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# Form 990

## **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)

2042

OMB No 1545-0047

2012

2012

Department of the Treasury	
Intomal Davenue Service	

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

Open to Public Inspection

	41	2042		, 2012, and er	- dl	, 20
	or the	2012 calend	ar year, or tax year beginning	laing	T	
<b>B</b> 0	heck if a	pplicable	C Name of organization UNITED STEEL	WORKERS	<del></del>	D Employer identification no.
∐ ^	ddress c	hange	Doing Business As LOCAL 1148		· · · · · · · · · · · · · · · · · · ·	75-1432890
□ <sup>1</sup>	lame cha	ange	Number and street (or P O box if mail is not de	elivered to street address)	Room/suite	E Telephone number
_ ı	nitial retui	ım	511 WEST LANARK ST			1
П	erminate	ed	City, town or post office, state, and ZIP code			160,836
$\bar{\sqcap}$ ,	mended	return	QUEEN CITY, TX 75572			G Gross receipts \$
二		n pending	-	ARRY WOOD		
. u	фисано	periag	Same as C above		H(a) Is this a group affiliates?	return for Yes X No
				, D 007/24/2- D 507	<b>⊣</b>	
		npt status	501(c)(3) 🔀 501(c) ( 5 ) 🔌 (insert no	) 4947(a)(1) or 527		a list (see instructions)
		<u> </u>			H(c) Group exemption	
			<u> </u>	ther L Year of formation 1	974 M State of le	egal domicile TX
Pa		Summar				
	1	Briefly descr	be the organization's mission or most s	ignificant activities HAVING INPUT FOR	R THE BETTERM	ENT OF WORKING
ø		CONDITIO	IS, IMPROVEMENT IN QUALIT	Y OF PRODUCTS AND INCREASE IN	PRODUCTION	
Activities & Governance					<u> </u>	
Ĕ						
ð	2	Check this b	x 🕨 🗌 if the organization discontinue	d its operations or disposed of more than 25% of	of its net assets	
ڻ ص	3	Number of v	iting members of the governing body (P	Part VI, line 1a)		3 382
Š	4	Number of in	dependent voting members of the gove	rning body (Part VI, line 1b)		4 0
iŧie	5		of individuals employed in calendar ye		} <del></del> -	5 54
Ę	6		of volunteers (estimate if necessary)		6	3
ď			•	umn (C), line 12	· · · · · · · · · · · · · · · · · · ·	a 4,977
				90-T, line 34		'b 0
) )	5	ivet dillelate	business taxable income norm of	90-1, line 34		<del></del>
Þ	١.	Contribution	and greate (Dort VIII June 1h)	-	Prior Year	Current Year
Revenue	8		• •		164,0	55 155,859
	9	-	, , , , , , , , , , , , , , , , , , , ,			
₹ ر	10		• • • • • • • • • • • • • • • • • • • •	and 7d)	<del></del>	4,977
_	11	Other revenu	e (Part VIII, column (A), lines 5, 6d, 8c,	, 9c, 10c, and 11e)	(9	05) 0
۵ م	12	Total revenu	- add lines-8-through 11 (must equal F	Part VIII, column (A), line 12)	163,1	50 160,836
ŏ	13	Grants and s	ımılar amounts pad (Rajtūx) çolum (A	۸), lines 1-3)     ـ		0
<b>≃</b>	14		to or for members (Part IX, column (A)			0
<b>30</b>	15	Salaries, oth	er compensation, employee benefits (Pa	artix column (A), lines 5-10)	87,8	78 122,486
<u>~</u> ÿ	16a	Professional	fundraising lees (Part IX) column (A), li	ne91e)		0
Expense:			sing expenses (Part IX, column (D), line	1(0)		
Ä	17		es (Part IX, con) ma (A) Tinks 11p-11d,	J =   · ·	56,7	70 55,892
	1			X, column (A), line 25)	144,6	<del></del>
	19			12	18,5	
<u> </u>		TO VOTIGO 103	expenses. Odbadetine to nontine	· · ·	Beginning of Current Yea	
Fund Blances Net Assets or	20	Total accets	(Part X, line 16)		149,5	
1 Bla	21		` _ · · · · · · · · · · · · · · · · · ·		11,4	
Fundat /	22		• •	<del> -</del>	138,1	<del></del>
	rt II		fund balances. Subtract line 21 from I	ine 20	136,1	58 131,538
			re Block	ompanying schedules and statements, and to the best of my	knowledge and helief it is	
				all information of which preparer has any knowledge	Knowicage and benef, it is	
				V . 0		3-26-13
Sig	n		SY KREBBS Bonne	1 Mills		Date
_			e of officer			odic .
Her	e		Y KREBBS, PRESIDENT			
		Type or	ornt name and title	· · · · · · · · · · · · · · · · · · ·		<del></del>
		Print/Type pri	parer's name Preparer's sign		Check 🗓 ıf	PTIN
Pai			TE WICKS Char	lotte Wicks 03-25-2013	self-employed	P00150072
Pre	parer	Firm's name	CHARLOTTE WICKS		Firm's EIN	
Use	Only	y Firm's addres	104 N WILLIAM ST	FREET	Phone no	
			Atlanta TX 75551	L		
May	the IRS	S discuss this	return with the preparer shown above?	(see instructions)	<u> </u>	🛚 Yes 🗌 No
For	Paperv	vork Reducti	on Act Notice, see the separate instr	uctions.		Form <b>990</b> (2012)

orm	990 (2012) UNITED STEEL WORKERS		75-1432890	Page 2
	Statement of Program Service Accom	plishments		
	Check if Schedule O contains a response to any qu	uestion in this Part III		<u> 🗆 </u>
1	Briefly describe the organization's mission			
	HAVING INPUT FOR THE BETTERMENT OF WOR	KING CONDITIONS, IMPR	ROVEMENT IN QUALITY OF PRODUCTS	AND
	INCREASE IN PRODUCTION	· · · · · · · · · · · · · · · · · · ·		
2	Did the organization undertake any significant program service			,
	prior Form 990 or 990-EZ?			J No
_	If "Yes," describe these new services on Schedule O.			
3	Did the organization cease conducting, or make significant c			l N
	services?			JNO
,	If "Yes," describe these changes on Schedule O.  Describe the organization's program service accomplishmen	its for each of its three largest are	ogram convince, as measured by	
4	expenses Section 501(c)(3) and 501(c)(4) organizations are			
	the total expenses, and revenue, if any, for each program se		grants and anocatons to others,	
	the total expenses, and revenue, if any, for each program se	TVICE reported.		
4a	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$	· · · · · · · · · · · · · · · · · · ·
	HAVING INPUT FOR THE BETTERMENT OF WOR			rs '
	AND INCREASE IN PRODUCTION		•	
4b	(Code) (Expenses \$	ıncluding grants of \$	) (Revenue \$	)
			<u> </u>	
	·	<del></del>		
		<del></del>		
	·			
	· · · · · · · · · · · · · · · · · · ·			
4c	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$	)
			· · · · · · · · · · · · · · · · · · ·	<del></del>
			···	
4d	Other program services (Describe in Schedule O)			
	(Expenses \$ including grants of	\$ (R	evenue \$ )	
4e	Total program service expenses ▶			

Form 990 (2012)
UNITED STEEL WORKE
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	143	X
_				X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	ا		X
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4		4		•
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II	-		<del> </del>
5				
	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	-		
Ü	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
•	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,"			<del></del>
•	complete Schedule D. Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
-	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			1
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more			-
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	l		,,,
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			1,,
42	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		<u> </u>	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a b	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	
b	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	175		<u> </u>
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			† <del></del>
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			<del>                                     </del>
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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

38

Form 990 (2012) UNITED STEEL WORKERS

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V		• • •	<u>. 🗀 </u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	I		
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	ŧ		
	reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	ŧ		
	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	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	•		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	]		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	- 1		
	account)?	4a		<u>X</u>
b	If "Yes," enter the name of the foreign country:	Ī		
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	Ī		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		_X_
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	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	_		
L	and services provided to the payor?	7a		_X_
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<del></del>
¢	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7.		v
ч	If "Yes," indicate the number of Forms 8282 filed during the year	7c		<u>X</u>
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	70	1	Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7b		$\frac{X}{X}$
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	***		- 11
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	1		
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	1	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter:	I		
а	Gross income from members or shareholders	Ī		
b	Gross income from other sources (Do not net amounts due or paid to other sources	I		
	against amounts due or received from them )	Ī		
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	[	
b	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.			
а	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.	I	1	
b	Enter the amount of reserves the organization is required to maintain by the states in which	ŧ		
	the organization is licensed to issue qualified health plans	I		
С	Enter the amount of reserves on hand			
I4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		_X_
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Page 6

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year 382 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. Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Х 2 any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? R Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at Х the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Х 10a Did the organization have local chapters, branches, or affiliates? If "Yes." did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a X Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12¢ Did the organization have a written whistleblower policy? 13 13 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Another's website ☐ Upon request ☐ Other (explain in Schedule O) Own website Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial 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 organization: ► RANDY PATE (903)796-6402 511 WEST LANARK ST QUEEN CITY, TX 75572

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-01111	330	1201	2)

UNITED STEEL WORKERS

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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.

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

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

(A)	(B)			(0	2)			(D)	(E)	(F)
Name and Title	Average hours per	(do ne	ot che	Pos		an one		Reportable compensation	Reportable compensation from	Estimated amount of
	week (list any hours for	1			rson is both an the			from the	related organizations	other compensation
	related	1		•		trustee)		organization	(W-2/1099-MISC)	from the
	organizations below dotted line)	ltd nrı dur ıse vtc ıet	l t n r s u t s t t e u e	O f f c e	Key emplo	H c e i o m g m p l e e o s n y t s e a e t	Former	(W-2/1099-MISC)		organization and related organizations
			o n a I		e e	e d				
(1) ALLAN SIMPSON										
TRUSTEE	1.00	X						8,111		
(2) DARRELL HANCOCK										
TRUSTEE	1.00	Х		<u>.</u>				5,008		
(3) ROLAND HAMILTON										
TRUSTEE	1.00	X				ļ		2,891		
(4) BARNEY KREBS						1				
C PRESIDENT	3.00			X				13,248		
(5) BARRY WOOD										
CVP EXT	1.00			X				6,584		
(6) COYE BARBER										
NVP PAPER	1.00			X				7,405		
(7) DEROUS BYERS										
CVP WHSE	1.00			X				2,979		
(8) JACQUELINE BOYCE						Ī				
VPLAB	1.00		<u> </u>	X		ļ		6,125		
(9) JEFF PURTLE										
CVP POWER	1.00			X				8,834		
(10)LARRY COATS			ļ							
VPWDYD				X				2,187		_
(11)MARVIN PICKARD										
CVP WDYD_	1.00			X				3,622		
(12)PAT HAMILTON										
CVP PULP	1.00			X				7,686		
(13)RANDY PATE										
CFIN SEC	3.00	<u></u>		X				8,059		
(14)STABNLEY MCGHEE										
VPWHSE				X				3,310		

Part	Section A. Officers, Directors, Trustees,	Key Employ	ees, a	nd l	High	est	Comp	ens	ated Employees (	continued)			
	(A)	(B)			(0	<b>C)</b>			(D)	(E)		(F)	
	Name and title	Average Position							Reportable	Reportable	Es	stimated	
		hours per (do not check more than one co week (list any box, unless person is both an							compensation	compensation from related	ar	nount of	
		hours for					ustee)		from the	organizations	com	other pensation	วก
		related	Itd	Ιt	0	к	Нсе	F	organization	(W-2/1099-MISC)	l	rom the	
		organizations		n r s u	f	e y	ı om gmp	o r	(W-2/1099-MISC)			anizatio	
		below dotted line)	ıse	t s	i c	é	h p i e e o	m			l .	id related anization	
				t e	e	m p	s n y	ř					
			u r	į		ı	ae						
			ir	0		y e	e d						
				ä		e	"						
/15\TE	RRY BARTH			<del> </del>	┢	-	<del> </del>	├─			<b></b>		
	P/EQ	1.00			X			ĺ	E 222				
	ELMA HOWARD	+		-				┢	5,233				
	ES SEC	1.00			Х				8,980				
-	B5 5BC	1.00	ļ		<u> </u>		<del> </del> -	├	8,980			_	
(17)													
(18)													
(10)							-	_			<b></b>		
(19)													
(20)													
(04)	<del></del>		<u> </u>		-	-		-			-		-
(21)													
(22)													
(23)			<del> </del>		-							<u>.</u>	
(24)						$\vdash$	-	-					
(24)													
(25)													
1b	Sub-total		<del></del>					<u> </u>			-		
С	Total from continuation sheets to Part VII, Secti	on A .						•					
d	Total (add lines 1b and 1c)							•	100,262	0			0
2	Total number of individuals (including but not limited									•		_	
	reportable compensation from the organization			·						0			
-	<u> </u>											Yes	No
3	Did the organization list any former officer, director	, or trustee, l	cey em	ploy	ee,	or h	ighest	com	pensated				
	employee on line 1a? If "Yes," complete Schedule .	J for such ind	lividual								3		Х
4	For any individual listed on line 1a, is the sum of rej	portable com	pensat	uon a	and	othe	er com	pens	ation from the				
	organization and related organizations greater than	\$150,000? !!	f "Yes,	" cor	mple	te S	Schedu	ıle J	for such				
	individual										4		X
5	Did any person listed on line 1a receive or accrue of	compensation	from a	any	unre	late	d orga	niza	tion or individual				
	for services rendered to the organization? If "Yes,"	complete Sc	hedule	J fo	rsu	ch p	erson				5	ŀ	Х
Secti	on B. Independent Contractors												
1	Complete this table for your five highest compensation	· ·											
	compensation from the organization. Report compeyear	ensation for th	ne cale	nda	r yea	ar er	nding v	vith o	or within the organi	zation's tax			
	(A) (B) (C)												
	Name and business address Description of services Compensation								n				
									<del>- </del>			-	
				_								_	
				_									
	Total number of independent contractors (including	but not limits	ad to th		licto	-d -'		who					
~	received more than \$100,000 of compensation from			 ▶	note	u di	JUVE) \	·*· IU					
EEA				_							Form	990 (2	012)

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Part VIII 'Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (D) (B) Unrelated business revenue Related or exempt Revenue excluded from tax Total revenue function revenue under sections 512, 513, or 514 Federated campaigns . . . . . . . 1a Contributions, Giffs, Grants and Other Similar Amounts Membership dues . . . . . . . . . . . . 1b 155,859 1c Fundraising events . . . . . . . . . 1d Related organizations . . . . . . . . 1e Government grants (contributions) . . All other contributions, gifts, grants, and similar amounts not included above 1f Noncash contributions included in lines 1a-1f \$ 155,859 h Total. Add lines 1a-1f . . . . . . . . . . . . . . . . **Business Code** Program Service Revenue f All other program service revenue . . . . . . . Investment income (including dividends, interest, 3 and other similar amounts) . . . . . . . . . . . . . . . . . ▶ 4,977 4,977 Income from investment of tax-exempt bond proceeds 6a Gross rents . . . . . . . **b** Less: rental expenses . . . . c Rental income or (loss) . . . (i) Secunties 7a Gross amount from sales of assets other than inventory **b** Less cost or other basis and sales expenses . . . . c Gain or (loss) . . . . . . . Other Revenue 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 . . . . . . . . . . . . a **b** Less: direct expenses . . . . . . . . . b c Net income or (loss) from fundraising events . . . . . . . ▶ 9a Gross income from gaming activities See Part IV, line 19 . . . . . . . . . . . . a b Less: direct expenses . . . . . . . . b c Net income or (loss) from gaming activities . . . . . . . . ▶ 10a Gross sales of inventory, less returns and allowances . . . . . . . . . . a **b** Less cost of goods sold . . . . . . . . . b c Net income or (loss) from sales of inventory . . . . . . . . . . Miscellaneous Revenue **Business Code** 11a b e Total. Add lines 11a-11d 160,836 4,977

#### 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). (B) Do not include amounts reported on lines 6b, 7b, Fundraising Total expenses Program service expenses Management and general expenses expenses 8b. 9b. and 10b of Part VIII. Grants and other assistance to governments and organizations in the United States. See Part IV, line 21. Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments. organizations, and individuals outside the United States, See Part IV, lines 15 and 16 . . . . . . Benefits paid to or for members . . . . . . . . . . . . . . . . 5 Compensation of current officers, directors, 100,262 100,262 Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . . . 13,944 7 13,944 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 8,280 8,280 10 11 Fees for services (non-employees) а b d Professional fundraising services See Part IV, line 17 . e f Investment management fees . . . . . . . . . . . . . . . . . Other. (If line 11g amount exceeds 10% of line 25, column 14,875 (A) amount, list line 11g expenses on Schedule O) . . 14,875 12 1,650 1,650 13 14 15 16 16,803 16,803 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 1,095 1,095 19 Conferences, conventions, and meetings . . . . . . 20 21 22 Depreciation, depletion, and amortization . . . . . . 9,731 9,731 23 3,004 3,004 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 O) 1,223 1,223 REPAIRS MAINT SUPPLIES 3,466 3,466 b 2,546 UTIL 2,546 C TEL 1,499 1,499 d е All other expenses Total functional expenses. Add lines 1 through 24e 178,378 0 178,378 0 25 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)

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (B) (A) Beginning of year End of year 1 31,737 1 15,897 2 2 3 3 4 4 Loans and other receivables from current and former officers, directors trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4985(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L............. 7 7 Notes and loans receivable, net 8 9 9 Prepaid expenses and deferred charges . . . . . . . . . 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . . 10a Less accumulated depreciation . . . . . . . . . . . . . . . . 10b 10c b 117,831 11 119,232 11 12 12 13 13 14 14 15 15 149,568 135,129 16 16 11,410 17 3,591 17 18 18 19 19 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors. iabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 . . . . . . . . . . . . . . . . 23 23 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 26 Total liabilities. Add lines 17 through 25 . . . . . . . . . . . . . 11,410 26 3,591 Organizations that follow SFAS 117 (ASC 958), check here 

and complete lines 27 through 29, and lines 33 and 34. Net Assets of Fund Balances 27 27 28 28 29 Organizations that do not follow SFAS 117 (ASC 958), check here  $\blacktriangleright$  🗓 and complete lines 30 through 34. 30 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 131,538 32 Retained earnings, endowment, accumulated income, or other funds . . . . . . . 138,158 33 138,158 33 131,538 34 149,568 34 135,129

orm	990 (2012) UNITED STEEL WORKERS	75-143289	0	Pa	ige <b>12</b>
Par	Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u></u>		<u></u>	<u>. 🗆</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1	:	160,8	36
2	Total expenses (must equal Part IX, column (A), line 25)	. 2		178,3	78
3	Revenue less expenses. Subtract line 2 from line 1	. 3		(17,5	42)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4	:	138,1	.58
5	Net unrealized gains (losses) on investments	. 5		<u></u>	
6	Donated services and use of facilities	. 6			
7	Investment expenses	. 7			
8	Prior period adjustments	. 8			
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	. 10	:	120,6	516
Par	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. 🗆
				Yes	No
1	Accounting method used to prepare the Form 990 🛛 Cash 🔲 Accrual 🔲 Other			1	11,111
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			1	
	Schedule O.			•	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on separate basis, consolidated basis, or both:			1	
	Separate basis Consolidated basis Both consolidated and separate basis			ł	
b	Were the organization's financial statements audited by an independent accountant?		2b	1	Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			ļ	
	separate basis, consolidated basis, or both			I	
	Separate basis Consolidated basis Both consolidated and separate basis			1	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			1	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	1	Ī
	If the organization changed either its oversight process or selection process during the tax year, explain in			1	
	Schedule O.			1	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			Ť	1
	the Single Audit Act and OMB Circular A-133?		3a		X
h	If "Yes " did the organization undergo the required audit or audits? If the organization did not undergo the		<u> </u>	+	<del></del>

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

EEA

#### 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

Open to Public Inspection

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.

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) organizations.	Complete Part III				
Nam	e of organization				Employer i	dentification number
UN	ITED STEEL WORKERS				75-1432	1890
Pa	rt I-A Complete if the organ	ization is exempt under secti	on 501(c) or is	s a section	527 orga	nization.
1	Provide a description of the organization's					
2	Political expenditures		. <b></b> .		<b>&gt;</b> \$	
3	Volunteer hours					
F.	wait file Commission if the commission	instinuis avanus under sesti	on 504(a)(2)			
1 1	rt 1-B Complete if the organ  Enter the amount of any excise tax incurre	ization is exempt under section 496				
2	Enter the amount of any excise tax incurre					
3	If the organization incurred a section 4955					
4a	Was a correction made?					
b	If "Yes." describe in Part IV					<del>-</del>
Pa	rt I-C Complete if the organ	ization is exempt under secti	on 501(c), exc	ept section	n 501(c)(3	3).
1	Enter the amount directly expended by the					
	activities				. ▶ \$	
2	Enter the amount of the filing organization	's funds contributed to other organizatio	ns for section			
	527 exempt function activities				. 🕨 \$	
3	Total exempt function expenditures Add I					
	line 17b				. 🕨 💲	
4	Did the filing organization file Form 1120-	POL for this year?				. 🗌 Yes 📗 No
5	Enter the names, addresses and employe	er identification number (EIN) of all section	on 527 political orga	anızatıons to w	hich the filing	g
	organization made payments. For each or	<del>-</del>				
	the amount of political contributions received					
	as a separate segregated fund or a politic	al action committee (PAC). If additional	space is needed, p	provide informa	tion in Part I	V
	(a) Name	(b) Address	(c) EIN	(d) Amount filing orgar funds If none	ization's	(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)						

	dule G (Form 990 or 990-EZ) 2012 UNITED STEEL				75-1432	
Pa	rt II-A Complete if the organization	n is exempt u	nder section 50	1(c)(3) and file	d Form 5768 (ele	ction under
	section 501(h)).		<del></del>			
Α	Check 🕨 🗌 if the filing organization belongs to	an affiliated group (	and list in Part IV ead	ch affiliated group me	ember's	
	name, address, EiN, expenses, a		*	-		
<u>B</u>	Check 🕨 🗌 if the filing organization checked b	ox A and "limited co	ntrol" provisions app	ly		
	Limits on Lob	bying Expenditure	s		(a) Filing	(b) Affiliated
	(The term "expenditures" r	neans amounts pa	id or incurred.)		organization's totals	group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots l	obbying)			<u> </u>
b	Total lobbying expenditures to influence a legisla	itive body (direct lob	bying)			
С	Total lobbying expenditures (add lines 1a and 1b	)				
d	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (add lines 1	and 1d)				
f	Lobbying nontaxable amount Enter the amount	from the following ta	ble in both			
	columns.					
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is :		
	Not over \$500,000	20% of the am	nount on line 1e.		1	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000.	1	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess of	over \$1,000,000	1	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess ov	ver \$1,500,000		
	Over \$17,000,000	\$1,000,000.				
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
h	h Subtract line 1g from line 1a If zero or less, enter -0					
i	i Subtract line 1f from line 1c. If zero or less, enter -0					
j	If there is an amount other than zero on either lin	ne 1h or line 1ı, did th	ne organization file Fo	orm 4720		
	reporting section 4911 tax for this year?	· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>	<u> </u>	Yes No
	(Some organizations that	made a section 50	eriod Under Section 1(h) election do not tions for lines 2a the	have to complete a		
	Lobb	ying Expenditures	During 4-Year Aver	aging Period		
	Calendar year (or fiscal year	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) Total
	beginning in)	•	, ,	1 ''	''	` '
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Sched	uleiC (Form 990 or 990-EZ) 2012 UNITED STEEL WORKERS		1432		P	age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed l	Form	5768		
		(	a)		(b)	
	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed cription of the lobbying activity.	Yes	No	A	mount	<u> </u>
1	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					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?			ļ.,		
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 1:	•				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	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?	->/5>		4		
Pa	Complete if the organization is exempt under section 501(c)(4), section 501(c)	5)(5),	or se	ection		
	501(c)(6).				Vaa	No
	We will be the through a control of the formation of the control o				Yes	No X
1	Were substantially all (90% or more) dues received nondeductible by members?			1		<u> </u>
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			3	-	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?				<u> </u>	<u> </u>
1 0	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," (					3 ie
	answered "Yes."	) / (D	, . u.	·	,	0, 13
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of					
	political expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Pa	rt IV Supplemental Information					
Con	plete 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 (affiliated	group				
lıst),	Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.					

### SCHEDULE D (Form,990) '

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name	of the organization		Employer identification number
UN:	TED STEEL WORKERS		75-1432890
Pa	† 1 Organizations Maintaining Donor Advi	sed Funds or Other Similar Funds or Ac	counts. Complete if the
	organization answered "Yes" to Form 990	, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor adviso	rs in writing that the assets held in donor advised	
	funds are the organization's property, subject to the org	anization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and do	nor advisors in writing that grant funds can be use	ed
	only for charitable purposes and not for the benefit of th	e donor or donor advisor, or for any other purpose	
	conferring impermissible private benefit?	<u> </u>	
Pa	† 11 Conservation Easements. Complete if	the organization answered "Yes" to Form 9	990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the orga	nization (check all that apply)	
	Preservation of land for public use (e.g , recreation	or education) Preservation of an histo	rically important land area
	Protection of natural habitat	Preservation of a certific	ed historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a	qualified conservation contribution in the form of a	conservation
	easement on the last day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified histor	ic structure included in (a)	2c
d	Number of conservation easements included in (c) acqu	ured after 8/17/06, and not on a	
	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred	ed, released, extinguished, or terminated by the or	ganization during the
	tax year		
4	Number of states where property subject to conservation		
5	Does the organization have a written policy regarding the		
	violations, and enforcement of the conservation easeme		
6	Staff and volunteer hours devoted to monitoring, inspec	ting, and enforcing conservation easements durin	g the year
_	<u> </u>		
7	Amount of expenses incurred in monitoring, inspecting,	and enforcing conservation easements during the	e year
_	<b>\$</b>		
8	Does each conservation easement reported on line 2(d	• •	· · · ·
9	In Part XIII, describe how the organization reports cons	•	•
	balance sheet, and include, if applicable, the text of the	toomote to the organization's financial statements	s mat describes the
Da	organization's accounting for conservation easements rt III Organizations Maintaining Collect	tions of Art, Historical Treasures, o	r Other Similar Assets
	Complete if the organization answered	•	Other Official Assets.
1a	If the organization elected, as permitted under SFAS 11		nt and halance sheet
	works of art, historical treasures, or other similar assets	•	
	public service, provide, in Part XIII, the text of the footne		
b	If the organization elected, as permitted under SFAS 11		
-	works of art, historical treasures, or other similar assets	•	
	public service, provide the following amounts relating to	·	
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historic		
-	following amounts required to be reported under SFAS	-	, p. 21100 010
а		· · · · · · · · · · · · · · · · · · ·	<b>▶</b> \$
b			
<del></del>	Assets included in Form 990, Part X	6 F 000	

`	•								
Sched	le () (Form 990) 2012 UNITED STEEL WO					75-143			age 2
Pa	t [[[ Organizations Maintaining C	ollections of A	Art, Histor	cal Treasures,	or Oth	er Similar As	sets (co	ntinue	ed)
3	Using the organization's acquisition, accession, a	and other records, c	heck any of t	ne following that are	a signific	ant use of its			
	collection items (check all that apply)	_							
а	Public exhibition		n or exchang	e programs					
b	Scholarly research	e 🗌 Oth	er						
C	Preservation for future generations								
4	Provide a description of the organization's collect	tions and explain ho	w they furthe	r the organization's e	exempt p	urpose in Part			
	XIII.								
5	During the year, did the organization solicit or red	ceive donations of a	rt, historical tr	easures, or other sin	nılar				
	assets to be sold to raise funds rather than to be					<u></u>	🗌 Y		☐ No
Pa	t IV Escrow and Custodial Arran	<b>gements</b> . Com	iplete if the	e organization ar	nswere	d "Yes" to For	m 990, F	art I\	<b>/</b> ,
	line 9, or reported an amount of	on Form 990, Pa	art X, line 2	21.					
1a	Is the organization an agent, trustee, custodian of	or other intermediary	for contributi	ons or other assets r	not				
	included on Form 990, Part X?						🗆 Y	'es [	☐ No
b	If "Yes," explain the arrangement in Part XIII and	complete the follow	ing table.						
						An	nount		
С	Beginning balance				<u>1c</u>				
d	Additions during the year				<u>1d</u>				
е	Distributions during the year				1e				
f	Ending balance				1f	1			
2a	Did the organization include an amount on Form	990, Part X, line 21	?				🗆 Y	'es [	] No
	If "Yes," explain the arrangement in Part XIII. Ch							<u> [</u>	<u> </u>
Pa	t V Endowment Funds. Complete	if the organizat	ion answe	red "Yes" to For	m 990,	Part IV, line 1	0.		
	-	(a) Current year	(b) Pnor y	ear (c) Two years	s back	(d) Three years back	(e) Four	r years ba	ack
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and								
	losses								
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses		ļ						
g	End of year balance		L						
2	Provide the estimated percentage of the current	•	ne 1g, columi	n (a)) held as					
a	Board designated or quasi-endowment	%							
b	Permanent endowment > %								
С	Temporarily restricted endowment	<u></u> %							
	The percentages in lines 2a, 2b, and 2c should e	•	. 414 11-		41				
3a	Are there endowment funds not in the possessio	n of the organization	n that are nei	i and administered to	or the			[7/]	
	organization by:						0-(1)	Yes	No
	(i) unrelated organizations						. 3a(i)	$\vdash$	
L	• •						. 3a(ii)	<del> </del>	
b	If "Yes" to 3a(ii), are the related organizations list	•					. <u>3b</u>	ш	<del></del>
4 D*	Describe in Part XIII the intended uses of the orget VII Land, Buildings, and Equipment VIII Land, Buildings, and Buildi			Y line 10					
ı a	Description of property	(a) Cost or oth		(b) Cost or other basis	(0)	Accumulated	(d) Daa	k value	
	DESCRIBION OF DIODERY	1 141 COSCOLORO	L. 00313	D:	. (1.)	riccumulateu	101 000	n value	

Par	t VI Land, Buildings, and Equipment	. See Form 990, Pa	art X, line 10.		
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land				
b	Buildings				
С	Leasehold improvements				
d	Equipment				
е	Other STMD1E				
Total	. Add lines 1a through 1e. (Column (d) must equal Forr	n 990, Part X, column (E	3), line 10(c) )		

(A)   (B)   (C)	Part VII	Investments - Other Securities.	See Form 990, Part X, Iır	ne 12.	
3) Close			(b) Book value	1 1	
(A)	(1) Financial (	derivatives			
(B)   (C)	(2) Closely-he	eld equity interests			· · · · · · · · · · · · · · · · · · ·
(G) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	(3) Other				
(C)	(A)				
(G) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F	(B)				
(G) (F) (G) (G) (P) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D	(C)				<u> </u>
(G) (G) (P) (D) (D) (D) (E) (D) (D) (E) (E) (D) (E) (E) (E) (E) (E) (E) (E) (E) (E) (E					
(G)					
(H) (G) (Golvens (b) must equal From 950, Part X, cot (B) line 12)   Part VIII   Investments - Program Related. See Form 990, Part X, line 13.  (a) Description of investment lype   (b) Book value   (c) Method of valuation   Cost or end-of-year market value   (c) (e)   (d)   (d)   (e)   (f)   (f)   (f)   (g)   (					
(c) Investments - Program Related. See Form 990, Part X, line 13.  (a) Description of investment type (b) Book value (c) Cost or end-of-year market value  (c) Cost or end-of-year market value  (d) Cost or end-of-year market value  (e) Cost or end-of-year market value  (f) Cost or end-of-year market value  (g) Cost or end-of-year marke					
Part VIII			-		
Investments - Program Related. See Form 990, Part X, line 13.					<del></del>
Cost or end-of-year market value	Part VIII	Investments - Program Related.		ne 13.	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total (Column (0) must equal Form 990, Part X, col (8) line 13)  Part X		(a) Description of investment type	(b) Book value		
(2) (4) (5) (6) (7) (8) (9) (10) (10) (10) (10) (10) (10) (10) (10	(1)				
(4)   (5)   (6)   (7)   (8)   (9)   (10)   (10)   (10)   (10)   (10)   (11)   (11)   (12)   (2)   (3)   (4)   (5)   (6)   (7)   (8)   (9)   (10)   (11)   (12)   (12)   (13)   (14)   (15)   (17)   (18)   (19)   (19)   (10)   (10)   (11)   (11)   (11)   (12)   (12)   (13)   (14)   (15)   (16)   (17)   (18)   (19)   (19)   (10)   (10)   (11)   (11)   (11)   (11)   (12)   (12)   (13)   (14)   (15)   (15)   (16)   (17)   (18)   (18)   (19)   (19)   (19)   (10)   (10)   (11)   (11)   (11)   (12)   (12)   (13)   (14)   (15)   (15)   (16)   (17)   (18)   (18)   (19)   (19)   (19)   (19)   (10)   (10)   (10)   (10)   (11)   (11)   (12)   (12)   (13)   (14)   (15)   (15)   (16)   (17)   (18)   (18)   (19)   (					
(6)   (7)   (8)   (9)   (10)	(3)				
(6)	(4)				
(7)   (8)   (9)   (10)   (1	_(5)				
(8) (9) (10) Fotal (Column (b) must equal Form 990, Part X, col (B) line 13)  Part XX  (a) Description  (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)  Part X Other Liabilities. See Form 990, Part X, line 25.  (a) Description of liability (b) Book value  (c) Part X other Liabilities. See Form 990, Part X, line 25.  (a) Description of liability (b) Book value  (c) Book value  (d) Federal income taxes (d) (d) G) (d) G) (d) G) (d) G) Book value  (e) Book value  (f) Federal income taxes (g) (g) (g) (g) (g) (g) (g) (g) (h) (h) (h) (h) (h) (h) (h) (h) (h) (h	(6)				
(10)	(7)				
Total   Column (b) must equal Form 990, Part X, cot (8) line 13)					
Total (Column (b) must equal Form 990, Part X, col (8) line 13)   Part IX   Other Assets. See Form 990, Part X, line 15.					
Company   Comp	(10)				
(a) Description (b) Book value  (1) (2) (3) (4) (4) (5) (6) (7) (7) (8) (9) (10) (10) (10) (10) (10) (10) (10) (10					<del> </del>
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (10) (11) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (10) (11) (10) (11) (11) (11) (11	Part IX	Other Assets. See Form 990, Par	t X, line 15.	*****	<del></del>
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(3) (4) (5) (6) (7) (8) (9) (10) Totat. (Column (b) must equal Form 990, Part X, col (β) line 15.)  Part X Other Liabilities. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (17) (8) (9) (10) (11) Interval (Column (b) must equal Form 990, Part X, col (β) line 25)  2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's					
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Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)   ▶			<u></u>	· · · · · · · · · · · · · · · · · · ·	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)   Part X   Other Liabilities. See Form 990, Part X, line 25.					
1. (a) Description of liability (b) Book value  (1) Federal income taxes  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  (11)  Total (Column (b) must equal Form 990, Part X, col (β) line 25)  2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's		nn (b) must equal Form 990, Part X, coi (B) line	15.)		
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(9) (10) (11) (11) (11) (12) (13) (14) (15) (15) (17) (18) (18) (19) (19) (10) (10) (11) (11) (11) (12) (13) (14) (15) (15) (16) (17) (17) (17) (18) (18) (19) (19) (10) (10) (11) (11) (11) (12) (13) (14) (15) (16) (17) (17) (17) (17) (18) (18) (19) (19) (10) (10) (11) (11) (11) (12) (13) (14) (15) (16) (17) (17) (17) (17) (18) (18) (19) (19) (19) (19) (19) (19) (19) (19					
(10) (11)  Fotal (Column (b) must equal Form 990, Part X, cot (B) line 25)  FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's				<del></del>	
(11)  Total (Column (b) must equal Form 990, Part X, col (B) line 25)  2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's					
Fotal (Column (b) must equal Form 990, Part X, col (B) line 25)  2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's			<del></del>		
2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's		No. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10			
				's financial state mosts that are a defined	
					nyanization s

SCITED	MBD (1 GITI 930) 2012 GATTED BIESD WORKERS		3ye 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments	] ]	
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII )		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII )	]	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
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		
þ	Other (Describe in Part XIII )		
C	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Pa	rt XIII   Supplemental Information		
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and	2b,	
Part	V, line 4; Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any addit	ional	
ınforı	mation.		
		-	

Schedule D (Form 990) 2012

EEA

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

## 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

Employer identification number

UNITED STEEL WORKERS	75-1432890
01. Form 990 governing body review (Part VI, line 11)	
012 - form 990 governing body review	
NO DOCUMENTS AVAILABLE TO THE PUBLIC	
02. Governing documents, etc, available to public (Part	VI, line 19)
018 GOVERNING DOCUMENTS ETC AVAILALE TO PUBLIC	
NO REVIEW WAS CONDUCTED OR WILL BE CONDUCTED	
	···

**Depreciation and Amortization** (Including Information on Listed Property)

ОМВ	No.	1545-0172
	2	142

2012

Department of the Treasury

Attachment

ntema	Revenue Service (99)	See separate in	structions.	<u> </u>	Attach to y	our tax return	l <b>.</b>		Sequence No	1/9
lame(	s) shown on return			Business or	activity to which	this form relates			Identifying number	
	TED STEEL WORKER				M 990	- 1			75-14328	90
Par	tl Election To Exper	•	-							
	Note: If you have any lis								· · · · · ·	
1	Maximum amount (see instruction	•						1		
2	Total cost of section 179 property	•						2		
3	Threshold cost of section 179 pro	•		•	•			3		
4	Reduction in limitation Subtract I							4		
5	Dollar limitation for tax year Sub							_		
	separately, see instructions					1		5		
6	(a) Description o	f property		(b) Cost (bu	siness use only	) (c) Ele	cted cost		[	
				•		-			-	
7	Listed property Enter the amoun	t from Inc. 20			7				•	
8	Listed property. Enter the amoun Total elected cost of section 179		te in column					8		
9	Tentative deduction. Enter the sr							9		
9 10	Carryover of disallowed deduction							10		
10 11	Business income limitation. Enter	•						11		
12	Section 179 expense deduction.		,		•	ine J (see inst	-	12	· · · · · · · · · · · · · · · · · · ·	
13	Carryover of disallowed deduction				_	3	• • •	12	· · · · · · · · · · · · · · · · · · ·	
	: Do not use Part II or Part III belo					<u> </u>			E	
	rt II Special Depreciat				iation (D	o not include li	sted pro	nerty )	(See instructions	`
14	Special depreciation allowance for						otou proj	,	(COC IIICI GOGOIO	,
• •	during the tax year (see instruction							14		
15	Property subject to section 168(f	•						15		•
16	Other depreciation (including AC							16	9.	731
	rt III MACRS Deprecia	<del></del>					· · ·			, , , ,
		(2011)		ection A				<del></del>		
17	MACRS deductions for assets pl	aced in service in tax			2012 .			17		
18	If you are electing to group any a			-		ore general			1111	, ,
			_	-		_				
	<del></del>	ets Placed in Service						Syst	em	••••
	(a) Classification of property		Basis for depousiness/investr	nent use	(d) Recovery penod	(e) Convention	(f) Meti	nod	(g) Depreciation ded	uction
40-	2	service	only-see instru	ctions)	period					
19a	3-year property	<del>-</del>    -								
b	5-year property	-					-			
<u></u>	7-year property	<b>⊣</b> ⊢				<u> </u>				
d	10-year property	-				-	<del> </del>			
e f	15-year property 20-year property	-   -					<del> </del>		1	
	25-year property	-			25 yrs.		S/L		<del> </del>	
g h	Residential rental	<del></del>	<u> </u>	<del>.</del>	25 yrs. 27 5 yrs	MM	S/L		<del>                                     </del>	
11	property	<del>                                     </del>			27 5 yrs	MM	S/L		<del> </del>	
	Nonresidential real				39 yrs.	MM	S/L		1	
ı		1			Jayıs.	MM	S/L			
	property Section C - Asse	ts Placed in Service	During 2041	2 Tay Ves	Lleina tha		L		rstem	
20a	Class life	La Flaceu III Service	During 2012	L I AX TEA	Carry trie	AILEI HALIVE DE	S/L	· · ·	a.c.iii	
	12-year	-   -	<del></del>		12 yrs.	1	S/L		<del> </del>	
	40-year	<del></del>			40 yrs.	MM	S/L		<del>                                     </del>	
	rt IV Summary (See ins	tructions )			1 -0 yis.	IAIIAI		<del>-</del>	<del></del>	<del> </del>
21	Listed property. Enter amount from							21	T	
2 i 22	Total. Add amounts from line 12		 lines 10 and	20 in colin	nn (a) and l	line 21 Enter		<b></b> -		
LŽ	here and on the appropriate lines	<del>-</del>						22	9	731
23	For assets shown above and pla	•	=		_	53 0000113	• • •		<u> </u>	• • • • • • • • • • • • • • • • • • • •
LJ	nortion of the basis attributable to	=	are current y	cai, cillei	2	,				

	Federal Supporting Statements	2012 PG01
Name(s) as shown on return		FEIN
UNITED STEET	L WORKERS	75-1432890

# Form 990, Schedule D, Part VI, Line 1e Statement #D1e Investments - Other

Description of Investment	Cost/basis (Investment)	Cost/basis (Other)	Depr	Book <u>Value</u>
LAND	0	0	0	0
EQUIPMENT	0	0	0	0
BUILDING	0	0	0	0
SM EQUIP	0	0	0	0
Total	0	O	0	0

990	Overflow Statement	<b>2012</b> Page 1
Name(s) as shown on return		FEIN
UNITED STEEL WORKERS		75-1432890

#### OTHR DEDUCTIONS

Description		Amount	
PROPERTY TAX	\$	4,506	
CONTRACT LABOR		1,670	
PER DIEM		5,496	
CONTRIBUTIONS	<del></del>	3,203	
Tota	1: \$	14,875	