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SCANNED MAY 0 9 2013

Form **990**

CHANGE OF ACCOUNTING PERIOD

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)

Open to F

2011 Open to Public

Form 990 (2011)

Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Inspection Internal Revenue Service For the 2011 calendar year, or tax year beginning and ending JUN 30, JAN 1, 2012 D Employer identification number Check if applicable C Name of organization PAINTERS AND ALLIED TRADES LABOR-Address change MANAGEMENT COOPERATION INITIATIVE Name change 52-6776506 Doing Business As Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-410-564-5900 7234 PARKWAY DRIVE Amended 3,067,919. City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica-tion pending 21076 HANOVER. MD H(a) Is this a group return Yes X No F Name and address of principal officer. JAMES A. WILLIAMS for affiliates? SAME AS C ABOVE H(b) Are all affiliates included? __Yes L Tax-exempt status: 501(c)(3) X 501(c) (4947(a)(1) or If "No," attach a list. (see instructions)) (insert no.) J Website: ➤ WWW.LMCIONLINE.ORG H(c) Group exemption number ▶ K Form of organization: Corporation X Trust Other > Association Year of formation: 1996 M State of legal domicile: MD Part I Summary Briefly describe the organization's mission or most significant activities: THE ORGANIZATION WAS ESTABLISHED UNDER THE NATIONAL LABOR RELATIONS ACT, SEC. 302(C)(9) AND THE Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 13 Number of voting members of the governing body (Part VI, line 1a) 13 Number of independent voting members of the governing body (Part VI, line 1b) 4 4 0 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 0 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 7b 0. **Prior Year Current Year** 0. Contributions and grants (Part VIII, line 1h) Revenue 3,063,766. 4,709,561 9 Program service revenue (Part VIII, line 2g) 2,955. 28,540 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), Ines 5, 6d, 9c, 10c, and 11e) 145,263 11 1,198. Total revenue - add lines 8 through 11/(must equal Part, VIII, column (A), line 12) 4,883,364 067,919. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 231,000. 473,000. Benefits paid to or for members (Part IX, column (A), line 4)
Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 0. 759. 342,063. 16a Professional fundraising fees (Part)(X, columns (A), line 11e) b Total fundraising expenses (Rart IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 3,539,253 1,917,043. 17 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 2,822,802. 5,354,316. 245,117. Revenue less expenses. Subtract line 18 from line 12 <470,952. ets or **Beginning of Current Year** End of Year 6,785,579. 7,211,246. Total assets (Part X, line 16) 20 1,632,994 962,210. Total habilities (Part X, line 26) 5.578.252 5,823,369. 22 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Kons O Signature of officer Date Sign JAMES A. WILLIAMS, CO-CHAIRMAN Here Type or print name and title PTIN Date Check Preparer's signature Print/Type preparer's name 03/19/13 Self-employed P01385419 Paid ANTHONY VOGT, CPA Firm's name NOVAK FRANCELLA Firm's EIN 61-1436956 Preparer Use Only Firm's address ONE PRESIDENTIAL BLVD. SUITE Phone no. 610-668-9400 BALA CYNWYD, PA 19004 Yes May the IRS discuss this return with the preparer shown above? (see instructions) No

PAINTERS AND ALLIED TRADES LABOR-MANAGEMENT COOPERATION INITIATIVE 52-6776506 Page 2 Form 990 (2011) Part III | Statement of Program Service Accomplishments \mathbf{x} Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission: THE ORGANIZATION WAS ESTABLISHED UNDER THE NATIONAL LABOR RELATIONS ACT, SEC. 302(C)(9) AND THE LABOR-MANAGEMENT COOPERATION ACT OF 1974 TO ADVANCE THE COLLECTIVELY-BARGAINED FINISHING INDUSTRIES THROUGH COMMUNICATION, TRUST, AND MUTUAL RESPECT BETWEEN THE INTERNATIONAL Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. (Code) (Expenses \$ including grants of \$) (Revenue \$ INDUSTRY ADVOCACY - DEVELOPED A COMPREHENSIVE MARKETING AND PROMOTION PROGRAM TO ENHANCE THE MARKET SHARE OF CONTRACTORS SIGNATORY TO IUPAT; DEVELOPED BROCHURES AND DISTRIBUTED THEM AT TRADE SHOWS AND MEETINGS; DEVELOPED REGIONAL MEETINGS HELD ON AN ANNUAL BASIS THROUGHOUT THE UNITED STATES TO ADDRESS LABOR AND MANAGEMENT ISSUES AND TO DEVELOP SUCCESSFUL SOLUTIONS. ATTRACTED NEW INDUSTRY CONTRACTORS, EMPLOYEES, AND CUSTOMERS. CONTINUE TO DEVELOP PROGRAMS AND SERVICES TO HELP ENHANCE MARKET SHARE OPPORTUNITIES FOR THEIR SIGNATORY EMPLOYERS. including grants of \$) (Revenue \$ EDUCATION AND TRAINING - PROVIDED EDUCATIONAL & TRAINING PROGRAMS THROUGHOUT THE UNITED STATES AND CANADA. AIDED WORKERS AND CONTRACTORS AT EVERY LEVEL OF EXPERIENCE. AWARDED GRANTS TO IMPROVE JOB SKILLS AND INCREASE MARKET EXPANSION FOR CONTRACTORS.

NOVE ADVERDADANT A MANDED TAIDIQUED A MENT ON THE DAMADAGE MO ACCTOM TO	773.3 (73
NON-ADVERSARIAL MANNER; LAUNCHED A NEW ONLINE DATABASE TO ASSIST IT	JPAT.
AND ITS SIGNATORY CONTRACTORS IN PRICING AND NEGOTIATING NEW JOBS	
THROUGHOUT THE UNITED STATES.	
Other program services (Describe in Schedule O.)	

including grants of \$

MANUAL FOR PREPARING FOR AND CONDUCTING NEGOTIATIONS IN A

including grants of \$

RESOURCES - COMPLETED THE COLLECTIVELY BARGAINING AGREEMENT GUIDES,

4e Total program service expenses ▶

) (Expenses \$

Form 990 (2011)

) (Revenue \$

) (Revenue \$

			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		X _
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		i	
	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		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		<u>X</u> _
10	Did the organization, directly or through a related organization, hold assets in temporanly 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, 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,	١.,		
	Part VI	<u>11a</u>	_X_	
Ь	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments · program related in Part X, line 13 that is 5% or more of its total	11c		x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	116		
a	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
_	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			<u> </u>
•	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	X	
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.	12b		X_
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		<u> X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	ا		v
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
	complete Schedule G, Part III	19	 	X_
20a		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	Ц

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Part IV Checklist of Required Schedules (continued) Yes No 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 Х 21 . . Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX. 22 column (A), line 2? If "Yes," complete Schedule I, Parts I and III X 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Х 23 Schedule J 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 Х 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a 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 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial 27 contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member X 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b 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 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 30 Did the organization liquidate, terminate, or dissolve and cease operations? 31 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? 34 If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 X 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 Х and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? 38 Note. All Form 990 filers are required to complete Schedule O Form 990 (2011) Form 990 (2011)
Part V Sta

	Check it Schedule O contains a response to any question in this Part V		_ •	ᆜ
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		ļ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3а	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		X
b	If "Yes," enter the name of the foreign country:			•
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		ļ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		<u> </u>
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		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
_	organization, or a donor advised fund maintained by a sponsoring 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?	0-		
a	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
ь 10	Section 501(c)(7) organizations. Enter:	90		-
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
-	Gross income from other sources (Do not net amounts due or paid to other sources against			
-	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	i	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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.			
ь	Enter the amount of reserves the organization is required to maintain by the states in which the			
-	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	990 (2011)

Form 990 (2011)

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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			<u>X</u>					
Sec	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 13								
	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.								
b	Enter the number of voting members included in line 1a, above, who are independent 1b 13								
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 customanly 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					
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		Х					
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
D	persons other than the governing body?	7b		Х					
0	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
8	The governing body?	8a	X						
a	Each committee with authority to act on behalf of the governing body?	8b	X						
þ	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	0.5							
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	х						
202	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	-	-21						
<u> </u>	tion b. Foncies (This Section B requests information about policies not required by the internal revenue code.)		Yes	No					
100	Did the organization have local chapters, branches, or affiliates?	10a	103	X					
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
D	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
110	the state of the state of the same of the	11a	X						
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	- 1.0							
b 120	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		х					
12a	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b							
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12.0		_					
C		12c							
12	In Schedule O how this was done Did the organization have a written whistleblower policy?	13		Х					
13		14		X					
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent	17							
13	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
_	The organization's CEO, Executive Director, or top management official	15a		x					
	Other officers or key employees of the organization	15b		X					
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).								
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
···a	taxable entity during the year?	16a		X					
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			 -					
S	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							
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ► NONE								
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) a	vailab	le						
	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website X Upon request								
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finan	cial						
	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 [.]	•						
	CHARLES HARRIS - 410-564-5900	-							
	7234 PARKWAY DRIVE, HANOVER, MD 21076								

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

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

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

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					han	compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustes or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) JAMES A. WILLIAMS									_	_
CO-CHAIRMAN	2.00	X	_		<u> </u>	ļ		0.	0.	0
(2) PAUL BUZZIN										_
CO-SECRETARY	2.00	X	<u> </u>		<u> </u>	⊢	_	0.	0.	0
(3) WILLIAM CANDELORI, JR.					ļ					
LABOR TRUSTEE	2.00	X	ļ			_		0.	0.	0
(4) ROBERT KUCHERAN		ا ا			ŀ					
LABOR TRUSTEE	2.00	X			ļ	ļ		0.	0.	0
(5) KENNETH E. RIGMAIDEN	1 2 22	٠.,			ŀ					
CO-SECRETARY	2.00	X			<u> </u>			0.	0.	0
(6) GEORGE GALIS	2 00	\ \ -							0	•
LABOR TRUSTEE	2.00	X		_	-	-		0.	0.	0
(7) ED SMITH	2.00	x			ŀ			0.	0.	•
CO-CHAIRMAN	2.00	Δ.	\vdash	-	-	-		U •		0
(8) MARK CHUPLIS MANAGEMENT TRUSTEE	2.00	x			ł			0.	0.	0
(9) MICHAEL CASSIDY	2.00	<u> </u>			\vdash	╁	-	<u>.</u>		<u> </u>
MANAGEMENT TRUSTEE	2.00	\mathbf{x}				1		0.	0.	0
(10) DAN THOMAS	2.00	-			┢				V •	
MANAGEMENT_TRUSTEE	2.00	x						0.	0.	0
(11) JAMES L. REID						 				
LABOR_TRUSTEE	2.00	x						0.	0.	0
(12) TOM CLERKIN		Ť								<u> </u>
MANAGEMENT TRUSTEE	2.00	х			l			0.	0.	0
(13) KEVIN SUTHERLAND		Ī .								
MANAGEMENT TRUSTEE	2.00	X				L		0.	0.	0
(14) KEVIN LARUE										
FUND ADMINISTRATOR	40.00			x				0.	0.	0
									<u> </u>	

MANAGEMENT COOPERATION INITIATIVE

Part VII Section A. Officers, Directors, Tru	1	mplo	yee			ligh	est	1	rees (continued)	—г			
(A)	(B) (C)							(D)	(E)			(F)	
Name and title	Average	Position (do not check more than one					one	Reportable	Reportable			mate	
	hours per week			ss pe				compensation	compensation	1		ount c	of
	(describe	-	Γ		1	Π	T ,	from the	from related organizations		comp	ther	100
	hours for	trustee or director				L		organization	(W-2/1099-MIS			erisai m the	
	related	8	ste	İ		ısate		(W-2/1099-MISC)	(11 2) 1033 111101	"		nızatio	
	organizations	tg t	Institutional trustee		yee	E C		(,			-	relate	
	ın Schedule	Individual	텵	25	of E	est	팔				organ	nizatıc	ns
	O)	ğ	重	불	Key employee	Highest compensated employee	Рог тег			$-\bot$			_
					<u> </u>								
					Ì								
	<u> </u>		<u> </u>	<u> </u>	_								
	ł		ļ										
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			ĺ	ŀ									
	ļ	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	_			\rightarrow			
		l	İ	•			-	1					
			<u> </u>	L	<u> </u>	<u> </u>	<u> </u>						
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			Ш	<u> </u>	L	ļ.,	<u> </u>						
							1						
		<u> </u>	<u> </u>	Ь.	<u> </u>	<u> </u>	ļ			\dashv			
· · · · · · · · · · · · · · · · · · ·	ļ	<u> </u>		<u> </u>			L						
			ł	ŀ									
	<u> </u>		<u> </u>	<u> </u>	<u> </u>	<u> </u>	L		<u> </u>				_
1b Sub-total								0.		0.			0
c Total from continuation sheets to Part V	II, Section A							0.		0.			0
d Total (add lines 1b and 1c)								0.	<u> </u>	0.			0
2 Total number of individuals (including but r	not limited to th	nose	liste	ed a	bove	e) w	ho r	eceived more than \$100	0,000 of reportable	;			
compensation from the organization											Т.		(
										г		Yes	No
3 Did the organization list any former officer			e, ke	ey er	mplo	oyee	, or	highest compensated e	employee on			1	
line 1a? If "Yes," complete Schedule J for s		-								-	3		<u>X</u>
4 For any individual listed on line 1a, is the s			-						the organization	İ			
and related organizations greater than \$15	•	•	•					••		· }	4		X
5 Did any person listed on line 1a receive or	•				-			ed organization or indiv	idual for services		i		
rendered to the organization? If "Yes," con	nplete Schedu	le J i	for s	uch	per	son	···	 		<u> </u>	5		<u> X</u>
Section B. Independent Contractors													
1 Complete this table for your five highest co										pensa	ation fro	om	
the organization. Report compensation for	the calendar y	/ear	end	ing v	<u>with</u>	or w	/ithir		year.				
(A) Name and business	address	NT/	O N T				1	(B) Description of	services	C	(C) ompen:		,
Name and business		7/1	ON:	<u> </u>				Description of	3C/ VICCS		ompen.	34101	<u> </u>
								···					
							\dashv					-	
							\dashv						
							Į						
O Tatalaumba of Laurania	Caralination of the Control				A1-			4 = h =					
2 Total number of independent contractors (_	10t li	mite	a to	tno	se II 7	stec	a above) who received r	nore tnan				
\$100,000 of compensation from the organ	ization >											00 (

LFai	<u>t VI</u>	II Statement of Revenu	16					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
the state	1 a	Federated campaigns	. 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
Am, G	С	Fundraising events	1c					
当	d		1d					
S,	е	Government grants (contributio	ns) 1e		1			
r Si	f	All other contributions, gifts, grants	and			l i		
돌		similar amounts not included above						ł
들임	g	Noncash contributions included in lines 1a	i-1f \$					
Sä	_ h	Total. Add lines 1a-1f			_			
				Business Code	,			
g	2 a	EMPLOYER CONTRIE	3.		3,063,766.	3,063,766.		1
ا ق	b							
Program Service Revenue	c							
e a	d							
ğ	e	•						
<u>r</u>	f	All other program service reven	Je					
					3,063,766.			
	3	Investment income (including d						
Ì	_	, ,			2,955.			2,955.
	4	Income from investment of tax-						
	5	Royalties		•				
	_	,	(i) Real	(ii) Personal	1			
Ì	6 a	Gross rents				[, ž, .,.]		
	ь							
	c	: Rental income or (loss)	_			• •		.,
	d	Net rental income or (loss)			·			
		Gross amount from sales of	(i) Securities	(ii) Other		-		
		assets other than inventory	V					
İ	ŀ	Less. cost or other basis						
		and sales expenses		1				
	c	Gain or (loss)						
		Net gain or (loss)		•				
		Gross income from fundraising						
Other Revenue	•	including \$						
e e		contributions reported on line 1						
Æ		Part IV, line 18						
‡	Ŀ	Less: direct expenses						
0		Net income or (loss) from fundra		>]		1
		Gross income from gaming acti						
1			a					1
	ŀ	Less: direct expenses						
		Net income or (loss) from gamir						1
		a Gross sales of inventory, less re	_					
- 1		and allowances						
	t	Less: cost of goods sold						
		Net income or (loss) from sales		•				
T		Miscellaneous Revenue		Business Code				
t	11 :	MISCELLANEOUS IN		900099	1,198.			1,198.
- 1	'' t							1 - 7 - 7 - 7 - 7 - 7
								
ŀ		All adhan saves						1
}	-	e Total. Add lines 11a-11d		•	1,198.			
- 1	12	Total revenue. See instructions.				3,063,766.	0	4,153.
132001	9	. Star (o. e.ngo, oco manadonoma, .		·	<u> </u>	,_ , _ , _ , , , , , , ,		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 respon	se to any question in this	s 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	231,000.			
2	Grants and other assistance to individuals in			1	
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,			ĺ	
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	92,486.			<u> </u>
6	Compensation not included above, to disqualified	1			
	persons (as defined under section 4958(f)(1)) and			1	
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	371,903.			
8	Pension plan accruals and contributions (include			[
	section 401(k) and section 403(b) employer contributions)	88,030.			
9	Other employee benefits	82,938.			
10	Payroll taxes	39,402.			
11	Fees for services (non-employees):				
а	Management			11	
b	Legal	30,574.			
С	Accounting	59,719.			
d					
е	Professional fundraising services. See Part IV, line 17			1. 1. 4.1. 11	
f	Investment management fees	50.			
g					
12	Advertising and promotion	292,793.			
13	Office expenses	103,967.			
14	Information technology	11,864.			
15	Royalties				
16	Occupancy	65,069.			
17	Travel	163,820.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	_			
19	Conferences, conventions, and meetings	83,082.			
20	Interest				
21	Payments to affiliates	739,304.			
22	Depreciation, depletion, and amortization	8,462.			
23	Insurance	24,587.			
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A)				
_	amount, list line 24e expenses on Schedule 0.) FINISHING INDUSTRIES FO	158,712.		 	
a	CURRENT CORG MRATUTAG RR	69,163.			· · ·
b		45,518.		-	
C	TRADE SHOWS	31,926.		+	
d				 	
	All other expenses	28,433.		+	
<u>25</u>	Total functional expenses. Add lines 1 through 24e	2,822,802.		 	
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)				Form 990 (201

MANAGEMENT COOPERATION INITIATIVE 52-6776506 Page 11

Pai	t X	Balance Sheet				_
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		505,081.	1	393,106.
	2	Savings and temporary cash investments	5,231,897.	2	4,759,747.	
	3	Pledges and grants receivable, net	<u> </u>	3		
	4	Accounts receivable, net		1,090,473.	4	1,287,293.
	5	Receivables from current and former officers, directors, tr		2,000,2.00		
		employees, and highest compensated employees. Comp	- I			
		of Schedule L			5	
	6	Receivables from other disqualified persons (as defined u			<u> </u>	
	•	4958(f)(1)), persons described in section 4958(c)(3)(B), an	1			
		employers and sponsoring organizations of section 501(c	-		ĺĺ	
		employees' beneficiary organizations (see instructions)	· · · · · · · · · · · · · · · · · · ·		6	
ş	7	Notes and loans receivable, net			7	
Assets	8				8	
⋖	9	Inventories for sale or use		201,324.	9	171,424.
	_	Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other	····· · · · · · · · · · · · · · · · ·	201,324.	9	1/1,444.
	iva	basis. Complete Part VI of Schedule D 10a	146,497.	,		
	_	Less: accumulated depreciation 10b	72 497	82,471.	40-	74,009.
				02,411.	11	14,003.
	11	Investments - publicly traded securities		12		
	12	Investments - other securities. See Part IV, line 11	 			
	13	Investments - program-related. See Part IV, line 11		13		
	14	Intangible assets	100,000.	14	100,000.	
	15	Other assets. See Part IV, line 11		7,211,246.	15 16	6,785,579.
	16	Total assets. Add lines 1 through 15 (must equal line 34)		597,341.		75,157.
	17	Accounts payable and accrued expenses		383,000.	17	224,000.
	18	Grants payable		18	224,000.	
	19	Deferred revenue			19 20	
	20	Tax-exempt bond liabilities			21	
Liabilities	21	Escrow or custodial account liability. Complete Part IV of Payables to current and former officers, directors, trustee			21	
bili	22	highest compensated employees, and disqualified person		•		
Lia		(0.1.1.1.1	·			
			······ · · · · · · · · · · · · · · · ·		22	
	23	Secured mortgages and notes payable to unrelated third	` '' " 		23	-
	24	Unsecured notes and loans payable to unrelated third pa Other liabilities (including federal income tax, payables to	· · · · · -		24	
	25	parties, and other liabilities not included on lines 17-24).				
		- · · · -		652,653.	25	663,053.
	26	Total liabilities. Add lines 17 through 25		1,632,994.	26	962,210.
	_20	Organizations that follow SFAS 117, check here		1,032,334.	20	302,210.
"		lines 27 through 29, and lines 33 and 34.	and complete			
če	27	——————————————————————————————————————	·		27	
ian	28	Unrestricted net assets			28	
B	29				29	
Ĕ	29	Organizations that do not follow SFAS 117, check here			25	
Ē			allu allu			
ts o	30	complete lines 30 through 34. Capital stock or trust principal, or current funds		5,578,252.	30	5,823,369.
SSe	31	Paid-in or capital surplus, or land, building, or equipment		0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or		0.	32	0.
Ne	33	Total net assets or fund balances		5,578,252.	33	5,823,369.
	34	Total liabilities and net assets/fund balances		7,211,246.	34	6,785,579.
		Total liabilities and her assets/fullu balances	<u> </u>	1,411,440.	- 54	5, 763, 373.

Form 990 (2011) MANAGEMENT COOPERATION INITIATIVE 52-677650						
Part XI Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>	<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,0	67, <u>9</u>	19.	
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,8	22,8	302.	
3	Revenue less expenses. Subtract line 2 from line 1	3	2	45,1	<u>.17.</u>	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,5	78,2	<u> 252.</u>	
5	Other changes in net assets or fund balances (explain in Schedule 0)	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	5,8	23,3	869.	
Pai	t XIII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII	·····	<u> </u>	<u></u>	X	
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		-			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.	ł		1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2		X	
b	Were the organization's financial statements audited by an independent accountant?		<u>2t</u>	X		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,	ľ	1		
	review, or compilation of its financial statements and selection of an independent accountant?		. 20	X	<u> </u>	
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	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	ı	1	1	
	separate basis, consolidated basis, or both:		- 1			
	Separate basis Consolidated basis Both consolidated and separate basis		İ			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audıt	ľ	Ì	1	
	Act and OMB Circular A-133?		32	Щ.	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audıt	1		1	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3t	<u></u>	<u> </u>	

Form 990 (2011)

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service ➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ.

➤ See separate instructions.

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

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

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

• :	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Nam	ne of organization PAINTER	S AND ALLIED TRA	DES LABOR-	Empl	oyer identification number
	MANAGEM	ENT COOPERATION	INITIATIVE_	<u> </u>	52-6776506
Pa	art I-A Complete if the org	ganization is exempt und	ler section 501(c	e) or is a section 527 o	rganization.
2	Provide a description of the organize Political expenditures				
Pa	ert I-B Complete if the org	ganization is exempt und	ler section 501(c	:)(3)	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	▶\$	
2	Enter the amount of any excise tax	incurred by organization manag	ers under section 495	55▶\$	
4a	If the organization incurred a section Was a correction made?		•		
	art I-C Complete if the org	ganization is exempt und	ler section 501(c), except section 501(c)(3).
1	Enter the amount directly expende	d by the filing organization for se	ction 527 exempt fun	ction activities >\$	
	Enter the amount of the filing organ				
	exempt function activities			> \$	
3	Total exempt function expenditures				
	line 17b				
4	Did the filing organization file Form				}
5	Enter the names, addresses and er	nployer identification number (El	N) of all section 527 p	political organizations to whic	h the filing organization
	made payments. For each organiza	The state of the s			•
	contributions received that were pr		, ,	-	te segregated fund or a
	political action committee (PAC). If	additional space is needed, prov	vide information in Par	rt IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2011

LHA

Schedule C (Form 990 or 990-EZ) 2011 Part II-A Complete if the org	MANAG	EMENT	COOPERATION	N INITIATIVE	52-0	6776506 Page 2
(election under sec			iipt under section		su F01111 5706	
A Check Inf the filing organiza expenses, and share	tion belon re of exces	gs to an affil ss lobbying e	expenditures).	n Part IV each affiliated	group member's nar	me, address, EIN,
Limi	ts on Lob	bying Exper	d "limited control" pr ditures nts paid or incurred		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe to total lobbying expenditures to influe to Total lobbying expenditures (add lied to the exempt purpose expenditure total exempt purpose expenditure total exempt purpose expenditure to Lobbying nontaxable amount. Enter						
If the amount on line 1e, column (a) o			bying nontaxable an	11		
Not over \$500,000		20% of	the amount on line 1) <u>. </u>		
Over \$500,000 but not over \$1,000			O plus 15% of the ex			
Over \$1,000,000 but not over \$1,5				cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	,000,000		O plus 5% of the exc	ess over \$1,500,000.	•	
Over \$17,000,000		\$1,000,0	000.			
g Grassroots nontaxable amount (er h Subtract line 1g from line 1a. If zer i Subtract line 1f from line 1c. If zer j If there is an amount other than ze reporting section 4911 tax for this		Yes No				
			raging Period Unde	•	- · · · - · · ·	
				n do not have to comp		
C0				es 2a through 2f on pa	ge 4.)	-
	Lobi	bying Exper	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a)	2008	(ь) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount		i				
(150% of line 2a, column(e))						<u> </u>
c Total lobbying expenditures		· · · · ·				
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))						
						

Schedule C (Form 990 or 990-EZ) 2011

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2011 MANAGEMENT COOPERATION INITIATIVE 52-6776506 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? J Total. Add lines 1c through 11 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the pnor year? 3 art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, answered "Yos." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2 a Current year Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 if notices were sent and the amount on line 2c exceeds the amount on line 3, what po	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1))? c Media advertisements? d Mailings to members, legislators, or the public? Publications, or published or broadcast statements? G Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 11 2a Dd the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? art IIII-A] Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? 1	r each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(a)	(1	b)
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	art IV Supplemental Information	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pages to carryover to the reasonable estimate of nondeductible lobbying and pages to carryover to the reasonable estimate of nondeductible lobbying and pages to carryover to the reasonable estimate of nondeductible lobbying and pages to carryover to the reasonable estimate of nondeductible lobbying and pages to carryover to the reasonable estimate of nondeductible lobbying and pages to carryover to the reasonable estimate of nondeductible lobbying and pages to carryover to the reasonable estimate of nondeductible lobbying and pages to carryover to the reasonable estimate of nondeductible lobbying and pages to carryover to the reasonable estimate of nondeductible lobbying and pages to carryover to the reasonable estimate of nondeductible lobbying and pages to carryover to the reasonable estimate of nondeductible lobbying and pages to carryover to the reasonable estimate of nondeductible lobbying and pages to carryover to the reasonable estimate of nondeductible lobbying and pages to carryover to the reasonable estimate of nondeductible lobbying and pages to carryover to the reasonable estimate of nondeductible lobbying a	on 501(c) "No" OR	2 3 (5), or s (b) Par 1 2a 2b 2c 3	X X ection t III-A, lir	
		Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exception of the organization agree to carryover to the reasonable estimate of nondeductible lobbying and personable expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	on 501(c) "No" OR	2 3 (5), or s 8 (b) Par 2 2 2 2 3	X X ection t III-A, lir	ne 3,
implete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B, line 1. Also, compared to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B, line 1. Also, compared to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B, line 1. Also, compared to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B, line 1. Also, compared to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B, line 1. Also, compared to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B, line 1. Also, compared to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B, line 1. Also, compared to provide the part II-B, line 1. Also, compared to part II-B, line 1. Also, compared to		Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year	on 501(c) "No" OR	2 3 (5), or s 8 (b) Par 2 2 2 2 3 3	X X ection t III-A, lir	
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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.

2011Open to Public Inspection

OMB No 1545-0047

Name of the organization

PAINTERS AND ALLIED TRADES LABOR-MANAGEMENT COOPERATION INITIATIVE

Employer identification number 52-6776506

Par	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 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 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 advise	ed funds
	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a		
•	for charitable purposes and not for the benefit of the donor of		
Par	rt II Conservation Easements. Complete if the org		
1	Purpose(s) of conservation easements held by the organizati		
-	Preservation of land for public use (e.g., recreation or e	· —	orically important land area
	Protection of natural habitat	Preservation of a certif	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form o	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
c	Number of conservation easements on a certified historic str		
d			1 I
	listed in the National Register		5 1
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements i	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements du	ring the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during t	the year 🕨 \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(l	h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes t	he organization's accounting for
	conservation easements.		
Pai	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or Ot	ther 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 (AS	SC 958), not to report in its revenue statem	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public ext	hibition, education, or research in furtheran	nce of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descr	bes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pub	olic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial	gain, provide
	the following amounts required to be reported under SFAS 1		
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 000, Dort V		▶ \$

		ENT COOPER			041			Page ∠
Par								
3	Using the organization's acquisition, accession	on, and other record	is, check any of th	e following tha	t are a sig	nificant use of its	collection	ı ıtems
	(check all that apply):							
а	Public exhibition	d	I Loan or ex	kchange progra	ıms			
b	Scholarly research	е	Other					
С	Preservation for future generations							
_	Provide a description of the organization's co	ollections and explai	n how they further	the organization	on's exem	pt purpose in Par	t XIV.	
	During the year, did the organization solicit o							
3	to be sold to raise funds rather than to be ma						Yes	☐ No
Par	t IV Escrow and Custodial Arran							
· ui	reported an amount on Form 990, Par	•	ote ii tile organiza	ion anowered	105 101	om 550, 1 art 14,		
	Is the organization an agent, trustee, custodi		den for oppide to	one or other se	acta not is	adudad		
12							Yes	☐ No
	on Form 990, Part X?					∟	_ res	
b	If "Yes," explain the arrangement in Part XIV	and complete the to	ollowing table:					
						<u> </u>	Amount	
	Beginning balance							
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance							
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?				_l Yes	L No
<u>b</u>	If "Yes," explain the arrangement in Part XIV.							
Par	t V Endowment Funds. Complete it	f the organization ar	swered "Yes" to I	orm 990, Part	IV, line 10	·	,	
		(a) Current year	(b) Prior year	(c) Two year	s back (1) Three years back	(e) Four	years back
1a	Beginning of year balance						İ	
	Contributions				_	_		
	Net investment earnings, gains, and losses							
	Grants or scholarships							
	Other expenditures for facilities							
	and programs		1				ļ	
	Administrative expenses							
			_					
_	End of year balance		o (line 1 a column	(a)) hold as:	J		L	·· ·
2			e (line 19, column	(a)) Helu as.				
	Board designated or quasi-endowment							
	Permanent endowment							
C	Temporarily restricted endowment ▶							
	The percentages in lines 2a, 2b, and 2c shou	•						
За	Are there endowment funds not in the posse	ession of the organiz	ation that are held	l and administe	red for the	e organization	ſ	·
	by:							Yes No
	(i) unrelated organizations						3a(i)	
	(ii) related organizations						3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Schedule R?				3b	
4	Describe in Part XIV the intended uses of the	e organization's end	owment funds.	···-				
Par	t VI Land, Buildings, and Equipm	nent. See Form 99	0, Part X, line 10					
	Description of property	(a) Cost or o	other (b) Co	st or other	(c) Ac	cumulated	(d) Boo	k value
		basis (invest	ment) bas	is (other)	dep	reciation		
1a	Land							
b	Buildings							
С	Leasehold improvements							
	Consideration and		1	46,497.		72,488.	7	4,009.
	Other							
	Add lines 1a through 1e. (Column (d) must e	oual Form 990. Part	X. column (B), line	e 10(c).)	-		7	4,009.

•					
•	PAINTERS A	ND ALLIED	TRADES	LABOR-	
Schedule D (Form 990) 2011	MANAGEMENT	COOPERAT	ION INI	TIATIVE_	
Part VII Investments - 0	Other Securities.	See Form 990, Part	X, line 12.		
(a) Description of secur (including name o		(b) Book va	alue	Cos	(c) M st or e

(a) Description of security or category (including name of security)	(b) Book value	(c) Method Cost or end-of-ye	of valuation: ear market value
1) Financial derivatives			
2) Closely-held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(1)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)			
Part VIII Investments - Program Related. S	ee Form 990, Part X, I	ne 13.	
(a) Description of investment type	(b) Book value		of valuation: ear market value
(1)			
(2)			
(3)			·
(4)			_
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)		, , , , , , , , , , , , , , , , , , ,	
Part IX Other Assets. See Form 990, Part X, line	15.		
	Description		(b) Book value
(1)			
(2)		-	
(3)			
(4)			
(5)			
(6)			
· 32			
(7)			
(8)			
(9)			
(10)	- 15 \		
Total. (Column (b) must equal Form 990, Part X, col (B) lin Part X Other Liabilities. See Form 990, Part X		···· · · · · · · · · · · · · · · · · ·	
(-) Description of liability	, III10 25.	(b) Book value	
······································		(b) Book value	
(1) Federal income taxes		15 750	
(2) DUE TO IUPAT		15,750.	
(3) DUE TO FCA	TOTON STORE	555,950.	
(4) DUE TO IUPAT INDUSTRY PER	ASTON LOND	91,353.	
(C)			
(5)			
(6)			
(6)			
(6) (7)			
(6) (7) (8)			
(6) (7) (8) (9)		663,053.	

2. FIN 4 132053 01-23-12

	dule D (Form 990) 2011 MANAGEMENT COOPERATION INTTIA				0776506	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to Au	idited Finan	cial Sta	tement		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		3,067,	<u>919.</u>
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		2,822,	802.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		245,	117.
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	Other (Describe in Part XIV.)		8	-	· · · · · ·	
9	Total adjustments (net). Add lines 4 through 8					
-	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9				245	117.
10 Par	t XII Reconciliation of Revenue per Audited Financial Statements			Return		<u> </u>
					3,067,	010
1	Total revenue, gains, and other support per audited financial statements	• • • • • • • • • • • • • • • • • • • •		. 1	3,067,	313.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	- 1				
а		2a		 ⋅		
þ		2b	 -	_		
С	Recoveries of prior year grants	2c		-		
d	Other (Describe in Part XIV.)	2d		⊣ i		
е	Add lines 2a through 2d			. 2e		0.
3	Subtract line 2e from line 1			3	3,067,	919.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.			1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1		
ь		4b		7		
C	Add lines 4a and 4b			4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				3,067,	
	t XIII Reconciliation of Expenses per Audited Financial Statement	s With Expe	enses p	er Retu	rn	<u> </u>
1	Total expenses and losses per audited financial statements				2,083,	498
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		••••••••••••	" -	2,000,	1 50.
_		o- 1				
a		2a				
b		2b		`-		
С		2c				
d	,	2d				•
e	Add lines 2a through 2d					0.
3	Subtract line 2e from line 1			. 3	2,083,	<u>498.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b 4	4a		_		
b	Other (Describe in Part XIV.)	4b 73	9,304	<u>! . </u>		
C	Add lines 4a and 4b			. 4c	739,	304.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	<u>,, , , , ,, ,,,,,,,,,,,,,,,,,,,,,,,,,</u>	· · · · · · · · · · · · · · · · · · ·	5	2,822,	802.
Pai	t XIV Supplemental Information			*****	-	
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines	es 1a and 4; Pa	art IV, lines	s 1b and 2	b; Part V, line	1; Part
	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete					
	RT X, LINE 2: LMCI FOLLOWS THE PROVISIONS OF	•	•			
TNIC	CERTAINTY IN INCOME TAXES. THIS STANDARD REC	OTITRES A	T.T 2 F	የተነተውነ	Z FOR A	ጥልሄ
OTAC	EKIAINII IN INCOME IAKED: IIIID DIANDAKD KE	COTKED E	ייאדה	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	I FOR A	IAA.
D ()	TIMION MO DE DECOCNIZED OD DEDECOCNIZED DACE	יי ג זאר רו	MODE	TTVVI	יא אנוא אי	
PUS	SITION TO BE RECOGNIZED OR DERECOGNIZED BASEI	D ON A	MORE	TIVET	I THAIN	
	III MUDDAYATA MUTA ADDITES MA DASTMISSE MINI	DN 05 55	, n n ~~-		DD	
NO.	" THRESHOLD. THIS APPLIES TO POSITIONS TAKE	EN OR EX	PECTI	ED TO	BE TAKE	<u>N</u>
ON	TAX RETURNS. MANAGEMENT DOES NOT BELIEVE TI	HAT THEY	HAVE	TAKI	EN ANY T	'AX
POS	SITIONS THAT WILL MORE LIKELY THAN NOT RESULT	T IN ADI	OITIC	IAL TA	AXES BEI	NG
ASS	SESSED ON LMCI.					

PAINTERS AND ALLIED TRADES LABOR-	50 (77(50) o -
Schedule D (Form 990) 2011 MANAGEMENT COOPERATION INITIATIVE Part XIV Supplemental Information (continued)	52-6776506 Page 5
Supplemental information (continued)	
PART XIII, LINE 4B - OTHER ADJUSTMENTS:	
	720 204
PAYMENTS TO AFFILIATES	739,304.
	•
	
` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ▶ Attach to Form 990. MANAGEMENT COOPERATION INITIATIVE PAINTERS AND ALLIED TRADES LABOR-General Information on Grants and Assistance Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE 1 (Form 990) Part

OMB No. 1545-0047

ê | FINANCIAL SUPPORT FOR THE FINANCIAL SUPPORT FOR THE FINANCIAL SUPPORT FOR THE INANCIAL SUPPORT FOR THE TINANCIAL SUPPORT FOR THE INANCIAL SUPPORT FOR THE Employer identification number 52-6776506 Open to Public TO PROMOTE AND PROVIDE TO PROMOTE AND PROVIDE TO PROMOTE AND PROVIDE TO PROMOTE AND PROVIDE TO PROMOTE AND PROVIDE TO PROMOTE AND PROVIDE Inspection (h) Purpose of grant or assistance AINTING INDUSTRY PAINTING INDUSTRY AINTING INDUSTRY PAINTING INDUSTRY AINTING INDUSTRY PAINTING INDUSTRY X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any : recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed and address of organization

(c) IRC section or government and address of organization and address organization and address organizatio Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection : : Ö Ö ö Ö Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. : 40,000, 35,000 75,000 20,000 10,000 5,000 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 501(C)(5) 501(C)(5) 501(C)(5) 501(C)(5) 501(C)(5) 501(C)(5) Enter total number of other organizations listed in the line 1 table. 20-0613815 99-0342356 23-0377430 23-2937938 04-1699540 53-0214103 criteria used to award the grants or assistance? 1 (a) Name and address of organization AWCI UNION CONTRACTORS COUNCIL FALLS CHURCH, VA 22046-3257 IUPAT DISTRICT COUNCIL 35 IUPAT DISTRICT COUNCIL 50 IUPAT DISTRICT COUNCIL 57 IUPAT DISTRICT COUNCIL 21 IUPAT DISTRICT COUNCIL 26 PHILADELPHIA, PA 19154 ROSLINDALE, MA 02131 2980 SOUTHAMPTON RD 513 W. BROAD STREET HONOLULU HI 96826 CARNEGIE, PA 15106 2240 YOUNG STREET 2817 CORUNNA RD FLINT MI 48503 101 EWING ROAD 25 COLGATE RD Part

Schedule I (Form 990) (2011)

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

LABOR-	INTTIATIVE
TRADES	
ALLIED	COOPERATION
AND	
PAINTERS	MANAGEMENT

Page 1		•	тнв	THE				(066
52-6776506 Pa		(h) Purpose of grant or assistance	TO PROMOTE AND PROVIDE FINANCIAL SUPPORT FOR THE PAINTING INDUSTRY	TO PROMOTE AND PROVIDE FINANCIAL SUPPORT FOR THE PAINTING INDUSTRY				Schedule I (Form 990)
	ц II.)	(g) Description of non-cash assistance						
	edule I (Form 990), Pa	(f) Method of valuation (book, FMV, appraisal, other)						
	nited States (Sch	(e) Amount of non-cash assistance	0	0				
LABOR- IATIVE	nizations in the U	(d) Amount of cash grant	20000	<4,000,				
MANAGEMENT COOPERATION INITIATIVE	vernments and Organ	(c) IRC section if applicable	501(C)(5)	501(C)(6)				
T COOPERA	Assistance to Go	(b) EIN	94-0433056	33-0359139				
Schedule I (Form 990) MANAGEMENT COOPERATION INIT	Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	(a) Name and address of organization or government	IUPAT DISTRICT COUNCIL 16 2750 CONSTITUTION DRIVE LIVERMORE, CA 94551	WESTERN WALL AND CEILING CONTRACTORS ASSOCIATION - 1910 N, LIME STREET - ORANGE, CA 92865				

Schedule I (Form 990) (2011) MANAGEMENT COOPERATION INITIATIVE

Part III

Page 2

52-6776506

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance

Schedule I (Form 990) (2011)

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

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

PAINTERS AND ALLIED TRADES LABOR-MANAGEMENT COOPERATION INITIATIVE **Employer identification number** 52-6776506

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
LABOR-MANAGEMENT COOPERATION ACT OF 1974 TO ADVANCE THE
COLLECTIVELY-BARGAINED FINISHING INDUSTRIES THROUGH COMMUNICATION,
TRUST, AND MUTUAL RESPECT BETWEEN THE INTERNATIONAL UNION OF PAINTERS
AND ALLIED TRADES, AFL-CIO (IUPAT), THE FINISHING CONTRACTORS
ASSOCIATION, AND THE SIGNATORY EMPLOYERS OF IUPAT. THE ORGANIZATION IS
THE: (1) PRIMARY RESOURCE FOR THE LEADER EDUCATION, KNOWLEDGE EXCHANGE,
AND NETWORKING THAT IMPROVES THE CAPABILITIES OF THE UNIONIZED
FINISHING INDUTRY'S WORKFORCE. (2) RECOGNIZED LEADER OF A
LABOR-MANAGEMENT COOPERATIVE APPROACH TO ADVANCE THE
COLLECTIVELY-BARGAINED FINISHING INDUSTRY; AND (3) DRIVING FORCE IN
EXPANDING THE COOPERATIVE INITIATIVES TO ADDITIONAL FINISHING INDUSTRY
ASSOCIATION AND UNION ENTITIES AT ALL LEVELS.
ASSOCIATION AND UNION ENTITIES AT ALL LEVELS.
ASSOCIATION AND UNION ENTITIES AT ALL LEVELS. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: UNION OF PAINTERS AND ALLIED TRADES, AFL-CIO (IUPAT), THE FINISHING
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: UNION OF PAINTERS AND ALLIED TRADES, AFL-CIO (IUPAT), THE FINISHING CONTRACTORS ASSOCIATION, AND THE SIGNATORY EMPLOYERS OF IUPAT. THE
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: UNION OF PAINTERS AND ALLIED TRADES, AFL-CIO (IUPAT), THE FINISHING CONTRACTORS ASSOCIATION, AND THE SIGNATORY EMPLOYERS OF IUPAT. THE ORGANIZATION IS THE: (1) PRIMARY RESOURCE FOR THE LEADER EDUCATION,
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: UNION OF PAINTERS AND ALLIED TRADES, AFL-CIO (IUPAT), THE FINISHING CONTRACTORS ASSOCIATION, AND THE SIGNATORY EMPLOYERS OF IUPAT. THE ORGANIZATION IS THE: (1) PRIMARY RESOURCE FOR THE LEADER EDUCATION, KNOWLEDGE EXCHANGE, AND NETWORKING THAT IMPROVES THE CAPABILITIES OF
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: UNION OF PAINTERS AND ALLIED TRADES, AFL-CIO (IUPAT), THE FINISHING CONTRACTORS ASSOCIATION, AND THE SIGNATORY EMPLOYERS OF IUPAT. THE ORGANIZATION IS THE: (1) PRIMARY RESOURCE FOR THE LEADER EDUCATION, KNOWLEDGE EXCHANGE, AND NETWORKING THAT IMPROVES THE CAPABILITIES OF THE UNIONIZED FINISHING INDUTRY'S WORKFORCE. (2) RECOGNIZED LEADER OF A
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: UNION OF PAINTERS AND ALLIED TRADES, AFL-CIO (IUPAT), THE FINISHING CONTRACTORS ASSOCIATION, AND THE SIGNATORY EMPLOYERS OF IUPAT. THE ORGANIZATION IS THE: (1) PRIMARY RESOURCE FOR THE LEADER EDUCATION, KNOWLEDGE EXCHANGE, AND NETWORKING THAT IMPROVES THE CAPABILITIES OF THE UNIONIZED FINISHING INDUTRY'S WORKFORCE. (2) RECOGNIZED LEADER OF A LABOR-MANAGEMENT COOPERATIVE APPROACH TO ADVANCE THE

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

Schedule O (Form 990 or 990-EZ) (2011) Page 2 Name of the organization PAINTERS AND ALLIED TRADES LABOR-**Employer identification number** MANAGEMENT COOPERATION INITIATIVE 52-6776506 CREATED LOCAL AND NATIONAL FORUMS TO ADDRESS LABOR AND MANAGEMENT ISSUES IN THE WORKPLACE SO AS TO MUTUALLY CREATE SOLUTIONS THAT BENEFIT BOTH LABOR AND MANAGEMENT. CREATED THE STAR (SAFETY TRAINING AWARDS RECOGNITION PROGRAM) TO PROMOTE JOBSITE SAFETY AND THUS DECREASE ON THE JOB ACCIDENTS THAT BENEFIT THE INDUSTRY. FORM 990, PART VI, SECTION B, LINE 11: PAINTERS AND ALLIED TRADES LABOR-MANAGEMENT COOPERATION INITIATIVE'S FORM 990 IS PREPARED BY ITS INDEPENDENT PUBLIC ACCOUNTANT WHO THEN PROVIDES A COPY OF THE RETURN TO THE GOVERNING BODY BEFORE SIGNATURE AND FILING. FORM 990, PART VI, SECTION C, LINE 19: PAINTERS AND ALLIED TRADES LABOR-MANAGEMENT COOPERATION INITIATIVE'S GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART VII CONTACT ADDRESSES FOR OFFICERS, DIRECTORS, ETC: JAMES A. WILLIAMS - 7234 PARKWAY DRIVE, HANOVER, MD 21076 PAUL BUZZIN - 2700 DUFFERIN ST. UNIT 31, TORONTO, ONTARIO, CANADA M6B4J3 WILLIAM CANDELORI, JR. - 7234 PARKWAY DRIVE, HANOVER, MD 21076 ROBERT KUCHERAN - 7234 PARKWAY DRIVE, HANOVER, MD 21076 KENNETH E. RIGMAIDEN - 7234 PARKWAY DRIVE, HANOVER, MD 21076 GEORGE GALIS - 7234 PARKWAY DRIVE, HANOVER, MD 21076 ED SMITH - 7144 N. MARKET STREET, ST LOUIS, MO 63133 MARK CHUPLIS - 2 LUKENS DRIVE, SUITE 600, NEW CASTLE, DE 19720 MICHAEL CASSIDY - 21414 68TH AVENUE SOUTH, KENT, WA 98032 DAN THOMAS - 217 BATEMAN DRIVE, CENTRAL POINT, OR 97502 JAMES L. REID - 7234 PARKWAY DRIVE, HANOVER, MD 21076

25

POM CLERKIN - P.O. BOX 298, NORRISTOWN, PA 19404

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization PAINTERS AND ALLIED TRADES LABOR- MANAGEMENT COOPERATION INITIATIVE	Employer identification number 52-6776506
KEVIN SUTHERLAND - 210 S. RIVER STREET, SEATTLE, WA 98108	<u> </u>
FORM 990, PART XII, LINE 2C	
PAINTERS AND ALLIED TRADES LABOR-MANAGEMENT COOPERATION I	NITIATIVE'S
BOARD OF TRUSTEES IS RESPONSIBLE FOR OVERSEEING THE FINAN	ICIAL STATEMENT
AUDIT AND SELECTION OF THE INDEPENDENT ACCOUNTANT THAT PE	RFORMS THE
AUDIT.	
EODY 000 DADE VIT LINE 153 15D	
FORM 990, PART VI, LINE 15A, 15B THE CO-CHAIRS OF PAINTERS AND ALLIED TRADES LABOR-MANAGEM	
COOPERATION INITIATIVE (LMCI) ANNUALLY REVIEW AND DETERMI	
OF LMCI'S ADMINISTRATOR.	NE THE SALARY
OF IMCI 5 ADMINISTRATOR.	

OMB No 1545-0047 ► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Related Organizations and Unrelated Partnerships ➤ See separate instructions. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) MANAGEMENT COOPERATION INITIATIVE PAINTERS AND ALLIED TRADES LABOR-Attach to Form 990. Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) Part

Employer identification number 2011 Open to Public Inspection 52-6776506

Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if 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.) End-of-year assets e Total income **©** Legal domicile (state or foreign country) Primary activity Name, address, and EIN of disregarded entity Part II

(g) Section 512(b)(13) ž × × controlled entity? Yes Direct controlling entity status (if section Public charity 501(c)(3)) 509(A)(2) Exempt Code 101(A)/501(A section 501(C)(3) ਉ Legal domicile (state or foreign country) **AARYLAND** MARYLAND Primary activity PRAINING FUND PENSION FUND LABOR MANAGEMENT COOPERATION INITIATIVE 401K 52-1923143, 7230 PARKWAY DRIVE, HANOVER, MD PLAN - 52-6776506, 7234 PARKWAY DRIVE IUPAT - FINISHING TRADES INSTITUTE Name, address, and EIN of related organization HANOVER MD 21076 21076

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

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Schedule R (Form 990) 2011

Schedule R (Form 990) 2011 MANAGEMENT COOPERATION INITIATIVE

Part III 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.)

Page 2

52-6776506

organizations treated as a partnership during the tax year.)	rtnership during the tay	< year.)								•
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-54)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or F managing partner?	(j) (k) General or Percentage managing ownership Yes No
Part IV 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.)	ganizations Taxable ar	s a Corpo g the tax y	ration or Trust (Cor ear.)	nplete if the organiz	ation answered "Yes	to Form 990, Pa	t IV, line 34 I	because it had on	e or mor	related
(a) Name, address, and EIN of related organization	∑ c		(b) Primary activity	(C) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) total Share of end-of-year assets		(h) Percentage ownership

Schedule R (Form 990) 2011

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Page 3

52-6776506

PAINTERS AND ALLIED TRADES LABOR-MANAGEMENT COOPERATION INITIATIVE Schedule R (Form 990) 2011 Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.) Part V

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				>	Yes No
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?	s with one or more re	ated organizations listed	ın Parts II-IV?		-
a Receipt of (i) interest (ii) annurties (iii) royalties or (iv) rent from a controlled entity				1	×
b Gift, grant, or capital contribution to related organization(s)				e	×
c Gift, grant, or capital contribution from related organization(s)	:	:		9	×
d Loans or loan guarantees to or for related organization(s)				19	×
e Loans or loan guarantees by related organization(s)	:			- 1e	×
f Sale of assets to related organization(s)				=	×
g Purchase of assets from related organization(s)			:	70	×
				52 -4	: >
n Exchange of assets with related organization(s)	:			=	4 :
i Lease of facilities, equipment, or other assets to related organization(s)				;=	×
j Lease of facilities, equipment, or other assets from related organization(s)		:	: : : : : : : : : : : : : : : : : : : :	ij	×
k Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)	-	. :	¥	×
1 Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)	:		=	×
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ion(s)			Ę	×
n Sharing of paid employees with related organization(s)				Ę	×
	: :				
o Reimbursement paid to related organization(s) for expenses				9	×
				1p	×
q Other transfer of cash or property to related organization(s)				þ	×
Other transfer of cash or property from related organization(s)	:			1	X
	who must complete th	is line, including covered	relationships and transaction thresholds.		
ĺ	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved		
(1)					
(2)					
(3)					
(4)		:			
(5)					
107					
132.163 01-23-12	29		Schedule	Schedule R (Form 990) 2011	90) 2011

52-6776506

Page 4

PAINTERS AND ALLIED TRADES LABOR-

Schedule R (Form 990) 2011 MANAGEMENT COOPERATION INITIATIVE

Part VI 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.

and the state of t	מווסבים השמותווא פאמות	מוסו וסו הפו נשוו ויווא	estingin parties inbs.						
(e)	Q	<u></u>	(Q		(6)	<u>e</u>	€	3	€
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	(related, unrelated, 501(c)(3)	State Share of total	Share of end-of-year	Dispropor- tionate allocations?	amount in box 20 managing ownership	General o managing partner?	Percentage ownership
		country)	under section 512-514) yes	No income	assets	Yes	(Form 1065)	Yes No	
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Schedule R (Form 990) 2011

2011 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

990

Current Year Deduction		0	0	4,479.	3,983.	8,462.	8,462.						
Current Sec 179						0.	0.						
Accumulated Depreciation		10,056.	12,000.	31,349.	10,621.	64,026.	64,026.						
Basis For Depreciation	,	10,056.	12,000.	44,785.	79,656.	146,497.	146,497.		· .	. 16			
Reduction In Basis						0	0						,
Bus % Excl											 > 1 3 1	**	* *
Unadjusted Cost Or Basis		10,056.	12,000.	44,785.	79,656.	146,497.	146,497.				* ,		
No No		16	16	16	116					/		.=.	
Life		2.00	5.00	5.00	10.001			··				`	
Method		ĭ	ıï.	Į.	Į.								
Date Acquired		05290181	123103SL	062908SL	090110SL								
Description	MACHINERY & EQUIPMENT FURNITURE &			7MAIL INSERTER	8MOI - FURNITURE	A E	PAGE 10 DEPR						
Asset		(T)	4 i		ω								

(D) - Asset disposed

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

128102 05-01-11

Form **8868**

(Rev. January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

• If you	are filing for an Automatic 3-Month Extension, comple	te only Pa	rt I and check this box		▶	X				
-	are filing for an Additional (Not Automatic) 3-Month Ex									
-	omplete Part II unless you have already been granted a				rm 8868					
Electron	ic filing (e-file). You can electronically file Form 8868 if y	ou need a	3 month automatic extension of tin	ne to file (6	months for a corpo	oration				
	to file Form 990-T), or an additional (not automatic) 3-more									
•	of file any of the forms listed in Part I or Part II with the exc		•		•					
	Benefit Contracts, which must be sent to the IRS in pap									
	v.irs.gov/efile and click on e-file for Charities & Nonprofits		(000			•,				
Part I	Automatic 3-Month Extension of Time		submit original (no copies ne	eded).						
	ation required to file Form 990-T and requesting an autor				<u>-</u> -					
Part I onl	y									
All other	corporations (including 1120-C filers), partnerships, REM	ICs, and t	rusts must use Form 7004 to reques	t an exten	sion of time					
	ome tax returns.		<u> </u>							
Type or	Name of exempt organization or other filer, see instru	ctions.		Employe	identification numb	per (EIN) or				
print	PAINTERS AND ALLIED TRADES	LABO	R-							
•	MANAGEMENT COOPERATION INIT	'ITAI'	VE	X	52-677650)6				
File by the due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.	Social se	cunty number (SSN)				
filing your return See	7234 PARKWAY DRIVE									
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. HANOVER, MD 21076									
	HANOVER, MD 21076									
						01				
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)	••• •••		0 1				
A Ii a a A		Datum	Andination			Return				
Applicat	ion	Return	Application							
Is For		Code	Is For			Code 2				
Form 990 01 Form 990-T (corporation) Form 990-BL 02 Form 1041-A										
		02	Form 4720			08				
Form 990		10								
Form 990		04	Form 5227			11				
	O-T (sec. 401(a) or 408(a) trust)	05 06	Form 6069 Form 8870			12				
FOIIII 99	O-T (trust other than above) CHARLES HARRIS	1 00	FOIII 8070			.1 .12				
• Thob	ooks are in the care of > 7234 PARKWAY DI	OTME.	- HANOVER, MD 2107	6						
	hone No. ► 410-564-5900	KT A IZ	FAX No. ►	<u> </u>						
-	organization does not have an office or place of business	e in the l Ir								
	is for a Group Return, enter the organization's four digit					heck this				
box ▶	. If it is for part of the group, check this box	3			= :					
	equest an automatic 3-month (6 months for a corporation				CIS THE EXTENSION IS	101.				
	FEBRUARY 15, 2013, to file the exemp	-			The extension					
us f	for the organization's return for:	· o.gaca	inon rotati for the organization many							
	calendar year or									
	X tax year beginning JAN 1, 2012	an	d ending JUN 30, 2012							
_		,			 ·					
2 If t	he tax year entered in line 1 is for less than 12 months, o	heck reas	on: Initial return	Final retur	n					
	Change in accounting period									
-	endings in decoding points									
3a If t	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any							
	nrefundable credits. See instructions.		· ·	3a	\$	0.				
_	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and							
	timated tax payments made. Include any pnor year over	-		3ь	\$	0.				
	lance due. Subtract line 3b from line 3a. Include your pa									
	using EFTPS (Electronic Federal Tax Payment System).	-	·	3с	\$	_0.				
	. If you are going to make an electronic fund withdrawal				EO for payment inst					
	For Privacy Act and Paperwork Reduction Act Notice,		****		Form 8868 (R					