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Form **990-EZ**

Short Form 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)

2012

OMB No 1545-1150

Department of the Treasury Internal Revenue Service Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.
 The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

For the 2012 calendar year, or tax year beginning 2012, and ending Check if applicable C Name of organization D Employer identification number Address change UNITED STEELWORKERS LOCAL UNION 11228 48-6114105 Name change Number and street (or P.O. box, if mail is not delivered to street address) Room/suite Telephone number Initial return (620) 327-2642 Terminated P.O. BOX 251 City or town, state or country, and ZIP + 4 Amended return Group Exemption Application pending | HESSTON Number KS 67062 **0260** Accounting Method X Cash Accrual Other (specify) Check ► X If the organization is not required to attach Schedule B uswlocal11228.com (Form 990, 990-EZ, or 990-PF) X 501(c) (4947(a)(1) or 501(c)(3) (insert no) Tax-exempt status (check only one) -If the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000 A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions) But if the organization chooses to file a return, be sure to file a complete return Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ► S 170.457. Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) X Check if the organization used Schedule O to respond to any question in this Part 1 Contributions, gifts, grants, and similar amounts received 1 283. Program service revenue including government fees and contracts 2 Membership dues and assessments 3 167,265. 4 Investment income 2,909. 5 a Gross amount from sale of assets other than inventory 5 a ر:O 5 b **b** Less, cost or other basis and sales expenses SV2 MIL GENUS 5 c c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than \$15,000) 6 a b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) 6 b c Less direct expenses from gaming and fundraising events 6с d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 7a Gross sales of inventory, less returns and allowances 7 a b Less cost of goods sold 7 b c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7 c Other revenue (describe in Schedule O) 8 9 Total revenue. Add lines 1, 2, 3, 9 170,457 10 Grants and similar amounts paid (list 10 11 Benefits paid to or for members 11 Salaries, other compensation, and Employee pengits 2013 12 12 95,248. 13 Professional fees and other payments to independent contractor 13 1,500. 14 Occupancy, rent, utilities, and maintenance 14 15,437. 15 Printing, publications, postage, and shipp 15 745. See Form 990-EZ, Part I, Line 16 Other Expens 16 Other expenses (describe in Schedule O) 16 8,731. 17 Total expenses. Add lines 10 through 16 17 121,661. 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 48,796. 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 389,880. 20 Other changes in net assets or fund balances (explain in Schedule O) 20 Net assets or fund balances at end of year Combine lines 18 through 20 21 438,676.

Form **990-EZ** (2012)

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

Form	1990-EZ (2012) UNITED STEELWOE	RKERS LOCAL UNION	11228		<u>48-61</u>	.14105 Page 2
Far	Check if the organization used Sche	edule O to respond to any que	estion in this Part II			X
				(A) Beginning of	year	(B) End of year
22	Cash, savings, and investments			346,4		
23 24	Land and buildings	See L-24 St	mt.	43,3		
24 25	Other assets (describe in Schedule O) Total assets	333 2 3 . 50			50. 24	
26	Total liabilities (describe in Schedule O)	See L-26 St	mt l	389,8	-	
	Net assets or fund balances (line 27 of		ıne 21)	389,8		
Par					_	Expenses
	Check if the organization used Sc	hedule O to respond to any qu		<u> </u>	X (Re	quired for section 501
What	s the organization's primary exempt purpose? SE	E SCHEDULE O	la Alaca d'Israel			3) and 501(c)(4) anizations and section
mea	ribe the organization's program service as sured by expenses. In a clear and concise	e manner, describe the servic	es provided, the num	am services, as ber of persons		7(a)(1) trusts, optional others)
28	fited, and other relevant information for e				101	
20	SEE SCHEDULE O				-	
				-	· -	
	(Grants \$) If th	is amount includes foreign gi	rants, check here		□ 28 :	a
29			·			
					_	
20	(Grants \$) If th	is amount includes foreign gr	rants, check here	>	29	a
30						
	(Grants \$) If the	is amount includes foreign gr	ants, check here		□ 30 a	<u>a</u>
31	Other program services (describe in Sch		arto, ericely riere		30.	-
	(Grants \$) If th	iis amount includes foreign gr	ants, check here	>	31 :	a
32	Total program service expenses (add lii				▶ 32	
Par	t IV List of Officers, Directors,	Trustees, and Key Em	ployees. List each one	e even if not compensat	ed (see t	the instructions for Part IV)
	Check if the organization used Sci		uestion in this Part IV			<u>_</u> _
	(a) Name and Title	(b) Average hours per week devoted to position	(c) Reportable compensate (Forms W-2/1099-MISC) (If not paid, enter -0-)	boastit plans and	mployee deferred	(e) Estimated amount of other compensation
BRI	AN F. LANSAW			-1-1		
	SIDENT	10.00	8,68	0.	0	0.
	SE PINKSTON	c 00		_	_	
	E PRESIDENT NY M. HAWKINS	6.00	9,17	5.	0.	0.
	ASURER	6.00	9,92	2	0.	. 0.
	ORES A. BYRD		<u> </u>	2.		•
	RETARY	10.00	14,33	6.	0.	0.
	LIAM_ETANNER					
	ANCIAL OFFICER	19.00	24,92	9.	0	. 0.
	IN_L. RIMBEY	17 00	7 00	_	^	
<u>ras</u>	T PRESIDENT	17.00	7,92	3.1	0	. 0.
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	· 					1
BAA		TFFA0812 (13/14/13	1		Form 990.F7 (2012)

the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V			X
33 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,'		Yes	No
provide a detailed description of each activity in Schedule O	33		X
34 Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect			
a change to the organization's name. Otherwise, explain the change on Schedule 0 (see instructions) 35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities	34	Х	
(such as those reported on lines 2, 6a, and 7a, among others)?	35 a		v
b If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O	35 b		<u> </u>
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,	330		
reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III	35 c	х	
36 Did the organization undergo a liquidation, dissolution, termination, or significant			
disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions 0	ļ		
 b Did the organization file Form 1120-POL for this year? 38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were 	37 b		X
any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38 a		
b If 'Yes,' complete Schedule L, Part II and enter the total	-		
amount involved 38 b	_		
39 Section 501(c)(7) organizations Enter			
a Initiation fees and capital contributions included on line 9	-		
b Gross receipts, included on line 9, for public use of club facilities 39b	-		
40 a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under:			
section 4911 , section 4912 , section 4955 , sectio			
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it engage in an excess benefit transaction in a prior year that has not been reported	i		i
on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	40 b		
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization			
managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed	-		
by the organization	_	4	
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40 e		X
41 List the states with which a copy of this return is filed •		•	
42 a The organization's books are in care of WILLIAM E. TANNER Located at 116 WEST SMITH STREET BATTON BATTO	42 b	-264 Yes	No X
books are in care of WILLIAM E. TANNER Located at 116 WEST SMITH STREET BAT 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)? If 'Yes,' enter the name of the foreign country			No X
books are in care of WILLIAM E. TANNER Located at 116 WEST SMITH STREET BALENT BALE	42 b		No X
books are in care of WILLIAM E. TANNER Located at 116 WEST SMITH STREET BATE HESSTON BATE AND IT HESSTON BATE	42 b	Yes	No X
books are in care of WILLIAM E. TANNER Located at 116 WEST SMITH STREET BESSTON BALE 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)? If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. C At any time during the calendar year, did the organization maintain an office outside of the U S? If 'Yes,' enter the name of the foreign country 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead	42 b	Yes	No X
books are in care of WILLIAM E. TANNER Located at 116 WEST SMITH STREET BESTON KS 2IP + 4 67062 b 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)? If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the U S? If 'Yes,' enter the name of the foreign country 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed	42 b 42 c	Yes	No X X
books are in care of WILLIAM E. TANNER Located at 116 WEST SMITH STREET BESSTON KS ZIP + 4 67062 b 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)? If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the US? If 'Yes,' enter the name of the foreign country 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ c Did the organization receive any payments for indoor tanning services during the year? d If 'Yes' to line 44c. has the organization filed a Form 720 to report these payments?	42 b 42 c 44 a 44 b 44 c	Yes	No X
books are in care of WILLIAM E. TANNER Located at 116 WEST SMITH STREET BESSTON KS ZIP + 4 67062 b 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)? If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the U S? If 'Yes,' enter the name of the foreign country 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ c Did the organization receive any payments for indoor tanning services during the year? d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'Yes,' provide an explanation in Schedule O	42 b 42 c 44 a 44 b 44 c	Yes	No X
books are in care of WILLIAM E. TANNER Located at 116 WEST SMITH STREET BESSTON KS ZIP + 4 67062 b 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)? If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the US? If 'Yes,' enter the name of the foreign country 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ c Did the organization receive any payments for indoor tanning services during the year? d If 'Yes' to line 44c. has the organization filed a Form 720 to report these payments?	42 b 42 c 44 a 44 b 44 c	Yes	No X

Candidates for public office? If "Yes, complete Schedule C, Part I Se Part VI Section 501(c)(3) organizations only All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51 Check if the organization used Schedule O to respond to any question in this Part VI Yes	46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part III Section 501(c)(3) organizations only All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51. Check if the organization used Schedule O to respond to any question in this Part VI 47 Did the organization appear in bibbying activities or have a section 501(n) election in effect during the tax year? if "Yes," complete Schedule C, Part II 48 Is the organization make any transfers to an exempt non-charitable related organization? 49 and the organization make any transfers to an exempt non-charitable related organization? 50 Complete this table for the organization's five highest compensated employees (other than officers, directors, fuscless and key employees) who each received many \$100,000 of compensation from the organization. Here is none, enter Yhone: (o) Name and afters of other employees paid over \$100,000 1 Total number of other employees paid over \$100,000 1 Total number of other employees paid over \$100,000 1 Total number of other employees paid over \$100,000 1 Total number of other employees paid over \$100,000 1 Total number of other midpendent contractors each received more than \$100,000 2 Dott the organization of the organization of the properties of the organization organization organization organization organization organization o	orm 990-	EZ (2012) UNITED STEELWORKER	S LOCAL UNION	11228	48-61	14105	F	age
Age	candidates for public office? If Yes, complete Schedule C, Part I Section 501(c)(3) organizations only All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51. Check if the organization used Schedule O to respond to any question in this Part VI Yes Complete Schedule Fart Vision All section 501(c)(3) organizations are section 501(h) election in effect during the tax year? If Yes, Vision Vi				· · · · · · · · · · · · · · · · · · ·			Yes	No
All section 501 (c) (3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51. Check if the organization used Schedule O to respond to any question in this Part VI 47 Did the organization organize in lobbying activities or have a section 501 (h) election in effect during the tax year? If "Yes," complete Schedule C Part II 18 Is the organization as school as described in section 170(b)()(A)(ii)? If "Yes," complete Schedule E 93 bit the organization as actived in section 170(b)()(A)(ii)? If "Yes," complete Schedule E 93 bit the organization as actived in section 170(b)()(A)(ii)? If "Yes," complete Schedule E 93 bit "Yes," was the related organization is five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter None (o) Name and titled each employee paid once than \$100,000 of compensation from the organization. If there is none, enter None (o) Name and titled each employees paid over \$100,000 of compensation from the organization of the properties of of the	All section 50 (c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51. Check if the organization used Schedule O to respond to any question in this Part VI 747. Did the organization as chool as described in section 170(b)(1)(A)(i)? If "Yes," complete Schedule C, Part III 748. Is the organization a school as described in section 170(b)(1)(A)(i)? If "Yes," complete Schedule E 749. Did the organization as chool as described in section 170(b)(1)(A)(i)? If "Yes," complete Schedule E 749. Did the organization as chool as described in section 170(b)(1)(A)(i)? If "Yes," complete Schedule E 749. Did the organization as chool as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 749. Did the organization as chool as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 749. Did the organization as chool as described in section 170(b) (I)(A)(ii)? If "Yes," complete Schedule A 749. Did the organization as chool as described in section 170(b) (I)(A)(ii)? If "Yes," complete Schedule A 749. Did the organization in the organization is the organization form the organization is the organization in the organization if there is none, enter None. 749. Did the organization organization is the property of the organization of the organization is the property organization or the organization if there is none, enter None. 749. Did the organization organization organization is there is none, enter None. 749. Did the organization organization organization organization organization organization organization organization organization organization. 750. Complete this table for the organization if there is none, enter None. 750. Did the organization organization organization organization organization. 750. Did the organization organization organization organization. 750. Did the organization organization organization organization. 750. Did the organization organization organization. 750. Did the organization organization organization organizatio	16 Did to	the organization engage, directly or indirectly described indirectly and indirectly services for public office? If 'Yes,' complete	ctly, in political campai Schedule C, Part I	gn activities on behalf of	f or in opposition to	46		x
for lines 50 and 51. Check of the organization used Schedule O to respond to any question in this Part VI 7 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 8 Is the organization a school as described in section 170(b)(1)(A)(h)? If "Yes," complete Schedule E 9a Did the organization and search of the organization and search of the organization and search of the organization and search in section 52 organization? 0 Complete this table for the organization of the organizati	for lines 50 and 51. Check if the organization used Schedule O to respond to any question in this Part VI 7 Did the organization engage in lobbying activities or have a section 50 (th) election in effect during the tax year? If "Yes, complete Schedule C, Part II 8 B is the organization as school as described in section 1700)(1)(A)(ii)? If "Yes, complete Schedule E 9a Did the organization make any transfers to an exempt non-charitable related organization? 10 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$10,000 of compensation from the organization. If there is note, enter "None" (a) Name and actitise of each employee spand over \$100,000 of compensation from the organization, if there is note, enter None to the property of the	art VI			ulestions 47-49h ar	nd 52 and complete	the table	٠, ح	
To bid 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	Vest		for lines 50 and 51.		•	ia 52, ana complete	o the table	.5	ſ
47 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 all 18 is the organization as school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 48 49 49 49 49 40 40 40 40	47 Did the organization engage in lobbying activities of have a section 50 (b) election in effect during the tax year? If Yes, complete Schedule C, Part II 181 is the organization as school as described in section 170(b)(1)(A)(n)? If Yes, complete Schedule E 48 49 a bit the organization as school as described in section 527 organization? 19 If Yes, was the related organization as section 527 organization? 19 Complete this table for the organization section 527 organization from the organization. If there is none, enter None organization with previous compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter None organization from the organization of compensation from the organization from the organization of compensation from the organization of compensation from the organization of compensation from the organization of the org		Check if the organization used Schedule	e O to respond to any o	question in this Part VI		-		
48 Is the organization as school as described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E 49 a Did the organization make any transfers to an exempt non-charitable related organization? 50 Complete this table for the organization's five highest compensation of mit the organization. If there is none, enter None: (iii) Average hours paid more than 1100,000 of compensation from the organization. If there is none, enter None: (iii) Average hours paid more than 1100,000 of compensation from the organization. If there is none, enter None: (iii) Average hours paid more than 1100,000 of compensation from the organization. If there is none, enter None: (iii) Average hours paid more than 1100,000 of compensation from the organization of other compensation for the organization of the organization. If there is note, enter None: (iii) Average hours paid more than 1100,000 of compensation from the organization of other compensation for the organization of the orga	### 1758 Is the organization as school as described in section 170(b)(1)(A)(i))* If Yes, complete Schedule E ### 3a Did the organization make any transfers to an exempt non-charitable related organization? ### 3b If Yes, was the related organization is section 527 organization? ### 50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter None: ### 60 April 100 Apri			ies or have a section 5	01(h) election in effect o	furing the tax year? If 'Y		Yes	N
49a 49b 49c	39 a Did the organization make any transfers to an exempt non-charitable related organization? 39 a 49 b 4	•		ction 170(b)(1)(A)(ii)?	If 'Yes,' complete Sched	lule E	48		
50 Complete this table for the organization's five highest compensated employees (other than officers, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter None: (a) Name and talls of oran employee paid more than \$100,000 of compensation from the organization. If there is none, enter None: (b) Avarage hours paid more than \$100,000 of compensation from the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization is five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization is five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization of the organization from the organization of the organization complete Schedule A? Note: All section 50 (c)(3) organizations and 4947(a)(1) nonexempt characteristic from the organization of many properties of the organization of many properties of the organization of many properties and information of which prepare the any trondedge and belef, it is solved in a information of which prepare the any trondedge and belef, it is solved in the organization of properties of the organization of the	Total number of other employees paid over \$100,000 If Total number of other employees paid over \$100,000 If Total number of other employees paid over \$100,000 If Total number of other employees paid over \$100,000 If Total number of other employees paid over \$100,000 If Total number of other employees paid over \$100,000 If Total number of other employees paid over \$100,000 If Total number of other employees paid over \$100,000 If Total number of other employees paid over \$100,000 If Total number of other employees paid over \$100,000 If Total number of other employees paid over \$100,000 If Total number of other employees paid over \$100,000 If Total number of other employees paid over \$100,000 If Total number of other employees paid over \$100,000 If Total number of other employees paid over \$100,000 If Total number of other employees paid over \$100,000 If Total number of other employees paid over \$100,000 If Total number of other independent contractor paid more than \$100,000 If Total number of other independent contractor paid more than \$100,000 If Total number of other independent contractor paid more than \$100,000 If Total number of other independent contractor paid more than \$100,000 If Total number of other independent contractor paid more than \$100,000 If Total number of other independent contractor paid more than \$100,000 If Total number of other independent contractor paid more than \$100,000 If Total number of other independent contractor paid more than \$100,000 If Total number of other independent contractor paid more than \$100,000 If Total number of other independent contractor paid more than \$100,000 If Total number of other independent contractor paid more than \$100,000 If Total number of other independent contractor paid more than \$100,000 If Total number of other independent contractor paid more than \$100,000 If Total number of other independent contractor paid more than \$100,000 If Total number of other independent contractor paid more than \$100,000 If Total number of	49 a Did t	he organization make any transfers to an	exempt non-charitable	related organization?		49 a		
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Did the organization complete Schedule A? Note: All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Index 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 use, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Index 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 use, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Index 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 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 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 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 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 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 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 penalties of perjury, I have penalties of perjury, I have penalties of penalties of my knowledge and belie	Did the organization complete Schedule A? Note: All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Index 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 use, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge I S - /3 - 2 0 / 3 Signature of officer Date Print/Type or print name and title Print/Type preparer's name Preparer's signature GREGORY M. HENNE, CPA Firm's name STEELY & SCHIMMING, LLC Firm's name STEELY & SCHIMMING, LLC Firm's address PO BOX 608 NEWTON KS 67114 Phone no (316) 283-481			_					
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Did the organization complete Schedule A? Note: All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Index 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 use, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Index 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 use, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Index 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 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 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 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 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 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 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 penalties of perjury, I have penalties of perjury, I have penalties of penalties of my knowledge and belie	Did the organization complete Schedule A? Note: All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Index 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 use, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge S - /3 - 2 0 / 3				1				
reparer se Only Index 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 supported beclaration of preparer (other than officer) is based on all information of which preparer has any knowledge S - /3 - 2 0 / 3	inder 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 use, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer	52 Did t	he organization complete Schedule A? No	te: All section 501(c)(3	•	7(a)(1) nonexempt			
ign lere Signature of officer	Signature of officer WILLIAM E. TANNER Type or print name and title Print/Type preparer's name GREGORY M. HENNE, CPA Firm's name STEELY & SCHIMMING, LLC Firm's address PO BOX 608 NEWTON Signature of officer Date FINANCIAL OFFICER PTIN Check of self-employed P00045647 Firm's ell Pono (316) 283-481	nder penaltie	es of perjury, I declare that I have examined this return,	including accompanying sche	edules and statements, and to the of which preparer has any know	ne best of my knowledge and be		<u> </u>	i N
WILLIAM E. TANNER Type or print name and title Print/Type preparer's name Preparer's signature GREGORY M. HENNE, CPA Firm's name > STEELY & SCHIMMING, LLC Firm's address > PO BOX 608 NEWTON KS 67114 Financial Officer Check self-employed Print PTIN PO0045647 PTIN PO0045647 PTIN PO0045647 Print's EIN 48-1125457 NEWTON KS 67114 Phone no (316) 283-4810	WILLIAM E. TANNER Type or print name and title Print/Type preparer's name Preparer's signature Print/Type preparer's name GREGORY M. HENNE, CPA Firm's name STEELY & SCHIMMING, LLC Firm's address PO BOX 608 NEWTON KS 67114 Financial Officer Check of Sold Print Self Policy Print Self Pri	-	will I			5-13-20	113		
Type or print name and title Print/Type preparer's name Preparer's signature Preparer's signature GREGORY M. HENNE, CPA Firm's name > STEELY & SCHIMMING, LLC Firm's address > PO BOX 608 NEWTON Firm's address > PO BOX 608 KS 67114 PTIN Check self-employed PO Dote PO DOTE SOLUTION Print's EIN	Type or print name and title Print/Type preparer's name GREGORY M. HENNE, CPA Firm's name > STEELY & SCHIMMING, LLC Se Only Firm's address > PO BOX 608 NEWTON Type or print name and title Print/Type preparer's signature Date S-13-2013 Check of print name print nam						CER		
GREGORY M. HENNE, CPA S-13-2013 Check of self-employed P00045647	aid reparer se Only Firm's address PO BOX 608 NEWTON GREGORY M. HENNE, CPA PO BOX 608 Firm's address PO BOX 608 KS 67114 Check of firm's self-employed P00045647 Firm's EIN Phone no (316) 283-481		Type or print name and title	Preparer's signature	Date				
aid reparer se Only Firm's address ► PO BOX 608 Firm's address ► NEWTON KS 67114 Phone no (316) 283-4810	aid reparer STEELY & SCHIMMING, LLC Firm's address ► PO BOX 608 Firm's EIN ► 48-1125457 Phone no (316) 283-481			9) . a . a . a . a . 1 -	l l	Check L rf		_	
Se Only Firm's address ► PO BOX 608 Firm's EIN ► 48-1125457 NEWTON KS 67114 Phone no (316) 283-4810	Firm's address Firm's address Firm's EIN 48-1125457			TACKERON W. HEN	neichy 12-13-7	self-employed F	<u>20004564</u>	7	
NEWTON KS 67114 Phone no (316) 283-4810	NEWTON KS 67114 Phone no (316) 283-481		DIEDET & CONTIN	ING, LLC			40 411		
		se unly	<u> </u>				· · · · · · · · · · · · · · · · · · ·		
ay the IRS discuss this return with the preparer shown above? See instructions	tana da an da an					Prione no (31			· ·
	ialy the IRS discuss this return with the preparer shown above? See instructions	lay the IR	S discuss this return with the preparer she	own above? See instru	ctions	• • •	► X Yes	L	No

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

OMB No 1545-0047

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.

Open to Public Inspection:

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

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

• ;	Section 501(c)(4), (5), or (6) o	rganizations: Complete Part III			
Name	e of organization			Employer identifica	ation number
UN	ITED STEELWORKERS I	LOCAL UNION 11228		48-611410	
Par	rt I-A Complete if the o	rganization is exempt under section	on 501(c) or is a	section 527 organia	zation.
1	Provide a description of the o	organization's direct and indirect political ca	mpaign activities in F	art IV	
2	Political expenditures			► \$	
3	Volunteer hours				
Par	rt I-B≝ Complete if the o	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any exci	ise tax incurred by the organization under s	ection 4955	► \$	
2	Enter the amount of any exci	ise tax incurred by organization managers u	inder section 4955	▶ \$	
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for t	his year?		Yes No
4 :	a Was a correction made?				Yes No
1	b If 'Yes,' describe in Part IV				
Pai	rt I-C Complete if the o	rganization is exempt under section	on 501(c), excep	t section 501(c)(3).	
1		pended by the filing organization for section			
2	Enter the amount of the filing function activities	g organization's funds contributed to other o	rganizations for section	on 527 exempt ► \$	
3	Total exempt function expendine 17b	ditures Add lines 1 and 2 Enter here and o	n Form 1120-POL,	▶\$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5	Enter the names, addresses organization made payments	and employer identification number (EIN) of For each organization listed, enter the amons received that were promptly and directly action committee (PAC) If additional space	ount paid from the fili	ng organization's funds	Also enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 201	¹² UNITED STE	ELWORKERS LOCAL U	JNION_11228	48-6114	1105 Page 2
Part II-A Complete if section 501	the organization	on is exempt under se	ection 501(c)(3) and	filed Form 5768 (el	ection under
A Check ► I if the film	ng organization bel	ongs to an affiliated group (and list in Part IV each a	affiliated group member's	name,
address,	, EIN, expenses, ar	nd share of excess lobbying	expenditures)		
B Check ► I if the filli	ng organization che	ecked box A and 'limited con	itrol' provisions apply		
(The term		ying Expenditures eans amounts paid or incuri	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	ures to influence pu	iblic opinion (grass roots lob	bying)		
b Total lobbying expenditu	ures to influence a	legislative body (direct lobby	ying)		
c Total lobbying expenditu	ures (add lines 1a a	and 1b)			
d Other exempt purpose e	expenditures				
e Total exempt purpose e	xpenditures (add lii	nes 1c and 1d)			
f Lobbying nontaxable and both columns	nount Enter the am	nount from the following tabl	e ın		
If the amount on line 1e, col	umn (a) or (b) is	The lobbying nontaxable	amount is		
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the excess	over \$500,000		
Over \$1,000,000 but not over \$	\$1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000		
Over \$1,500,000 but not over \$	\$17,000,000	\$225,000 plus 5% of the excess	over \$1,500,000		
Over \$17,000,000		\$1,000,000			
g Grassroots nontaxable a		•			
h Subtract line 1g from lin		-,			
i Subtract line 1f from line		•	Ţ		
j If there is an amount off section 4911 tax for this	her than zero on er s year? 	ther line 1h or line 1i, did the	e organization file Form	4720 reporting	Yes No
(Son	ne organizations th colun	4-Year Averaging Period U nat made a section 501(h) el nns below. See the instructi	ection do not have to co	omplete all of the five 2f.)	-
	Lob	bying Expenditures During	4-Year Averaging Perio	d	
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying					
expenditures BAA			<u> </u>		990 or 990-EZ) 2012

	(;	a)	(b)
or each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description f the lobbying activity	Yes	No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum.			
through the use of			
a Volunteers?	-		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			_
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	_	1	
i Other activities?			
j Total Add lines 1c through 1i			
2 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 under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912		İ	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Part III-A Complete if the organization is exempt under section 501(c)(4), section section 501(c)(6).	501(c)(5)	, or	
			Yes N
1 Were substantially all (90% or more) dues received nondeductible by members?			1 ;
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2 X
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			3 7
Part III-B Complete if the organization is exempt under section 501(c)(4), section (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR answered 'Yes.'	501(c)(5) (b) Part II	, or s II-A, li	ection 501(c) ine 3, is
1 Dues, assessments and similar amounts from members		1	
	al		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).		2 a	
 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year 		2 b	
expenses for which the section 527(f) tax was paid).			
expenses for which the section 527(f) tax was paid). a Current year	·	2 c	
expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year	;	3	
expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exdoes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and organization.	cess political	3	
expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditure next year?	cess olitical	3	
 expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exdoes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perspenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 	cess oolitical	3	
expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year?	political	4 5	d group list),

Contents of the state of the st	40-0114103
Part W Supplemental Information (continued)	
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Name of the organization		Employer identification number
UNITED STEELWORKE	RS LOCAL UNION 11228	48-6114105
	USW Local 11228 acts as the collective bargaini	ng_agent
	for AGCO Corp. employees at Hesston, KS. The Un	ion
	represents employees in negotiating and contract	ting
	with management regarding wages, hours, job sec	curity,
	grievances, and promotes the best interest and	welfare
	of AGCO Corp. Hesston employees.	
Pt III, Line 31	The Local Union continues in an ongoing effort	to
	_defend and enforce_the_negotiated_collective_ba	rgaining
	agreement for our members' wages, benefits, and	L
	working conditions. The members dues, related i	ncome,
	and expenses are used to carry out these activi	ties.
	The Local Union is continually striving to acco	omplish
	improvements for our members.	
Pt_V,_Line_34	"Hesston Corporation Workers Association" has b	een
	dropped from the name of the Union.	
		
		

Schedule O (Form 990 or 990-EZ),	Supplemental	Information	to Form	990 or 9	90-EZ
. Form 990-EZ, Part I, Line 16 Other	Expenses				

Other expenses (describe in Schedule O)	
TRAVEL EXPENSES	3,255.
CONFERENCES/SCHOOLS EXPENSE	2,915.
ADMINISTRATION EXPENSES	2,459.
STATE ANNUAL REPORT FEE	65.
BANK SERVICE CHARGES	37.
Total	8.731.

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ Form 990-EZ, Page 1, Part II, Line 24

Line 24 - Other Assets:	Beginning of Year	End of Year
UTILITY DEPOSIT	150.	150.
Total	150.	150.

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ Form 990-EZ, Page 1, Part II, Line 26

Line 26 - Total Liabilities:	Beginning of Year	End of Year
EMPLOYEE TAXES WITHHELD-NOT PAID IN	0.	1,994.
Total	0.	1,994.

Office of the Kansa's Secretary of State

Name Change Amendment

Electronic File Stamp Information

Filed

- Date 07/18/2012
- •Time 11.25
- Old Business Entity Name: HESSTON CORPORATION WORKERS
 ASSOCIATION/UNITED STEELWORKERS CCAL 1122
- 2 Business Entity 1.D. Number: 0232553

The name of the business entity has been amuted

New Business Entity Name: United Steelworkers Local Up for N228

The amendment was duly adopted a accordance with the provisions of 1.53.1.17-6602

"I declare under penalty of perjury pursuant to the laws of the state of Kansas that the foregoing is true and correct."

Executed on the Wof July, 2012

William E Farner Authorical Officer



I, Kris W Kobach, Secretary of State of Kansas, do hereby certify that this is the true and correct copy of the original document filed electronically on 18 of July, 2012.

Kris W Kobach

To validate the authenticity of this electronically certified document please visit, https://www.kansas.gov/sos-namechange/validation.do Enter the following authentication code 7033

VANSAS SECRETARY OF STATE
VANSAS SECRETARY O