiles)		
24:	a Do you have evidence to s	upport the bu	sıness/investmer	it use cla	umed?	Y	es 🗌	No	24b If "Y	es," is th	e evide	nce writt	en?] Yes [No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentagi	l oti	(d) Cost or ner basis	l (bu	(e) sis for depr siness/inve use ont	estment	(f) Recovery period	,	od/ ention	Depre	h) ciation iction	Elec sectio	(i) cted on 179 ost
25	Special depreciation allo	owance for q	ualified listed p	roperty	placed	ın servi	ce durin	g the t	ax year an	d					
	used more than 50% in										25				
26	Property used more that	n 50% in a c	ualified busine	ss use:					T	,		,			
			%	<u></u>											
			%									ļ			
			%							<u> </u>					
<u>27</u>	Property used 50% or le	ess in a quali	fied business u	se:					1	1		F			
			%	1						S/L -					
_	······································		%	1				_		S/L·					
	 	<u> </u>	%							S/L·	,				
28	Add amounts in column	(h), lines 25	through 27 En	ter here	and on	line 21,	, page 1				28	ļ			
29	Add amounts in column	(i), line 26. E	nter here and o	on line 7	, page	1							29		
-	ou provided vehicles to y se vehicles.	our employe	es, first answe	r the qu	estions	ın Secti	on C to	see If y	ou meet a	an except	tion to d	completi	ng this s	ection fo)r
30	30 Total business/investment miles driven during the		uring the	(a) Vehicle			(b) Vehicle		(c) 'ehicle	(d Vehi	-	(€ Veh	e) icle	(f) Vehicle	
	year (do not include comm	nuting miles)													
31	Total commuting miles of	driven during	the year												
32	Total other personal (no driven	ncommuting) miles												
33	Total miles driven during Add lines 30 through 32	•							_						
34	Was the vehicle available	le for person	aluse	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	during off-duty hours?		[_								
35	Was the vehicle used pr	rimarily by a	more												
	than 5% owner or relate	ed person?											-		
36	Is another vehicle availa	ble for perso	nal												
_	use?														L
	swer these questions to d		- Questions for you meet an ex	-	•				`	•	•		e not m	ore than	5%
-	ners or related persons														_
37	Do you maintain a writte employees?	en policy stat	ement that pro	hibits a	ll persor	nal use d	of vehicl	es, Inc	luding cor	nmuting,	by you	r		Yes	No
38	Do you maintain a writte employees? See the ins										our				

		· -	
P	art VI Amortization	•	
_	Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		
41	Do you meet the requirements concerning qualified automobile demonstration use?		
	the use of the vehicles, and retain the information received?		
40	Do you provide more than five vehicles to your employees, obtain information from your employees about	ļ	
39	Do you treat all use of vehicles by employees as personal use?		
	employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
30	Do you maintain a written policy statement that prohibits personal use of venicles, except commuting, by your		

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins duri	ng your 2011 tax year:				
			<u> </u>		
43 Amortization of costs that began befo	re your 2011 tax year		71	43	
14 Total. Add amounts in column (f) See	the instructions for whe	ere to report		44	

116252 11-18-11

Form 4562 (2011)