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DLN: 93493090002523

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public

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

			lendar year, or tax year beginning	01-01-2012 , 2012, and end	ling 12-31-	-2012			
_		pplicable	C Name of organization UNITED ASSOCIATION OF JOURNEYME					•	entification number
_	dress ch me char	-	OF PLUMBERS & STEAMFITTERS LOCA Doing Business As	L INU 33U			88-00	04792	20
_		-							
_	tial retur		Number and street (or P O box if main 1110 GREG STREET	l is not delivered to street address)	Room/suite	2	E Teleph	one nui	mber
_	rminated			2 4			(775)	359-	2142
_	ended r	return i pending	City or town, state or country, and ZII SPARKS, NV 89431	T #					
App	plication	i penaing		unal officer					s \$ 772,792
			F Name and address of princ KRES BISHOP	ipar officer		H(a) Is th		retur	n for
			1110 GREG STREET SPARKS,NV 89431						
			31 ARRS, NV 03431						uded? \(\text{Yes} \(\text{No} \) : (see instructions)
Ta	x-exem	pt status	「501(c)(3) ▼ 501(c)(5) ◀(in	sert no)	527	11 11	o, attaci	1 a 115 t	. (see mstructions)
w	ebsite	: ► WV	VW UALOCAL350 ORG			H(c) Grou	ıp exempt	tion nu	ımber 🗠
. Eor	m of ora	an nization	Corporation Trust Association	Othor b	I_	L Year of fo	mation 10	006	M State of legal domicile NV
	rt I		imary	other F		L real of to	illiation 13	,00	- State of legal dofficile INV
			lescribe the organization's mission	or most significant activities					
	7	TO PRO	VIDE EMPLOYMENT SERVICES	TO MEMBERS OF PLUMBER	S & PIPE	ITTERS LC	CALUN	ON A	ND TO UNITE
ų	<u> </u>	<u>MEMBE</u>	RS FOR THE PROMOTION & BET	TERMENT OF THE PROFESS	SION				
aovemance	-								
Ě	-								
5	2 (Check t	his box 🔭 if the organization disc	continued its operations or di	sposed of	more than 2	5% of its	net a	ssets
	3 1	Number	of voting members of the governin	a body (Part VI line 1a)				з	23
ß	1		of independent voting members of					4	21
ACIINIIES Q	1		imber of individuals employed in ca		•			5	4
į	I		imber of volunteers (estimate if ne					6	0
	7 a ⊺	Total un	related business revenue from Pai	t VIII, column (C), line 12				7a	581,393
	bΛ	Net unre	elated business taxable income fro	m Form 990-T, line 34 .				7b	0
						Pric	r Year		Current Year
a.	8	Contr	ibutions and grants (Part VIII, line	≘1h)				0	0
Revenue	9	Program service revenue (Part VIII, line 2g)							581,393
96	10	Inves	tment income (Part VIII, column (A), lines 3, 4, and 7d)				355	11,016
_	11		revenue (Part VIII, column (A), lı				-	962	1,973
	12		revenue—add lines 8 through 11 (684,	007	594,382
	13		s and sımılar amounts paıd (Part I					0	0
	14	Benef	its paid to or for members (Part IX	, column (A), line 4)			105,	000	30,000
ø,	15		es, other compensation, employee	benefits (Part IX, column (A), lines		421	242	446.630
<u>38</u>	16a	5-10) ssional fundraising fees (Part IX, c	olumn (A.) lung 11a)			431,242		446,630
Expenses	b								
Δ	17		undraising expenses (Part IX, column (D), · expenses (Part IX, column (A), lir				325,	564	298,251
	18		expenses Add lines 13-17 (must				861,		774,881
	19		nue less expenses Subtract line 1		-		-177,		-180,499
5 %						Beginning	g of Curre	nt	End of Year
net Assets of Fund Balances		_	and the American			Y	'ear	222	
38	20		assets (Part X, line 16)				909,		755,924
FEET FEET	21 22		liabilities (Part X, line 26) ssets or fund balances Subtract li				904,	753 567	9,153 746,771
	11 III		nature Block	nc 21 nom mie 20	• •		504,	507	740,771
			perjury, I declare that I have exar	nined this return, including ac	company	ng schedule	es and sta	teme	nts, and to the best of
ny k	nowled	dge and	belief, it is true, correct, and comp nowledge						
		***					013-03-22		
Sign		Sign	ature of officer				ate		
ler	e		S BISHOP BUSINESS MANAGER						
		<u> </u>	e or print name and title	Droporode senstre	Ls	· ·		DTT	
.	_1		Print/Type preparer's name CYNTHIA L BRUNSCPA	Preparer's signature	Dat	I Clie	eck lif -employed	PTIN P013	46534
Paid			Firm's name F CUPIT MILLIGAN OGDEN	& WILLIAMS	I		n's EIN ► 8	8-0189	498
	pare		Firm's address ► 1695 MEADOW WOOD LA	NE STE 100		Dho	ne no (775	5) 827-	5055
Jse	Onl	ıy		NE SIE 100		Prio	ne 110 (775	, oz/-	2023
			RENO, NV 895026511			I			

May the IRS discuss this return with the preparer shown above? (see instructions)

✓ Yes ☐ No

art IV	Checklist o	f Reauired	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		No
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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 debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
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 $\sqrt{2}$	10		No
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		No
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	Yes	
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		No
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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional "Is optional".	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
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		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
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)			
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part</i>			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M \cdot .	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

аı	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
1	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 3		103	
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	4		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1 c	Yes	
а	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
	by this return	1		
,	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
1	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
•	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	-		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
•	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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		No
)	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
1	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
)	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		No
1	If "Yes," indicate the number of Forms 8282 filed during the year	_		
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
J	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
1	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8		_
	Sponsoring organizations maintaining donor advised funds.	_		
	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
•	against amounts due or received from them)	_		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
)	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
-	Note. See the instructions for additional information the organization must report on Schedule O	13a		
)	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	Ţ	Į	[
ı	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Form 990 (2012) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

1a	Enter the number of voting members of the governing body at the end of the tax							
	year							
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O							
b	Enter the number of voting members included in line 1a, above, who are independent							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No				
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo				
6	Did the organization have members or stockholders?	6		Νo				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		Νo				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	Yes					
b	Each committee with authority to act on behalf of the governing body?	8b	Yes					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo				
Section B. Policies (This Section B requests information about policies not required by the Internal Rev								
Se	ection B. Policies (This Section B requests information about policies not required by the Internal F	Reveni	ıe Cod	e.)				
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	Reveni	ue Cod Yes	e.) No				
	Did the organization have local chapters, branches, or affiliates?	10a						
10a			Yes					
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes					
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes					
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes					
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes					
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes					
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes					
10a b 11a b 12a b	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, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 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," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes	No				
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No				
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No				
10a b 11a b 12a b c	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, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 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," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No				
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No				
10a b 11a b 12a b c 13 14 15	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, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 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," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No				
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No No				

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►KRES BISHOP 1110 GREG STREET SPARKS, NV (775) 359-2142

<u>Part VII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h ar	offic	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	nner hest compensated ployee employee stitutional Trustee lindual trustee		(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations					
(1) KRES BISHOP	40 00	х		х				88,367	0	55,378	
BUS MGR/TRUSTEE/TREAS	10.00										
(2) CHRIS DORIS BUS AGNT/TRUSTEE/EXAM BRD	40 00	х		х				85,634	0	54,559	
(3) JASON STOKES	1 00										
PRES/TRUSTEE		×		Х				1,751	0	C	
(4) RANDY CANALE	1 00										
TRUSTEE		x		х				0	0	C	
(5) JOHN ROELLE	1 00										
		x		х				0	0	C	
TRUSTEE (6) MARSHAL SPROUT	1 00										
	1 00	x		×				0	0	C	
TRUSTEE	1.00	ļ		_		-					
(7) FREDDY SHEEHAN	1 00			x				1,202	0	C	
VICE PRES/CONF BRD								·			
(8) BRIAN MCKEE	1 00			×				0	0	300	
RECORDING SECRETARY											
(9) RON CARROLL	1 00			×				0	0	(
INSIDE GUARD											
(10) NATHAN BOURNE	1 00			Х				0	0		
EXECUTIVE BOARD				^				"	U	C	
(11) DANIEL DUPREE	1 00			ļ ,.						_	
EXECUTIVE BOARD				X				0	0	C	
(12) BILLIE GREGORY	1 00										
EXECUTIVE BOARD				Х				0	0	C	
(13) ERIC WILHELM	1 00										
EXECUTIVE BOARD				Х				1,202	0	C	
(14) TOM COMSTOCK	1 00										
FINANCE COMMITTEE				х				0	0	C	
(15) MARK LEMLER	1 00	-		\vdash		1					
` '				х				0	0	200	
FINANCE COMMITTEE (16) LARRY WALBURN	1 00			\vdash		 					
	1 00			x				0	0	C	
FINANCE COMMITTEE	,										
(17) CHRIS CROSS	1 00			×	1				0	(
						1		0	UI	υ,	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Tıtle	(B) Average hours per week (list any hours	more pers	than on is	one bot	not box h ar or/tr	chec k, unle n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensatio from related organizations	s	(F) Estimated amount of othe compensation from the organization		
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)		and re organiz	lated	
(18)	FRANCISCO FLORES	1 00			х				C		0			_ 0
	INING BOARD										1			_
(19)	TROY CALLAHAN	1 00			×				c	,	0		(0
	INING BOARD	1.00									\dashv			_
` ,	HENRY DAY	1 00			x				c		0		(0
	INING BOARD DONALD DAYES	1 00									+			_
. ,		100			х				C)	0		(0
	INING BOARD CHAD ROUKEY	1 00			\vdash						+			-
FΧΔΜ	INING BOARD				×				C	1	0		(0
	JEFF ANDERSON	1 00									\dashv			-
CONF	ERENCE BOARD				×				C	'	0		(0
														-
											\dashv			-
								-			4			_
														_
											\dashv			-
											\dashv			-
														_
1b	Sub-Total						▶			•	Τ			1
c	Total from continuation sheets to Part	VII, Section A												1
d	Total (add lines 1b and 1c)						▶ _		178,156	()		110,437	,
2	Total number of individuals (including t \$100,000 of reportable compensation				ed al	bove	e) who	rec	eived more than					_
												Yes	No	-
3	Did the organization list any former off					plo	yee, o	r hig	ghest compensate	ed employee				
	on line 1a? If "Yes," complete Schedule 2	for such individ	lual .	•	•	•					3		Νo	
4	For any individual listed on line 1a, is to organization and related organizations individual									om the				
F			no==='			•		-		nduudual fair	4	+	No	
5	Did any person listed on line 1a receive services rendered to the organization?		•						-	ndividual for	5		No	
s	ection B. Independent Contract	ors												-
1	Complete this table for your five highes compensation from the organization Re	st compensated eport compensa								the organizatio		tax year		_
	Name and I	(A) ousiness address							Descript	(B) on of services		(C) Compen		
											1			-
									+		+			-
											\downarrow			-
	Total number of independent contractors	. (+ h		linta	d - L		1	+			_

\$100,000 of compensation from the organization $\blacktriangleright 0$

Part V		Statement of Revenue Check if Schedule O contains a resp	oonse to any question	in this Dart VIII			_
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
क क	1a	Federated campaigns	1a 				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues :	1b				
∰ (С	Fundraising events	1c				
ifts, ar ∠	d	Related organizations	ld				
, G mij	е	Government grants (contributions)	le				
ons Sii	f	All other contributions, gifts, grants, and	 1f				
uti her	•	similar amounts not included above	·				
ξi Ω	g	Noncash contributions included in lines 1a-1f \$					
Son and	h	Total. Add lines 1a-1f					
			Business Code				
Program Serwce Revenue	2a	MEMBERSHIP DUES	900099	581,393		581,393	
eve Fe ve	ь					<u> </u>	
e F	С						
¥.	d						
کٽ ت	е						
าย	f	All other program service revenue					
Š	-	Total. Add lines 2a-2f		581,393			
	g 3	Investment income (including divident		301,393			
		and other similar amounts)		9,900			9,900
	4	Income from investment of tax-exempt bor	· · · · · · · · · · · · · · · · · · ·				
	5	Royalties					
	6a	(1) Real	(II) Personal				
	ь	Less rental					
	c	expenses Rental income					
	_	or (loss)					
	d	Net rental income or (loss) (i) Securities	(II) Other				
	7a	Gross amount from sales of assets other	(II) Other				
	b	Less cost or other basis and sales expenses 171,513					
	С	Gain or (loss) 1,116					
	d	Net gain or (loss)	· · · · · •	1,116	1,116		
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18					
<u>-</u>	L	Land dimentions	a				
o t h	b c	Less direct expenses Net income or (loss) from fundraising	a events				
_	9a	Gross income from gaming activitie					
		See Part IV, line 19					
	_		a				
	b c	Less direct expenses Net income or (loss) from gaming as	b				
		Gross sales of inventory, less	cuvicies				
		returns and allowances .					
	_	a	· ·				
	b	Less cost of goods sold b	-,	4 700	1 700		
	С	Net income or (loss) from sales of ii Miscellaneous Revenue	Business Code	-1,783	-1,783		
	11a	OTHER INCOME	900099	3,756	3,756		
	ь	OTHER INCOME		•	·		
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d		3.754			
	12	Total revenue. See Instructions .		3,756			
			· · · · •	594,382	3,089	581,393	9,900

Form 990 (2012) Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organızatı	ions must comp	olete column (A)	
	Check if Schedule O contains a response to any question in this Pai	t IX		<u></u>	
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members	30,000			
5	Compensation of current officers, directors, trustees, and key employees	288,594			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	86,115			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	28,269			
9	Other employee benefits	20,417			
10	Payroll taxes	23,235			
11	Fees for services (non-employees)				
а	Management				
b	Legal	195			
C	Accounting	1,800			
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	234			
13	Office expenses	26,972			
14	Information technology	1,448			
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	14,644			
20	Interest				
21	Payments to affiliates	243,668			
22	Depreciation, depletion, and amortization				
23	Insurance	2,071			
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)				
а	UNION SOCIALS	3,990			
b	DONATIONS	3,229			
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	774,881			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

	ı	Check if Schedule O contains a response to any question in this Part X	(A) Beginning of year		(B)
	1	Cash—non-interest-bearing	345,851	1	End of year 352,261
	2	Savings and temporary cash investments	33,876		22,809
	3	Pledges and grants receivable, net	33,070	3	22,000
	4	Accounts receivable, net	8,581	4	724
	5	Loans and other receivables from current and former officers, directors, trustees, key	0,301	-	124
Assets	3	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 $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	ь	Less accumulated depreciation		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11	521,012	12	380,130
	13	Investments—program-related See Part IV, line 11		13	_
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	909,320	16	755,924
	17	Accounts payable and accrued expenses	1,795	17	1,270
	18	Grants payable	·	18	<u> </u>
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
_	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
lities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
졅		persons Complete Part II of Schedule L		22	
Liabili	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		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 of Schedule			
		D	2,958	25	7,883
	26	Total liabilities. Add lines 17 through 25	4,753	26	9,153
S do		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	569,797	27	407,917
စ္	28	Temporarily restricted net assets	334,770	28	338,854
Ξ	29	Permanently restricted net assets		29	
Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
9) 9)	30	Capital stock or trust principal, or current funds		30	
Ř	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
ĕ	33	Total net assets or fund balances	904,567	33	746,771
_	34	Total liabilities and net assets/fund balances	909,320	34	755,924

				<u>'</u>	age II
Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				৮
1	Total revenue (must equal Part VIII, column (A), line 12)	1			594,382
2	Total expenses (must equal Part IX, column (A), line 25)	-			777,302
_		2		7	74,881
3	Revenue less expenses Subtract line 2 from line 1	3		1	.80,499
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))			- 1	.00,499
•	The assets of faile balances at beginning of year (must equal 1 are x, fine 35, column (A))	4		9	04,567
5	Net unrealized gains (losses) on investments	_			21 221
6	Donated services and use of facilities	5			21,331
0	Donated Services and use of lacinities	6			
7	Investment expenses				
_	<u> </u>	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)				
	<u> </u>	9			1,372
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		7	46,771
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. $ abla$
				Yes	No
1	Accounting method used to prepare the Form 990				
•	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
2-	Schedule O				N a
Za	Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed.	nd on	2a		No
	a separate basis, consolidated basis, or both	su on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both	ite			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	of the	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the red	quired	3b		
	audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits				

DLN: 93493090002523

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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 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 Name of the organization **Employer identification number** UNITED ASSOCIATION OF JOURNEYMEN & APPRT OF PLUMBERS & STEAMFITTERS LOCAL NO 350 88-0047920 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 Enter the amount of any excise tax incurred by organization managers under section 4955 ┌ Yes 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? ☐ Yes If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (e) A mount of political (b) Address (a) Name (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter - 0 directly delivered to a separate political organization If none, enter -0-(1) UA LOCAL NO 350 POLITICAL 1110 GREG STREET 1,360 **ACTION FUND** SPARKS, NV 89431

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2
Pa	art II-A Complete if the organization	is exempt under	section 501(c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► if the filing organization belongs to a	an affiliated group (and	lict in Part IV os	ach affiliated are	un mambar's nam	o addross EIN
	expenses, and share of excess lobb	ying expenditures)		_	up member s nam	e, address, LTN
<u>B</u>	Check Frifthe filing organization checked box	x A and "limited contro	ıl" provisions apı	oly		
	Limits on Lobbying E (The term "expenditures" means an		l .)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	O ther exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1c	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	0,000		
	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				
	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
_	Subtract line 1g from line 1a If zero or less, ente	•		-		
i	Subtract line 1f from line 1c If zero or less, ente			-		
_	If there is an amount other than zero on either lin		organization file	Form 4720 rep	ortina	1
-	section 4911 tax for this year?					┌ Yes ┌ No
_	4-Voor Av	veraging Period U	Inder Section	F01/b)		
	(Some organizations that made a scolumns below. See the	section 501(h) el	ection do not	have to cor		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		1
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontavable amount					

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has Notice filed Form 5768 (election under section 501(h)).	ОТ			ı u	<u>g</u> c
For a	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a	1)		(b)	
activ		Yes	No	A	mount	t
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)?					
C	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?					
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	O ther activities?					
j	Total Add lines 1c through 1i					
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					
c	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?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 505(c)(6).	01(c))(5), o	r se	ction	1
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		<u> </u>	1		Νo
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		⊢	2	Yes	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		Νo
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 505(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N line 3, is answered "Yes."					
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				
C	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				

Part IV Supplemental Information

Complete 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 list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier Return Reference

Explanation

DLN: 93493090002523

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

SCHEDULE D (Form 990)

> ► 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.

Supplemental Financial Statements

Open to Public Inspection

	me of the organization ITED ASSOCIATION OF JOURNEYMEN & APPRT	·	Employer identification number						
	PLUMBERS & STEAMFITTERS LOCAL NO 350		88-0047920						
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990		inds or Accounts. Complete if the						
	organization answered Tes to Form 550	(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 advisor funds are the organization's property, subject to the or	3	or advised Yes No						
6	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the beneficonferring impermissible private benefit?								
Рa	rt II Conservation Easements. Complete if	the organization answered "Yes" to							
1	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space	anization (check all that apply) or education) Preservation of an							
2	Complete lines 2a through 2d if the organization held a	a qualified conservation contribution in th	he form of a conservation						
_	easement on the last day of the tax year	a qualifica conservation continuation in the							
			Held at the End of the Year						
а	Total number of conservation easements		2a						
b	Total acreage restricted by conservation easements		2b						
c	Number of conservation easements on a certified history	oric structure included in (a)	2c						
d	Number of conservation easements included in (c) acc historic structure listed in the National Register	quired after 8/17/06, and not on a	2d						
3	Number of conservation easements modified, transferr	red, released, extinguished, or terminate	d by the organization during						
	the tax year 🛌								
4	Number of states where property subject to conservat	ion easement is located ►	<u></u>						
5	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	lling of violations, and Yes No						
6	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	nents during the year						
7	A mount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easements	during the year						
8	Does each conservation easement reported on line 2(a and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	tion 170(h)(4)(B)(i)						
9	In Part XIII, describe how the organization reports coibalance sheet, and include, if applicable, the text of the organization's accounting for conservation easeme	e footnote to the organization's financial	expense statement, and						
Par	t III Organizations Maintaining Collection Complete if the organization answered "Y		or Other Similar Assets.						
1a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote to	.16 (ASC 958), not to report in its reven	or research in furtherance of public						
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to thes	ts held for public exhibition, education, o							
	(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, histor following amounts required to be reported under SFAS		r financial gain, provide the						
а	Revenues included in Form 990 Part VIII line 1		b- ¢						

b Assets included in Form 990, Part X

Part	111 Organizations Maintaining Co	<u>llections of Art</u>	<u>:, His</u>	stori	<u>cal Tı</u>	<u>easur</u>	<u>es, or O</u>	<u>ther</u>	Similar As	ssets (c	ontinued)
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other recor	ds, cl	heck	any of	the follo	wing that a	ire a s	significant us	e of its	
а	Public exhibition		d	Γ	Loan	or excha	ange progr	ams			
b	Scholarly research		e	Г	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ıın hov	w the	y furthe	er the or	ganızatıon	's exe	empt purpose	ın	
5	During the year, did the organization solicit o	or receive donations	s of ar	rt, his	torical	treasure	es or othei	rsımı	lar		
	assets to be sold to raise funds rather than t		•							│ Yes	┌ No
Par	Part IV, line 9, or reported an an						answere	d "Ye	es" to Form	990, 	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					itions or	other ass	ets n	ot	┌ Yes	┌ No
Ь	If "Yes," explain the arrangement in Part XII	I and complete the	follo	wing	table		_				
								_	Aı	mount	
с	Beginning balance							1c			
d	Additions during the year						<u> </u>	1d			
е	Distributions during the year						F	1e			
f	Ending balance						L	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?	•						☐ Yes	☐ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatı	on has	been pro	vided in P	art X	III		Γ
Pa	tt V Endowment Funds. Complete										
1_	Degraping of week belongs	(a)Current year	(Ь)Prior	year	b (c)Two	o years back	(d)⊤	hree years back	(e) Four y	ears back
1a 	Beginning of year balance							<u> </u>			
b	Contributions							 		 	
С	Net investment earnings, gains, and losses							<u> </u>			
d	Grants or scholarships										
е	Other expenditures for facilities										
f	and programs										
g g	End of year balance							 		 	
_	Provide the estimated percentage of the curr	cont year and halan	co (lur	20.10	colum	n (a)) ho	old ac	<u> </u>			
2	Board designated or guasi-endowment	ent year end baran	ce (iii	ic ry	, coluii	iii (a)) iie	iu as				
a	•										
b	Permanent endowment ►										
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show										
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	atıon	that	are hel	d and ad	ministered	l for t	he	Yes	No
	(i) unrelated organizations								3a	(i) res	140
	(ii) related organizations									(ii)	
b	If "Yes" to 3a(II), are the related organization								3	ВЬ	
4	Describe in Part XIII the intended uses of th	ie organization's en	dowm	nent f	unds						
Par	t VI Land, Buildings, and Equipme	nt. See Form 99	0, Pa				14-26	1	(-) A		Dan Incombra
	Description of property				a) Cost (asis (inve	estment)	(b) Cost or basis (oth		(c) Accumula depreciatioi		Book value
1a	Land										
b	Buildings		•								
С	Leasehold improvements										
d	Equipment										
	Other										
Tota	l. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part .	X, colι	ımn (B), line	10(c).)					0

Part VII Investments—Other Securities. Se	e Form 990, Part X, line 12)
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
(3)Other		
(A) PUBLICLY TRADED MUTUAL FUNDS	380,130	F
	b 200.420	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	380,130	
Part VIII Investments—Program Related. S		
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Tabal (Caluma (h) much a cual Farm 000, Part V, cal (P) had 12)	F	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X,		
(a) Desc		(b) Book value
(a) Desc	приоп	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)	
Part X Other Liabilities. See Form 990, Part		
(a) December of leability	(b) Book value	
	(B) Book value	
Federal income taxes		
DUE TO ASSOCIATED BUILDING FUND	7,883	
	+	
	+	
	ı	
Total (Column (h) must equal Form 000 Part V L(D) I 25 V		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Fin 48 (ASC 740) Footnote In Part XIII, provide the t	7,883	

Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	623,970
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)		
e	Add lines 2a through 2d	2e	29,588
3	Subtract line 2e from line 1	3	594,382
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII) 4b		
c	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	594,382
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	781,766
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)		
e	Add lines 2a through 2d	2e	6,897
3	Subtract line 2e from line 1	3	774,869
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 4a		
b	Other (Describe in Part XIII)		
С	Add lines 4a and 4b	4c	12
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	774,881

Part XIII Supplemental Information

Complete 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 additional information

Identifier	Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS		COST OF GOODS SOLD - REPORTED ON LINE 10B OF FORM 990 (REDUCTION OF REVENUE) 6,897 SEGREGATED POLITICAL FUND CONTRIBUTIONS 1,360
PART XII, LINE 2D - OTHER ADJUSTMENTS		COST OF GOODS SOLD - REPORTED ON LINE 10B OF FORM 990 (REDUCTION TO REVENUE) 6,897
PART XII, LINE 4B - OTHER ADJUSTMENTS		BANK FEES FOR SEGREGATED FUND 12

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Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization UNITED ASSOCIATION OF JOURNEYMEN & APPRT OF PLUMBERS & STEAMFITTERS LOCAL NO 350

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

88-0047920

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE BUSINESS MANAGER REVIEWS FORM 990 PRIOR TO FILING
	FORM 990, PART VI, SECTION B, LINE 12C	THE BUSINESS MANAGER AND BOARD OF DIRECTORS ARE RESPONSIBLE FOR MONITORING COMPLIANCE WITH THE POLICY THEY MONITOR AND ENFORCE THE CONFLICT OF INTEREST POLICY AS OUTLINED IN THE UNITED ASSOCIATION CONSTITUTION AND WHEN NECESSARY, TAKE SUCH DISCIPLINARY PROCEDURES AS REQUIRED UNDER THE CONSTITUTION
	FORM 990, PART VI, SECTION B, LINE 15	SALARIES ARE DETERMINED BY THE NEGOTIATED CONTRACT
	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE ON REQUEST BY CALLING OR WRITING TO THE LOCAL NO 350 UNION OFFICE. IN ADDITION, AN ANNUAL FINANCIAL REPORT IS FILED WITH THE DEPARTMENT OF LABOR WHICH CAN BE OBTAINED ON THE U.S. DEPARTMENT OF LABOR, OLMS, ONLINE PUBLIC DISCLOSURE ROOM
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	NET CHANGE IN THE SEGREGATED POLITICAL FUND 1,372

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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Name of the organization UNITED ASSOCIATION OF JOURNEYMEN & APPRT OF PLUMBERS & STEAMETTTERS LOCAL NO 350

Employer identification number

Part I Identification of Disregarded Entities (Con	nplete if the organization	answered "Yes" t	o Form 990, Pa	88-00479. art IV, line 33.)			
(a) Name, address, and EIN (ıf applıcable) of dısregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations durin				' to Form 990, Pa	art IV, line 34 because it	had or	ıе
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	(e) Public charity sta (if section 501(c))	tus (f) Direct controlling (3)) entity	Section (b) cont	g) on 512 (13) crolled tity?
(1) ASSOCIATED BUILDING CORPORATION 1110 GREG STREET	TO PROVIDE FACILITIES AND EQUIPMENT FOR THIS ORGANIZATION, LOCAL 350	NV	501(C)(2)		UA JOURNEYMEN & APPRT OF PLUMBERS & STEAMFITTERS LOCAL 350	Yes	No No
SPARKS, NV 89431 88-6004403							<u> </u>
							<u> </u>
							<u> </u>

(a) Name, address, and EIN o related organization	f	(b) Primary activit	(c) Legal domicile (state or foreign country)	entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-	(f) Share of total income	(g) Share of end-of-yea assets	(h Disprop r allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percenta ownersh
					514)			Yes	No		Yes	No	
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo	ration is a cor	or Trust (poration or	Complete if trust during	the organı the tax ye	zatıon ar ar.)	iswere	d "Ye	s" to Form	990,	Part	:IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controll entity	(e) Type of enti (C corp, S corp, or trust)		total Share e of	(g) e of end- year ssets		(h) ercentage wnership	Section (b) conti	(13)	
											Yes		No

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No			
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related or	organizations lis	ted in Parts II-IV?							
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No			
b	Gift, grant, or capital contribution to related organization(s)				${} ightarrow$		No			
C	Gift, grant, or capital contribution from related organization(s)				1c		No			
d	Loans or loan guarantees to or for related organization(s)				1d		No			
e	Loans or loan guarantees by related organization(s)				1e		No			
	Dividends from related organization(s)				\vdash					
• • • • • • • • • • • • • • • • • • • •										
h	Purchase of assets from related organization(s)				\vdash					
i	Exchange of assets with related organization(s)				\vdash		No			
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		No			
k	Lease of facilities, equipment, or other assets from related organization(s)	did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?								
I	Performance of services or membership or fundraising solicitations for related organization(s)				11		No			
m Performance of services or membership or fundraising solicitations by related organization(s)										
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes				
0	Sharing of paid employees with related organization(s)				10		No			
р	Reimbursement paid to related organization(s) for expenses				1р		No			
q	Reimbursement paid by related organization(s) for expenses				1q		No			
r	O ther transfer of cash or property to related organization(s)				\vdash		No			
s	Other transfer of cash or property from related organization(s)				1s		No			
<u> </u>	If the answer to any of the above is "Yes " see the instructions for information on who must complete this line	ne including co	vered relationships	and transaction thresholds						
			· .							
	Name of other organization Tr	Fransaction			ount in	volved				

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

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				`	,		_	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Additional Data Return to Form

Software ID: Software Version:

EIN: 88-0047920

Name: UNITED ASSOCIATION OF JOURNEYMEN & APPRT

OF PLUMBERS & STEAMFITTERS LOCAL NO 350