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DLN: 93493058004104

Form 990

Department of the Treasury

22

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 Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service 2012, and ending 04-30-2013 A For the 2012 calendar year, or tax year beginning 05-01-2012 D Employer identification number **B** Check if applicable IUPAT DISTRICT COUNCIL NO 21 JOB RECOVERY FUND Address change 23-2860609 Doing Business As Name change Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number 2980 SOUTHAMPTON-BYBERRY ROAD Terminated (215) 934-5130 Amended return City or town, state or country, and ZIP + 4 PHILADELPHIA, PA 191541297 Application pending **G** Gross receipts \$ 1,359,617 Name and address of principal officer H(a) Is this a group return for MICHAEL PREVITERA affiliates? ┌ Yes ┌ No 2980 SOUTHAMPTON-BYBERRY ROAD PHILADELPHIA, PA 191541297 **H(b)** Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) Tax-exempt status H(c) Group exemption number ▶ Website: ► N/A L Year of formation 1964 M State of legal domicile PA Part I Summary 1 Briefly describe the organization's mission or most significant activities THE PURPOSE OF THE FUND IS TO SUBSIDIZE THE AMOUNT A CONTRIBUTING EMPLOYER PAYS FOR FRINGE BENEFITS IN ORDER TO AID COMPETITIVENESS IN OBTAINING CONTRACTS WHICH OTHERWISE MAY BE LOST TO NON-UNION CONTRACTORS TO ACCOMPLISH THIS PURPOSE, THE FUND DISTRIBUTES BENEFIT GRANTS TO THE PENSION, HEALTH AND WELFARE, ANNUITY, APPRENTICESHIP TRAINING FUNDS, INDUSTRY ADVANCEMENT FUNDS AND LABOR Activities & Governance MANAGEMENT FUNDS ON BEHALF OF EMPLOYERS WHO EMPLOY OR DESIRE TO EMPLOY MEMBERS OF THE INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES DISTRICT COUNCIL 21 2 Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . 4 Number of independent voting members of the governing body (Part VI, line 1b) 0 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) . . . 6 0 **7a** Total unrelated business revenue from Part VIII, column (C), line 12 0 **b** Net unrelated business taxable income from Form 990-T, line 34 . . 7h 0 **Prior Year Current Year** 0 1,046,155 1,359,180 Program service revenue (Part VIII, line 2g) . . . Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . 998 437 0 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 1,047,153 1,359,617 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . 1,484,765 632,087 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 0 40,629 Expenses 5-10) Professional fundraising fees (Part IX, column (A), line 11e) 0 16a b Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 0$ 61,604 23,793 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 693,691 1,549,187 18 353,462 -189,570 19 Revenue less expenses Subtract line 18 from line 12 t Assets or in Balances **Beginning of Current End of Year** 20 Total assets (Part X, line 16) 3,347,608 3,611,375 1,278,466 21 247,638 Total liabilities (Part X, line 26)

Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Net assets or fund balances Subtract line 21 from line 20

		·	-							
		***	****	2014-02-27						
Sign		Sıg	nature of officer		Date					
Here	L	_	CHAEL PREVITERA ADMINISTRATOR pe or print name and title							
	<u> </u>	' y L	pe or print name and title							
Doid			Print/Type preparer's name LOUIS VERZELLA CPA	Preparer's signature	Date 2014-02-27	Check if self-employed	PTIN P00360279			
Paid Prepare	er		Firm's name NOVAK FRANCELLA LLC			Firm's EIN ► 61-1436956				
Use Only			Fırm's address ► ONE PRESIDENTIAL BLV	Phone no (610) 668-9400						
			BALA CYNWYD, PA 1900	04						
May the II	RS dı	SCI	uss this return with the preparer sh	own above? (see instructions) .			▼Yes 「No			

3,099,970

2,332,909

Part	ш		ram Service Accompl ntains a response to any qu			
1	Brief	y describe the organizati	on's mission			
TO AT ACCC APPR BEHA	ID CO MPLI ENTI LF OF	MPETITIVENESS IN OE SH THIS PURPOSE, TH CESHIP APPRENTICESH	BTAINING CONTRACTS W E FUND DISTRIBUTES BEI HIP TRAINING FUNDS, IN PLOY OR DESIRE TO EMPL	HICH OTHERWISE MAY NEFIT GRANTS TO THE DUSTRY ADVANCEMEN	MPLOYER PAYS FOR FRINGE BE LOST TO NON-UNION C PENSION, HEALTH AND WEI T FUNDS AND LABOR MANA INTERNATIONAL UNION OF	ONTRACTORS TO FARE, ANNUITY GEMENT FUNDS ON
	the pr	or Form 990 or 990-EZ	any significant program se			┌ Yes ┌ No
		s," describe these new se				
	servi	es [?]	iducting, or make significan		ucts, any program 	┌ Yes ┌ No
4	Desci exper	ises Section 501(c)(3) a	ogram service accomplishm	are required to report th	largest program services, as r e amount of grants and allocati	
	(Code) (Ex	penses \$	ıncludıng grants of \$) (Revenue \$)
			AT DISTRICT COUNCIL 21 EMPLOY CT COUNCIL 21 MEMBERS MAY B		DIZE FRINGE BENEFIT PAYMENTS SO N-UNION EMPLYOERS	THAT EMPLOYERS USING
4b	(Code	e) (Exp	penses \$	including grants of \$) (Revenue \$)
4 c	(Code) (Exp	penses \$	including grants of \$) (Revenue \$)
4d		er program services (Des	•	Φ.) (Davanua #	,
		enses \$	including grants of	*) (Revenue \$)
4e	Tota	I program service expens	es 🟲			

Part IV	Checl	dist 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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Νo
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? <i>If</i> "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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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
l1	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	Yes	
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		No
c	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	Yes	
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	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
L4a	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
L5	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
L7	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	Yes	
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		
С	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? If "Yes," complete Schedule L, Part IV	28a		No
b	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	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? <i>If</i> "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? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

αı	Statements Regarding Other IRS Filings and Tax Compliance			г
	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 2			140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c		
	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	1		
•	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
,	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	4a		No
	account)?			140
)	If "Yes," enter the name of the foreign country ▶			
	See instructions for filling requirements for Form 1D F 90-22 1, Report of Foreign Bank and Financial Accounts			
1	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		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	3B		
	11 Tes, to line 3a of 3b, did the organization me roth 6886-17	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		N
	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). 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		
	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		
	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		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
	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		
	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 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b			
	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	<u> </u>	_
	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		
ı	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			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

		Yes	No					
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								
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 any other officer, director, trustee, or key employee?	2		No					
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	Yes						
Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No					
Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No					
Did the organization have members or stockholders?	6		No					
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		No					
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					
Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following								
a The governing body?								
b 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 the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No					
ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Code	e.)					
		Yes	No					
Did the organization have local chapters, branches, or affiliates?	10a		No					
If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes						
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	12a		No					
Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b							
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c							
Did the organization have a written whistleblower policy?	13		No					
Did the organization have a written document retention and destruction policy?	14		No					
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	15a		No					
Other officers or key employees of the organization	15b		Νo					
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)								
Did the organization invest in contribute access to or participate in a joint venture or similar arrangement with a								
taxable entity during the year?	16a		No					
	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 To Did not find the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O To 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? 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? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members or stockholders? Did the organization have members or stockholders? 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? Are any governance decisions of the organization reserved to (or subject to approvably) members, 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 The governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? If we governing body? Each committee	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 July 10 days officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? July did not officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management company or other person? July 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? July the organization have members or stockholders or the proof form 990 was filed? July the organization have members or stockholders or other persons who had the power to elect or appoint one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or or persons other than the governing body? July the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? July the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? July the organization contemporaneously document the meetings held or written actions undertaken during the year by the following and the properties of	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 Enter the number of voting members included in line 1a, above, who are independent. In the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employee have a family relationship performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5					

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 ►TRUSTEES 2980 SOUTHAMPTON-BYBERRY ROAD PHILADELPHIA, PA (215) 934-5130

Part VII 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 rect	not box h ar or/ti	chec (, unle n offic	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	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)	from the organization and related organizations
(1) HARRY WILLIAMS	1 00	х						0	0	0
UNION TRUSTEE (P)								0	0	0
(2) STEVE LARKIN EMPLOYER TRUSTEE (P)	1 00	х						0	0	0
(3) MICHEAL THURMAN	1 00									
EMPLOYER TRUSTEE		Х						0	0	α
(4) CHUCK MURTHA	1 00	—								
UNION TRUSTEE		Х						0	0	0
(5) THOMAS BOETEFUER	1 00	,						0	0	
UNION TRUSTEE		Х						0	0	0
(6) EVAN LAMBROS	1 00	Х						0	0	0
EMPLOYER TRUSTEE	1.00									
(7) JOSEPH ASHDALE UNION TRUSTEE	1 00	×						0	0	0
(8) FRANCIS MCLAUGHLIN	1 00									
UNION TRUSTEE		Х						0	0	O
(9) ANGELA TILOTTA	1 00	T						_	_	_
EMPLOYER TRUSTEE		X						0	0	0

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

	(A) Name and Title	(B) A verage hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)		(E) Reportable compensation from related organizations (W 2/1099-MISC)	- ((F) Estima mount of compens from t	ted fother ation he
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2,2333				relate organiza	ed l
												-		
												-		
								<u> </u>						
1b	Sub-Total				•			•						
c	Total from continuation sheet	•			•	•				0		0		0
d 	Total (add lines 1b and 1c) . Total number of individuals (in							- N	ho received			<u> </u>		
_	\$100,000 of reportable compe						a abov	C) W	mo received	more ti	ian			
													Yes	No No
3	Did the organization list any fo					key	emplo	yee	, or highest	compen	sated employee			
_	on line 1a? If "Yes," complete S					•	•	•				3		No
4	For any individual listed on line organization and related organ													
_	individual		•		•	•		•				4		No
5	Did any person listed on line 1 services rendered to the organ											5		No
Se	ection B. Independent Co	ntractors												
1	Complete this table for your fiv	ve highest comp												
	compensation from the organiz	zation Report co (A)	ompens	ation	tor	tne c	aienda	arye	ear ending w	ith or Wi	(B)	on's	tax year (C	
	N	lame and business	address							Des	cription of services		Comper	
												\pm		
												+		
												\neg		

2 Total number of independent contractors (including but not limited to those listed above) who received more than

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

Form 99			_					Page 9
Part V	/##	Statement of Check of Schedu	o f Revenue ule O contains a respor	nse to any question i	in this Part 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
χŞ	1a	Federated cam	paigns 1a					
ant	ь	Membership du	ues 1b					
الم ق	С	Fundraising eve	ents 1c					
iffs ar 4	d	Related organiz	zations 1d					
%, E	e	Government grant	es (contributions) 1e					
iğ iz	f	All other contribution	ons, gifts, grants, and 1f					
Contributions, Gifts, Grants and Other Similar Amounts	_	similar amounts no	ot included above ions included in lines	-				
n đ đ	g	1a-1f \$						
<u>S</u>	h	Total. Add lines	s 1 a - 1 f	· · · •				
				Business Code				
¥eπ.	2a	EMPLOYER CONTR		900099	1,057,350	1,057,350		
<u> 8</u>	Ь	SUBSIDIES CANCE	ELLED	900099	301,830	301,830		
ΨC	d							
Š	e							
E	f	All other progra	am service revenue					
Program Serwce Revenue	_	-			1.250.100			
	3		s 2a-2f		1,359,180			
		and other simil	aramounts)	🟲 📗	437			437
	4		stment of tax-exempt bond p	proceeds •				
	5	Royalties	(ı) Real	(II) Personal				
	6a	Gross rents	(i) Keai	(II) F ersonal				
	ь	Less rental						
	С	expenses Rental income						
	d	or (loss) Net rental inco	me or (loss)					
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of						
		assets other than inventory						
	ь	Less cost or other basis and						
		sales expenses Gain or (loss)						
	d		[] ss)					
		Gross income f	ı					
≞		events (not inc	luding					
Other Revenue			s reported on line 1c)					
æ		See Part IV, lir	ne 18 a					
her	ь	Less direct ex	penses b					
ŏ	c		(loss) from fundraising (events 🛌				
	9a		from gaming activities					
		See Part IV, III	ne 19 a					
	b	Less direct ex	penses b					
	С		(loss) from gamıng actı) ا	vities				
	10a	Gross sales of returns and allo						
			a a					
	b	_	oods sold b					
	С		(loss) from sales of inve					
	11a	Miscellaneou	s Kevenue	Business Code				
	b b							
	C							
	d	All other reven	ue					
	e	Total. Add lines	l	🕨				
	12	Total revenue.	See Instructions	🛌				
	1		-	-	1,359,617	1,359,180	(437

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	ons must comp	olete column (A)	
	Check if Schedule O contains a response to any question in this Pa	rt IX			
	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	1,484,765			
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				
5	Compensation of current officers, directors, trustees, and key employees				
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	40,629			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal	4,102			
С	Accounting	5,802			
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				
13	Office expenses	3,421			
14	Information technology	7,989			
15	Royalties				
16	Occupancy	1,021			
17	Travel	269			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	299			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	890			
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					
b					
C					
d					
е 	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,549,187			
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

		Check if Schedule O contains a response to any question in this P	art X			
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			1	_
	2	Savings and temporary cash investments		3,122,107	2	3,374,285
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		223,516	4	235,107
	5	Loans and other receivables from current and former officers, directly employees, and highest compensated employees. Complete Part Schedule L	ectors, trustees, key II of		5	
Assets	6	Loans and other receivables from other disqualified persons (as a section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$ employers and sponsoring organizations of section $501(c)(9)$ volbeneficiary organizations (see instructions) Complete Part II of S	, and contributing luntary employees'		6	
	7	Notes and loans receivable, net			7	
=	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		1,905	ĽТ	1,983
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	3		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	ь	Less accumulated depreciation	10b 1,926	0	10c	0
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11		12		
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		80	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)		3,347,608		3,611,375
	17	Accounts payable and accrued expenses		247,638		1,220,375
	18	Grants payable		,	18	, ,
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedu	ulo D		21	
lities	22	Loans and other payables to current and former officers, directors key employees, highest compensated employees, and disqualifie	s, trustees,		21	
室		persons Complete Part II of Schedule L			22	
Liabilit	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties .			24	
	25				24	
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Part D	X of Schedule	0	25	58,091
	26	Total liabilities. Add lines 17 through 25		247,638	26	1,278,466
ر.		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▼				
ġ		lines 27 through 29, and lines 33 and 34.				
<u>a</u>	27	Unrestricted net assets		3,099,970	27	2,332,909
n n	28	Temporarily restricted net assets			28	
듣	29	Permanently restricted net assets			29	
Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34.	e ► ┌ and			
ن چې	30	Capital stock or trust principal, or current funds			30	
Ř	31	Paid-in or capital surplus, or land, building or equipment fund .			31	
Ą	32	Retained earnings, endowment, accumulated income, or other fun	ıds		32	
Š	33	Total net assets or fund balances		3,099,970	33	2,332,909
Z	34	Total liabilities and net assets/fund balances		3,347,608	34	3,611,375

Par	t XI Reconcilliation of Net Assets				-9
	Check if Schedule O contains a response to any question in this Part XI				<u>Г</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,3	359,617
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,5	549,187
3	Revenue less expenses Subtract line 2 from line 1	3		-1	.89,570
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4		3,0	99,970
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8		- 5	577,491
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		2,3	32,909
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
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?	ne	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

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DLN: 93493058004104

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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.

Open to Public

CITIC	F Attaci to For	ili 330. F See Separate Histructions.	Inspection
	me of the organization PAT DISTRICT COUNCIL NO 21 JOB RECOVERY FUND		Employer identification number
101	AT DISTRICT COORCIE NO 21 JOB RECOVERT FUND		23-2860609
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990		inds or Accounts. Complete if the
		(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	_	radvised Yes No
5	Did the organization inform all grantees, donors, and d used only for charitable purposes and not for the benef		
Da	conferring impermissible private benefit?	the organization answered "Vos" to	· · · · · · · · · · · · · · · · · · ·
	rt II Conservation Easements. Complete if		Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation	<u> </u>	historically important land area
	Protection of natural habitat	•	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	a qualified conservation contribution in th	ne form of a conservation
		Γ	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 histo	oric structure included in (a)	2c
d	Number of conservation easements included in (c) accommodate 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 terminated	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	ling of violations, and Yes No
5	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	ents during the year
_	Amount of expenses incurred in monitoring, inspecting	and enforcing conservation easements	during the year
7	► \$	g, and emorening conservation casements	during the year
В	Does each conservation easement reported on line 2(and section $170(h)(4)(B)(II)$?	d) above satisfy the requirements of sect	tion 170(h)(4)(B)(I) Yes No
9	In Part XIII, describe how the organization reports coincided balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemed	e footnote to the organization's financial	
aı	rt 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 asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education, c	or research in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ts held for public exhibition, education, c	
	(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		•
а	Revenues included in Form 990, Part VIII, line 1		► \$

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	<u>llections of Ar</u>	t, His	stori	cai ii	<u>reasur</u>	es, or C	tne	r Similar As	sets (d	continued)
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other reco	rds, cl	heck	any of	the follo	wing that	are a	sıgnıfıcant use	ofits	
а	Public exhibition		d	Γ	Loan	or excha	ange prog	rams			
b	Scholarly research		e	Γ	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and expl	aın ho	w the	y furth	er the or	ganızatıor	ı's ex	empt purpose	ın	
5	During the year, did the organization solicit o									_	_
	assets to be sold to raise funds rather than t									┌ Yes	l No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	a "Y	es" to Form S	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?		•				other ass	ets r	not	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	e follo	wing	able		_				
									An	nount	
С	Beginning balance							1c			
d	Additions during the year							1d			
е	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, Iır	ne 21?	,						┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	e expla	anatı	on has	been pro	ovided in F	art >	KIII		Γ
Pai	rt V Endowment Funds. Complete	f the organizatio	n ans	swer	ed "Ye	es" to Fo	orm 990,	Par	t IV, line 10.		
_		(a)Current year	(b)Prior	year	b (c)Two	o years bacl	(d)	Three years back	(e)Four	years back
1a	Beginning of year balance							-			
Ь	Contributions							-			
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs							+			
f	Administrative expenses					<u> </u>		+			
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balan	ice (lir	ne 1g	, colum	nn (a)) he	eld as				
а	Board designated or quasi-endowment ►										
b	Permanent endowment ►										
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	uld equal 100%									
За	Are there endowment funds not in the posses organization by	_		that	are hel	d and ad	mınıstere	d for		Yes	No
	(i) unrelated organizations							•	3a(_	_
	(ii) related organizations	ns listed as require	ed on S	Sche	dule R?				3a(3l		
4	Describe in Part XIII the intended uses of the tand, Buildings, and Equipme					10					
Par	t VI Land, Buildings, and Equipme Description of property	ent. See Form 9	90, Pa			or other	(b)Cost or	other	(c) Accumulate	ed (d)	Book value
	2 3 3 3 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1			b	asis (Inv	estment)	basis (ot		depreciation		
1a	Land			\top							
b	Buildings										
c	Leasehold improvements										
d	Equipment							1,926	1,	,926	0
_e	Other	<u> </u>									
	I. Add lines 1a through 1e <i>(Column (d) must e</i>			umn (B), line	10(c).)					0

art VIII 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
)Financial derivatives		
)Closely-held equity interests		
ther		
ther		
	 	
otal. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
art VIII Investments—Program Related. S	see Form 990. Part X. line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Bescription of investment type	(2) Book value	Cost or end-of-year market value
	 	, ,
otal. (Column (b) must equal Form 990, Part X, col (B) line 13)	*	
Part IX Other Assets. See Form 990, Part X,	line 15.	
(a) Desc		(b) Book value
•	•	
otal. (Column (b) must equal Form 990, Part X, col.(B) line	15.)	
Part X Other Liabilities. See Form 990, Part	t X, line 25.	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	t X, line 25.	
Part X Other Liabilities. See Form 990, Part (a) Description of liability ederal income taxes	t X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability ederal income taxes CCRUED EXPENSES	t X, line 25. (b) Book value 2,500	
Part X Other Liabilities. See Form 990, Part (a) Description of liability ederal income taxes CCRUED EXPENSES	t X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability ederal income taxes CCRUED EXPENSES	t X, line 25. (b) Book value 2,500	
Part X Other Liabilities. See Form 990, Part (a) Description of liability ederal income taxes CCRUED EXPENSES	t X, line 25. (b) Book value 2,500	
Part X Other Liabilities. See Form 990, Part (a) Description of liability ederal income taxes CCRUED EXPENSES	t X, line 25. (b) Book value 2,500	
Part X Other Liabilities. See Form 990, Part (a) Description of liability ederal income taxes CCRUED EXPENSES	t X, line 25. (b) Book value 2,500	
Part X Other Liabilities. See Form 990, Part (a) Description of liability ederal income taxes CCRUED EXPENSES	t X, line 25. (b) Book value 2,500	Þ
Part X Other Liabilities. See Form 990, Part (a) Description of liability dederal income taxes ACCRUED EXPENSES	t X, line 25. (b) Book value 2,500	.
Part X Other Liabilities. See Form 990, Part (a) Description of liability dederal income taxes ACCRUED EXPENSES	t X, line 25. (b) Book value 2,500	.
Part X Other Liabilities. See Form 990, Part (a) Description of liability dederal income taxes ACCRUED EXPENSES	t X, line 25. (b) Book value 2,500	
Part X Other Liabilities. See Form 990, Part (a) Description of liability dederal income taxes ACCRUED EXPENSES	t X, line 25. (b) Book value 2,500	.
·	t X, line 25. (b) Book value 2,500	
Part X Other Liabilities. See Form 990, Part (a) Description of liability dederal income taxes ACCRUED EXPENSES	t X, line 25. (b) Book value 2,500	
Part X Other Liabilities. See Form 990, Part (a) Description of liability dederal income taxes ACCRUED EXPENSES	t X, line 25. (b) Book value 2,500	F
Part X Other Liabilities. See Form 990, Part (a) Description of liability dederal income taxes ACCRUED EXPENSES	t X, line 25. (b) Book value 2,500	
Part X Other Liabilities. See Form 990, Part (a) Description of liability dederal income taxes ACCRUED EXPENSES	t X, line 25. (b) Book value 2,500	

Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	leturn
1	Total revenue, gains, and other support per audited financial statements	1	1,359,617
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	1	
c	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII)	1	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	1,359,617
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 . 4a		
b	Other (Describe in Part XIII)	1	
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	1,359,617
Part 2	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	Return
1	Total expenses and losses per audited financial statements	1	1,549,187
2	A mounts 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	0
3	Subtract line 2e from line 1	3	1,549,187
4	A mounts 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)	1	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,549,187

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
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48		MANAGEMENT EVALUATED THE FUNDS TAX POSITIONS AND CONCLUDED THAT THE FUND HAD MAINTAINED ITS TAX EXEMPT STATUS AND HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS THEREFORE, NO PROVISION OR LIABILITY FOR INCOME TAXES HAS BEEN INCLUDED IN THE FINANCIAL STATEMENTS AT THE PRESENT TIME, THE FUND IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY US FEDERAL, STATE, OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2010

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IUPAT DISTRICT COUNCIL NO 21 JOB RECOVERY FUND

Schedule I (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

OMB No 1545-0047

DLN: 93493058004104

Inspection

Employer identification number

23-2860609

Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of (a) Name and address of **(b)** EIN (c) IRC Code section (d) Amount of cash (e) A mount of non-(g) Description of (h) Purpose of grant organization ıf applıcable cash valuation non-cash assistance or assistance arant or government (book, FMV. assistance appraisal, other) (1) DISTRICT COUNCIL 21 91-2036994 501(C)9 745,243 SUBSIDIZE BENEFIT HEALTH & WELFARE FUND FUND TO AID 2980 SOUTHAMPTON-CONTRIBUTING BYBERRY ROAD **EMPLOYER IN** PHILADELPHIA, PA COMPETITIVE BIDDING 191541297 (2) DISTRICT COUNCIL 21 23-7390182 401(A)/501(A) 46,488 SUBSIDIZE BENEFIT ANNUITY FUND FUND TO AID 2980 SOUTHAMPTON-CONTRIBUTING BYBERRY ROAD **EMPLOYER IN** PHILADELPHIA, PA COMPETITIVE 191541297 BIDDING (3) DISTRICT COUNCIL 21 501(C)(3) SUBSIDIZE BENEFIT 7.152 **FUND TO AID** IAF 2980 SOUTHAMPTON-CONTRIBUTING BYBERRY ROAD **EMPLOYER IN** PHILADELPHIA, PA COMPETITIVE 191541297 BIDDING (4) FINISHING TRADES 23-6416214 70,090 SUBSIDIZE BENEFIT 501(C)(3) INSTITUTE OF THE MID-FUND TO AID ATLANTIC REGION CONTRIBUTING 2190 HORNIG ROAD **EMPLOYER IN** PHILADELPHIA, PA 19116 COMPETITIVE BIDDING (5) IUPAT PENSION SUBSIDIZE BENEFIT 52-6073909 410.528 401(A)/501(A) 7234 PARKWAY DRIVE FUND TO AID HANOVER, MD 21076 CONTRIBUTING **EMPLOYER IN** COMPETITIVE BIDDING (6) IUPAT INDUSTRY 52-6073909 401(A)/501(A) SUBSIDIZE BENEFIT 198.112 FUND TO AID ANNUITY PLAN 7234 PARKWAY DRIVE CONTRIBUTING HANOVER, MD 21076 **EMPLOYER IN** COMPETITIVE BIDDING (7) IUPAT LMCI 52-6776506 SUBSIDIZE BENEFIT 501(C)(5) 3.576 7234 PARKWAY DRIVE FUND TO AID CONTRIBUTING HANOVER, MD 21076 **EMPLOYER IN** COMPETITIVE BIDDING (8) IUPAT FINISHING 52-1923143 3,576 SUBSIDIZE BENEFIT 501(C)(3) TRADES INSTITUTE **FUND TO AID** 7230 PARKWAY DRIVE CONTRIBUTING HANOVER, MD 21076 **EMPLOYER IN** COMPETITIVE BIDDING Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Enter total number of other organizations listed in the line 1 table

(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
I	I	1		
				recipients cash grant non-cash assistance (book,

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier Return Reference Explanation

Schedule I (Form 990) 2012

Software ID:

Software Version:

EIN: 23-2860609

Name: IUPAT DISTRICT COUNCIL NO 21 JOB RECOVERY FUND

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DISTRICT COUNCIL 21 HEALTH & WELFARE FUND 2980 SOUTHAMPTON- BYBERRY ROAD PHILADELPHIA, PA 191541297	91-2036994	501(C)9	745,243				SUBSIDIZE BENEFIT FUND TO AID CONTRIBUTING EMPLOYER IN COMPETITIVE BIDDING
DISTRICT COUNCIL 21 ANNUITY FUND2980 SOUTHAMPTON-BYBERRY ROAD PHILADELPHIA, PA 191541297	23-7390182	401(A)/501(A)	46,488				SUBSIDIZE BENEFIT FUND TO AID CONTRIBUTING EMPLOYER IN COMPETITIVE BIDDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DISTRICT COUNCIL 21 IAF 2980 SOUTHAMPTON- BYBERRY ROAD PHILADELPHIA,PA 191541297		501(C)(3)	7,152				SUBSIDIZE BENEFIT FUND TO AID CONTRIBUTING EMPLOYER IN COMPETITIVE BIDDING
FINISHING TRADES INSTITUTE OF THE MID- ATLANTIC REGION2190 HORNIG ROAD PHILADELPHIA,PA 19116	23-6416214	501(C)(3)	70,090				SUBSIDIZE BENEFIT FUND TO AID CONTRIBUTING EMPLOYER IN COMPETITIVE BIDDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IUPAT PENSION7234 PARKWAY DRIVE HANOVER,MD 21076	52-6073909	401(A)/501(A)	410,528				SUBSIDIZE BENEFIT FUND TO AID CONTRIBUTING EMPLOYER IN COMPETITIVE BIDDING
IUPAT INDUSTRY ANNUITY PLAN7234 PARKWAY DRIVE HANOVER,MD 21076	52-6073909	401(A)/501(A)	198,112				SUBSIDIZE BENEFIT FUND TO AID CONTRIBUTING EMPLOYER IN COMPETITIVE BIDDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IUPAT LMCI7234 PARKWAY DRIVE HANOVER,MD 21076	52-6776506	501(C)(5)	3,576				SUBSIDIZE BENEFIT FUND TO AID CONTRIBUTING EMPLOYER IN COMPETITIVE BIDDING
IUPAT FINISHING TRADES INSTITUTE7230 PARKWAY DRIVE HANOVER, MD 21076	52-1923143	501(C)(3)	3,576				SUBSIDIZE BENEFIT FUND TO AID CONTRIBUTING EMPLOYER IN COMPETITIVE BIDDING

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SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493058004104

OMB No 1545-0047

2012

Open to Public
Inspection

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
IUPAT DISTRICT COUNCIL NO 21 JOB RECOVERY FUND

Employer identification number

23-2860609

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 3	TRUSTEES HAVE CONTRACTED WITH AN ADMINISTRATOR TO MANAGE DAY-TO-DAY OPERATIONS OF THE FUND
	FORM 990, PART VI, SECTION B, LINE 11	INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES JOB RECOVERY FUND'S FORM 990 IS PREPARED BY ITS INDEPENDENT ACCOUNTANT. THE RETURN IS THEN FORWARDED TO THE FUND ADMISISTRATOR AND TRUSTEE'S FOR REVIEW AND SIGNATURE.
	FORM 990, PART VI, SECTION C, LINE 19	INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES DISTRICT COUNCIL 21 JOB RECOVERY FUND MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST
	FORM 990, PART XII, LINE 2C	INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES DISTRICT COUNCIL NO 21 JOB RECOVERY FUND BOARD OF TRUSTEES IS RESPONSIBLE FOR OVERSEEING THE FINANCIAL STATEMENT AUDIT AND THE INDEPENDENT ACCOUNTANT PERFORMING THE AUDIT

DLN: 93493058004104

Open to Public

OMB No 1545-0047

SCHEDULE R (Form 990)

IUPAT DISTRICT COUNCIL NO 21 JOB RECOVERY FUND

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

Related Organizations and Unrelated Partnerships

Department of the Treasury Internal Revenue Service Name of the organization

Inspection **Employer identification number**

				23-	2860609			
Part I Identification of Disregarded Entities (Co	omplete if the organization	answered "Yes" to	o Form 990, P	art IV, line	33.)			
(a) Name, address, and EIN (ıf applıcable) of dısregarded entıty	(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 Orgor more related tax-exempt organizations duri		l the organization a	l Inswered "Yes	to Form 9	990, Part I\	/, line 34 because i	t had o	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sec	tion Public (if sect	(e) charity status ion 501(c)(3))	(f) Direct controlling entity	Section (13) c	
(1) IUPAT DISTRICT COUNCIL 21 WELFARE FUND	HEALTH & WELFARE FUND	PA	501(C)9				Yes	No No
2980 SOUTHAMPTON-BTBERRY ROAD								
PHILADELPHIA, PA 191541297 91-2036994								
(2) IUPAT DISTRICT COUNCIL 21 ANNUITY FUND	ANNUITY FUND	PA	401(A)/501(A)					No
2980 SOUTHAMPTON-BTBERRY ROAD PHILADELPHIA, PA 191541297 23-7390182								
(3) IUPAT DISTRICT COUNCIL 21 VACATION FUND	VACATION FUND	PA	501(C)9					No
2980 SOUTHAMPTON-BTBERRY ROAD								
PHILADELPHIA, PA 191541297 23-1341665								\perp
					_			

(a) Name, address, and EIN	o.f	(b)	(c)	(d)	(e)	(f)	(g)	(h) 	(i) Code V—UBI	Cana	j)	(k)
Name, address, and EIN related organization	or	Primary activity	domicile domicile (state or foreign country)	entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-yea assets	Disprop alloca		amount in box 20 of Schedule K-1 (Form 1065)	mana part	aging ner?	Percentag ownersh
					,			Yes	No		Yes	No	İ
								<u> </u>					
								<u> </u>					
V Identification of Related O line 34 because it had one or								ıswere	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)	
ional Data Table											Yes		No
iliai Data Table													
													H
									1				

	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 organizations l	sted 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)				1b		No
C	Gift, grant, or capital contribution from related organization(s)				1 c		No
d	Loans or loan guarantees to or for related organization(s)				1d		No
е	Loans or loan guarantees by related organization(s)				1e		No
f	Dividends from related organization(s)				1 f		No
g	Sale of assets to related organization(s)				1 g		No
h	Purchase of assets from related organization(s)				1h		No
i	Exchange of assets with related organization(s)				1 i		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)				1k		No
ı	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)				1m		No
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	Yes	
р	Reimbursement paid to related organization(s) for expenses				1р	Yes	
q	Reimbursement paid by related organization(s) for expenses				1q		No
r	Other transfer of cash or property to related organization(s)			ļ-	1r		No
s	Other transfer of cash or property from related organization(s)				1 s		No
_	7611						
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete (a)	(b)	(c)	(d)			
	Name of other organization	Transaction type (a-s)	Amount involved	Method of determining amou	unt II	nvolved	
1) I	JPAT DISTRICT COUNCIL 21 WELFARE FUND	P	55,591				

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	

Software ID: Software Version:

EIN: 23-2860609

Name: IUPAT DISTRICT COUNCIL NO 21 JOB RECOVERY FUND

Schedule R (Form 990) 2012 Page 5

Part VII Supplemental Information								Рас	ge 5
Complete this part to provide addi		s to questions on Sc	hedule R (see ins	tructions)					
Identifier	Return Reference		Explanatio						
Form 990, Schedule R, Part IV - Identif		nizations Taxab			rust				
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512(b)(control entity	on (13) Iled
3-R PAINTING COMPANY									No
122 DRUMMOND AVENUE NEPTUNE CITY, NJ 07753 446 PAINTING LLC		ĽΝ							No
P O BOX 1010 MC MURRAY, PA 15317		РА							
A & J BUILDERS INC 721 WICKER AVENUE BENSALEM, PA 19020		РА							Νο
A INSTALLATIONS OA 136 HARVEY AVE DOYLESTOWN, PA		PA							No
18901 A G A DRYWALL LLC 430 COMMERCE LANE		NJ							No
WEST BERLIN, NJ 08091 A T A P									No
2791 SOUTHAMPTON ROAD PHILADELPHIA, PA 19154 A-1 MAINTENANCE		РА							No
176 12TH STREET CAMPBELL, OH 44405 A P CONSTRUCTION		он							No No
915 SOUTH BLACK HORSE PIK BLACKWOOD, NJ 08012		ľΩ							INO
ABERDEEN MATAWAN GLASS OA 473 LLOYD ROAD		ľ							No
ABERDEEN, NJ 07747 ABSA INC OA 441 W BAGLEY ROAD BEREA OH 44017		он							No
BEREA, OH 44017 ACADEMY GLASS INC OA 232 WESCOTT DRIVE		NJ							Νo
RAHWAY, NJ 07065 ACOUSTICS PLUS INC									No
P O BOX 262 HARLEYSVILLE, PA 19438 ADAMS GLASS		PA							No
COMPANY 7211 STATE ROAD PHILADELPHIA, PA 19135		РА							
ADVANCED COMMERCIAL INTERIORS		РА							No
805 HENDERSON BLVD FOLCROFT, PA 19032 ADVANCED GLASS &									No
METAL 5410 GLEN ROAD COOPERSBURG, PA 18036		PA							

Form 990, Schedule R, Part IV - Identificat									
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	entity (C corp, S corp,	(f) Share of total Income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512(b) contro entity	on (13) lled y?
AETNA COATINGS				or trust)				Yes	No No
2135 SCHUETZ ROAD ST LOUIS, MO 63146		МО							
AIRPORT CONSTRUCTION SERVICES		PA							No
1 S CHESTER PIKE GLENOLDEN, PA 19036									
AJAY GLASS&MIRROR CO INC OA									No
101 NORTH STREET CANANDAIGUA, NY 14504		NY							
AKER SHIPYARD - PHILADELPHIA									No
2100 KITTY HAWK AVENUE PHILADELPHIA, PA 19112		РА							
ALL AMERICAN GLASS OA									No
331 FAIRFIELD ROAD FREEHOLD, NJ 07728		ι							
ALL AMERICAN GLAZING									No
2014 FORD ROAD BRISTOL, PA 19007		PA							
ALL GLASS SYSTEMS		PA							No
34 B NOELAND AVE PENNDEL, PA 19047		, , ,							
ALL NEW GLASS INC OA		WA							No
319 D STREET NW AUBURN, WA 98001		WA							
ALL TECH DECORATING COMPANY OA									No
1227 NAPERVILLE DRIVE ROMEOVILLE, IL 60446		IL							
ALL WALLS & CEILINGS									No
3619 CHAPEL ROAD NEWTOWN SQUARE, PA 19073		РА							
ALLIED INTERIOR CONTRACTORS									No
110 AMERICAN BOULEVARD TURNERSVILLE, NJ 08012		ľ							
ALLIED PAINTING									No
4 LARWIN ROAD CHERRY HILL, NJ 08034		ĽΝ							
ALLSPEC CONSTRUCTION INC									No
175 COMMERCE DRIVE		PA							
FT WASHINGTON, PA 19034									
ALMOND GLASS WORKS									No
120 FERRY AVENUE COLLINGSWOOD, NJ 08108		ĽΝ							
ALN CONSTRUCTION		DE							No
104 SANDY DRIVE NEWARK, DE 19713									

Form 990, Schedule R, Part IV - Identificat						1		1	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end- of-year assets	(h) Percentage ownership	Secti 512(b) contro entity	on (13) Iled
ALPHA PAINTING & CONST CO				,				165	No
6800 QUAD AVENUE BALTIMORE, MD 21237		MD							
ALPHA PAINTINGLIBERTY MAINTEN		MD							No
6800 QUAD AVENUE BALTIMORE, MD 21237		MD							
AMERICAN INTERIOR CONSTR INC									No
3560 WINDING WAY NEWTOWN SQUARE, PA 19073		РΑ							
ANCHOR PAINTING INC									No
214 SUFFOLK RD FLOURTOWN, PA 19031		РΑ							
ANDERSEN INTERIOR CONTRACTING POBOX 10362		NJ							No
FAIRFIELD, NJ 07004 ANDREWS WINDOW									No
SERVICES 18 HOLLYBERRY LANE MARMORA, NJ 08223		ΝJ							
APG INTERNATIONAL									No
P O BOX 875 GLASSBORO, NJ 08028		NJ							
APPLEWOOD ENTERPRISES 331 MAPLE AVENUE		PΑ							No
ARENA									No
MAINTENANCE SOLUTIONS 331 MAPLE AVENUE		PA							
HORSHAM, PA 19044 ARTISAN DISPLAY								1	No
INC 1239 EAST 6TH STREET		РА							
RED HILL, PA 18076 ASHTON INTERIORS									No
INC 916 ASHTON RD BENSALEM, PA 19020		PΑ							
ASSOCIATED SPECIALTY CONTRACTG									No
98 LACRUE AVE GLEN MILLS, PA 19342		PA							
ATHENA CONTRACTING INC									No
2825 SOUTH WARNOCK STREET PHILADELPHIA, PA		РА							
19148 ATLAS PAINTING & SHEETING CORP									No
465 CREEKSIDE DRIVE		NY							
AMHERST, NY 14228 ATRIUM INTERNATIONAL									No
600 W GERMANTO WN		PA							
PIKE PLYMOUTH MEETING, PA 19462									

Form 990, Schedule R, Part IV - Identificat						•	•	1	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Secti 512(b) contro entit	on (13) lled y?
ATSALIS BROTHERS				or crust)				Yes	No No
PAINTING CO 24595 GROESBECK HIGHWAY		MI							
WARREN, MI 48089 AVALOTIS CORPORATION		PA							No
400 JONES STREET VERONA, PA 15147 B J MCGLONE & CO		PA							No
OA 40 BRUNSWICK AVE		NJ							
BV F CONSTRUCTION CO									No
78 TOMLINSON RD HUNTINGDON VALLEY, PA 19006		PA							
BCT WALLS & CEILINGS 94 WALKER LANE		PA							No
NEWTOWN, PA 18910 BEDWELL COMPANY									No
1380 WILMINGTON PIKE WEST CHESTER, PA 19381		PA							
BELETZ BROS GLASS									No
5024 MULBERRY STREET PHILADELPHIA, PA 19124		PA							
BENEXCEL CONSORTIUM 2980 SOUTHAMPTON		РА							No
RD PHILADELPHIA, PA 19154									
BERKO WITZ INC PO BOX 427 PEDRICKTO WN, NJ		ĽΝ							No
08067 BESAM US INC									No
300 HORIZON CENTER HAMILTON, NJ 08691		NJ							
BIG MOUNTAIN IMAGING		PA							No
3201 SOUTH 26TH STREET PHILADELPHIA, PA 19145		PA							
BIGELOW BROTHERS P O BOX 264		NJ							No
HADDON HEIGHT, NJ 08035 BITTENBENDER									No
CONSTRUCTION 509 VINE STREET		PA							
PHILADELPHIA, PA 19106 BLASZ									No
CONSTRUCTION 830 PENNSYLVANIA BLVD		РА							
FEASTERVILLE, PA 19053 BOCK									No
CONSTRUCTION 2800 SOUTHAMPTON		PΑ							
ROAD PHILADELPHIA, PA 19154		····							

Form 990, Schedule R, Part IV - Identifica						l (>	l (15)	1 (5)	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Secti 512(b) contro entit	on (13) Iled
BOWEN INCORPORATED OA								165	No
10 CLOVER LANE NEWTOWN SQUARE, PA 19073		PA							
BOWEN PAINTING INC		NJ							No
ATTN JOHN BOWEN GLASSBORO, NJ 08028		6.01							
BRAND ENERGY SERVICES		NJ							No
740 VETERANS DRIVE SWEDESBORO, NJ 08085		IV3							
BRANDY WINE INTERIORS		DE							No
34 INDUSTRIAL BLVD NEW CASTLE, DE 19720									
BUCKS COUNTY GLASS COMPANY INC		PA							No
4050 SKYRON DRIVE DOYLESTOWN, PA 18901									
BUILDERS WORKS LLC OA		PA							No
1509 SWAIN STREET PHILADELPHIA, PA 19130									N.
BUTTONWOOD CO INC PO BOX		PA							No
EAGLEVILLE, PA 19408 C M S GLASS CO INC									No
210 N ALBANY AVE ATLANTIC CITY, NJ		ŊĴ							NO
08401 C ANTHONY PAINTING INC									No
199 HEFFNER ROAD LIMERICK, PA 19468		PA							
C ERICKSON & SONS 2200 ARCH ST		PA							No
PHILADELPHIA, PA 19103 C H SCHWERTNER &									No
SON INCOA 25 ROCK HILL ROAD		PA							
BALA CYNWYD, PA 19004 CAMDEN GLASS INC									No
111 MARLTON AVENUE		СИ							
CAMDEN, NJ 08105 CANNON SLINE INC (OA)									No
1325 W DETROIT BLVD		FL							
PENSACOLA, FL 32534 CAVANAUGH WALL									No
SOLUTIONS 602 JEFFERS CIRCLE		PA							
EXTON, PA 19341 CBO GLASS									No
13595 BROADWAY STREET ALDEN, NY 14004		NY							
	1	1	1	•	'	, I	•	ı	'

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CEILINGS INC		 	-	or trust)	-	 '	-	Yes	No No
P O BOX 298 NORRISTOWN, PA 19404		РА							140
CENTER METAL FABRICATORS		NJ							No
PO BOX 29 HAMMONTON, NJ 08037 CENTEX						<u> </u>			No
ENVIRONMENTS 1050 COLWELL LANE		РА				!			140
CONSHOHOCKEN, PA 19428 CENTRAL GLASS CO			-						No
24-26 PHILADELPHIA AVENUE EGG HARBOR, NJ 08216		NJ							
CENTRAL PA BLDG TRADE									No
524 SOUTH 22ND STREET HARRISBURG, PA 17104		PA							
CHOICE COATING INC 201 WELSFORD RD		PA							No
FAIRLESS HILLS, PA 19030 CIRCLE			<u> </u>			<u> </u>			No
WALLCOVERINGS 111 PARK DRIVE MONTGOMERYVILLE,		РА				!			
PA 18936 CIRIGNANO CONTRACTING			-					+	No
750 W CALIFORNIA AVENUE ABSECON, NJ 08201		NJ							
CITY GLASS COMPANY OA		ΝJ							No
282 BROADWAY BAYONNE, NJ 07002 CL COATINGS			-						No
8450 W 191ST STREET MOKENA, IL 60448		IL				<u> </u>			
CLEAR CHANNEL OUTDOOR- DELAWARE		DE							No
24 GERMAY DR WILMINGTON, DE 19804					1				
CLEAR CHANNEL OUTDOOR-PHILADEL P O BOX 599703		тх	1			!			No
SAN ANTONIO, TX 78259 CLEMENS			-			<u> </u>			No
CONSTRUCTION COMPANY		PA							
1435 WALNUT STREET PHILADELPHIA, PA 19102									
CLIFTON MIRROR & GLASS 188 GETTY AVENUE		ŊĴ							No
CLIFTON, NJ 07011 CLIFTON PARK INSTALLATIONS									No
11 B SOLAR DRIVE CLIFTON PARK, NY 12065		NY				!			

Form 990, Schedule R, Part IV - Identificat						l ()	41.	1 0	
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COASTLINE CORPORATION				or trusty				Yes	No No
414 W DELILAH RD PLEASANTVILLE, NJ 08232		NJ							
COLORY METAL & GLASS									No
2522 STATE ROAD BENSALEM, PA 19020		PA							
COMMERCIAL CONSTR SPECIALISTS		ОН							No
6250 CORPORATE CENTER DR DUBLIN, OH 43016									
COMMERCIAL WALLCOVERING		2.4							No
4201 NESHAMINY BLVD BENSALEM, PA 19020		PΑ							NI -
COMPONENT ASSEMBLY SYSTEMS 620 FIFTH AVENUE		NY							No
PELHAM, NY 10803 CORCON INC OA									No
3763 MCCARTNEY ROAD LOWELLVILLE, OH		ОН							
CRYSTAL CLEAR GLASS & METAL									No
2801-A BRISTOL PIKE BENSALEM, PA 19020		PA							
DC ELECTRIC INC 3036 TAFT RD EAST NORRITON, PA		РА							No
DM COATINGS									No
6950 CHATHAM DRIVE HARRISBURG, PA 17111		РА							
DALE CONSTRUCTION CO INC		РΑ							No
70 LIMEKILN PIKE GLENSIDE, PA 19038 DANCO PAINTING									No
LLC 3020 S BROAD STREET		PA							
PHILADELPHIA, PA 19145									
DC 35 RECIPROCAL 25 COLGATE ROAD		МА							No
DC INSTALLATIONS									No
1212 BUTLER AVE NEW CASTLE, PA 16101		PA							
DC21 ADMINISTRATION OFFICES									No
2980 SOUTHAMPTON- BYBERRY PHILADELPHIA, PA 19154		PA							
DECISION DISTRIBUTION									No
33 S DELAWARE AVE YARDLEY, PA 19067		РΑ							

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DELTA DRYWALL				or trust)				Yes	No No
430 COMMERCE LANE WEST BERLIN, NJ 08091		LN							
DGF TA EASTERN SOLAR GLASS		ΝJ							No
PO BOX 171 WEST BERLIN, NJ 08091		NJ							
DISTRICT COUNCIL 78 OA P O BOX 140173		FL							No
ORLANDO, FL 32814 DMR CONSTRUCTION OA									No
4937 NATIONAL STREET PHILADELPHIA, PA 19135		PA							
DOOR DEVICE INC 526 GLEN AVE LAUREL SPRINGS, NJ		ĽΝ							No
08021 DUGGAN & MARCON INC OA									No
3400 HIGH POINT BOULEVARD BETHLEHEM, PA 18017		РА							
DUPUY CONSTRUCTION SERVICES 25 SOUTH MAIN ST 5		PA							No
YARDLEY, PA 19067 DV CONSTRUCTION SERVICES									No
942 BLACK ROCK ROAD GLADWYNE, PA 19035		PA							
DVHCC 2980 SOUTHAMPTON ROAD PHILADELPHIA, PA 19154		PA							No
EAST COAST WALL SYSTEMS LLC									No
101 STACY HAINES ROAD LUMBERTON, NJ 08048		ľΩ							
EASTERN WINDOW SPECIALISTS 520 N HIGHLAND AVE YORK, PA 17404		РА							No
EDI WALLCOVERING									No
111 PARK DRIVE MONTGOMERYVILLE, PA 18936		PA							
ELITE PAINTING 204 BELLA DRIVE BROOMALL, PA		РА							No
19008 ENCLOS CORP OA									No
10733 SUNSET OFFICE DR ST LOUIS, MO 63127 ENVIRO PAINT LLC		МО							No
6 PRINCE STREET BORDENTOWN, NJ 08505		ΙN							No

Form 990, Schedule R, Part IV - Identificat						l (~)	l (b)	l as	
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EQUAL CONSTRUCTION				or crusty				Yes	No No
2308 N 25TH STREET PHILADELPHIA, PA 19132		PA							
EQUINOX MANAGEMENT & CO									No
1535 N SYDENHAM ST PHILADELPHIA, PA 19121		PA							
EUREKA METAL & GLASS									No
9070 STATE ROAD PHILADELPHIA, PA 19136		PA							
FASTRACK CONSTRUCTION									No
175 COMMERCE DRIVE FT WASHINGTON, PA 19034		PA							
FEDERAL PAINTING OA									No
45915 MARIES ROAD STERLING, VA 20166 FINE GROUP		VA							No
1160 RT 22 WEST MOUNTAINSIDE, NJ 07092		NJ							
FLORIDA GLASS OF TAMPA BAY INC		FI							No
13929 LYNMAR BLVD TAMPA, FL 33626 FLORKOWSKI		FL							No
BUILDERS									110
2725 E CAMBRIA STREET PHILADELPHIA, PA 19134		PΑ							
FLUOR MAINTENANCE SERVICE		LA							No
240 DALWILL ST MANDEVILLE, LA 70471									
FRANK LUTTER INC PO BOX 58		РА							No
AMBLER, PA 19002 FRANK R LAMARRA BLDING & CONST									No
959 EAST MAIN STREET NORRISTOWN, PA		PA							
19401 FREEDOM GLASS &									No
METAL P O BOX 868		ιN							
CLEMENTON, NJ 08021									
FROMKIN BROS INC OA		N/3							No
125 CLEARVIEW ROAD EDISON, NJ 08818		NJ							
G C ZARNAS & CO INC									No
850 JENNINGS ST BETHLEHEM, PA 18017		PΑ							
G M I CONTRACTORS 2014 FORD ROAD		РА							No
UNIT A BRISTOL, PA 19007									

Form 990, Schedule R, Part IV - Identifica								1	
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GENERAL METAL &				or trust)				Yes	No No
GLASS COMPANY 613 KAIGHN AVENUE		ĽΝ							
CAMDEN, NJ 08103 GERHARD CONTRACTING OA									No
565 W WASHINGTON		PA							
ST WERNERSVILLE, PA		1.0							
19565 GERONIMO PAINTING OA									No
P O BOX 418 LISBON, OH 44432		ОН							
GLASS ARTISTRY									No
862 YARDVILLE- ALLENTOWN R HAMILTON, NJ 08620		ĽΝ							
GLASS ERECTORS									No
PO BOX 216 REYNOLDSVILLE, PA 15851		РΑ							
GLAZING CONCEPTS									No
1741 WOODHAVEN DRIVE BENSALEM, PA 19020		PA							
GOLDBERG GLASS CO OA									No
635 ELIZABETH AVENUE ELIZABETH, NJ 07206		NJ							
GORDON'S GLASS									No
1525 STUCKERT ROAD WARRINGTON, PA 18976		PA							
GRABOYES COMMERCIAL WINDOW									No
4050 S 26TH ST PHILADELPHIA, PA 19112		PA							
GRACIE PAINTING LLC									No
1222 E COLUMBIA AVE 24 PHILADELPHIA, PA 19125		РΑ							
GRAHAM PAINTING									No
7144 WISSINOMING STREET PHILADELPHIA, PA		РА							
19135 GREENWICH GLASS								+	No
392 MEGAN DRIVE MICKLETON, NJ		ľΩ							
08056 GUILD MATERIAL APPLICATION INC									No
721 SHELBOURNE ROAD		РА							
READING, PA 19606 GUTHRIE GLASS & MIRROR									No
1402 DOUGHTY ROAD EGG HARBOR, NJ 08234		ľΩ							
GUY C LONG INC								1	No
809 MONTBARD DR WEST CHESTER, PA 19382		PA							

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HAGEN				or trust)				Yes	No No
CONSTRUCTION		PΑ							
2207 STATE ROAD BENSALEM, PA 19020 HARRISBURG GLASS									No
P O BOX 3250 SHIREMANSTOWN, PA 17011		PA							
HEARTWOOD BUILDING GROUP		PΑ							No
4 SUMMIT PLACE PHILADELPHIA, PA 19128									
HELBLING BROS INT									No
140 FRANKLIN AVE CHELTENHAM, PA 19012		PΑ							
HERCULES PAINTING COMPANY									No
1102 SAMPSON STREET NEW CASTLE, PA _16101		РΑ							
HERCULESVIMAS PNTG JV LLC OA									No
1102 SAMPSON ST NEW CASTLE, PA 16101		PA							
HERSHOCKS INC									Νo
P O BOX 5800 HARRISBURG, PA 17110		PA							
HISPANIC VENTURES									No
100 N PHILADELPHIA, PA 19103		PA							
HMS INTERIORS INC									No
380 THREE TUN ROAD MALVERN, PA 19355		PA							
HORTON AUTOMATIC DOOR		PΑ							No
PO BOX 861 LANSDALE, PA 19446									N I-
HUTT'S GLASS CO 101 LIMEKILN PIKE BECHTELSVILLE, PA 19505		РА							No
IBPAT DISTRICT COUNCIL 51									No
6009 OXON HILL ROAD OXON HILL, MD 20745		MD							
IJS								1	No
10 HUNT ROAD LEVITTOWN, PA 19056		PA							
IMAGEONE INDUSTRIES									No
677 DUNKSFERRY ROAD BENSALEM, PA 19020		РΑ							
INTEGRITY INTERIORS									No
280 BELLA LANE KING OF PRUSSIA, PA 19406		РΑ							

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INTERIOR INSTALLATION SRVCS OA		WI		OI trase,	-			Yes	No No
PO BOX 10236 GREEN BAY, WI 54307 IUPAT DC 21 BENEFIT			<u> </u>		<u> </u>	<u> </u>			No
OFFICE 2980 SOUTHAMPTON		PA			!	!			No
ROAD PHILADELPHIA, PA 19154 J & G ACOUSTICAL					<u> </u>	<u> </u>			No
CO 118 SLEEPY HOLLOW DRIVE MIDDLETOWN, DE		DE			!				
19709 J J WHITE INC								+	No
5500 BINGHAM ST PHILADELPHIA, PA 19120		PA			!	!			
JADE PAINTING ENTERPRISE					!				No
1230 E COLUMBIA AVENUE PHILADELPHIA, PA 19125 JAG'D		PA	!		!				No
CONSTRUCTION 545 COITSVILLE HUBBARD RD YOUNGSTOWN, OH		он			!				
JAMES HARPER PAINTING			-					+	No
332 TRENTON RD FAIRLESS HILLS, PA 19030		PA			!	!			
JANGHO CURTAIN WALL AMERICAS 551 ECCLES AVENUE		CA							No
SAN FRANCISO, CA 94080 JMR COMMERCIAL					<u> </u>	<u> </u>			No
INTERIORS 68 CATSWAMP RD HACKETTSTOWN, NJ		ŊĴ			!	!			
07840 JOHN CANNING & CO LTD(OA)		СТ				-		+	No
150 COMMERCE CT CHESHIRE, CT 06410 JOHN S MC MANUS			<u> </u>			<u> </u>			No
INC 9 SMITHBRIDGE ROAD CHESTER HEIGHTS, PA 19017		РА							
JOHN WEBER INC 4718 A STREET PHILADELPHIA, PA		PA							No
19120 JOSEPH JINGOLI & SONS	-					<u> </u>	-		No
100 LENOX DRIVE LAWRENCEVILE, NJ 08648		ľΩ							
JUPITER PAINTING CO		PA							No
1500 RIVER ROAD CROYDON, PA 19021 KAY & SONS					'				No
56 BUTTONWOOD STREET NORRISTOWN, PA 19401		PA							

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KCCI - KATZIANER				or trust)				Yes	No No
CONSTRUCTION		D.A							
1420 EASTON ROAD WARRINGTON, PA _18976		РΑ							
KEYSTONE ALUMINUM & GLASS									No
CO		PA							
474 PIKE ROAD HUNTINGDON									
VALLEY, PA 19006 KUEHNLE-WILSON									No
INC 555 COMMERCE		PΑ							
DRIVE YEADON, PA 19050									
LA GLASS AND DOOR									No
343 SUPERIOR ROAD EGG HARBOR, NJ		NJ							
08234 LAKEVIEW									No
CONSTRUCTION OA									No
10505 CORPORATE DRIVE		WI							
PLEASANTPRAIRIE, WI 53158									
LANDCO INC									No
3027 TEESDALE STREET		РА							
PHILADELPHIA, PA 19152									
LATINO PAINTING COMPANY									No
45 E CITY AVE		РА							
BALA CYNWYD, PA 19004									
LEAKS CONSTRUCTION LLC									No
OA									
175 COMMERCE DRIVE		PA							
FT WASHINGTON, PA 19034									
LENICK CONSTRUCTION									No
1994 YORK ROAD		PA							
JAMISON, PA 18928 LIBERTY MAIN-ALPHA									No
PAINT A JV									
777 N MERIDIAN ROAD		ОН							
YOUNGSTOWN, OH 44509									
LIBERTY-ALPHA JV									No
777 N MERIDIAN ROAD		ОН							
YOUNGSTOWN, OH 44509									
LIBERTYALPHA JV									No
6800 QUAD AVENUE BALTIMORE, MD		MD							
21237 M SCHNOLL & SONS									No
3151-69 WEIKEL		PA							
STREET PHILADELPHIA, PA									
M GORDON & SONS									No
P O BOX 2735		PA							
HARRISBURG, PA 17105									
MACY'S PAYROLL									No
9111 DUKE BOULEVARD		ОН							
MASON, OH 45040	1			I	I			1	I

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MADISON HEIGHTS	 	 		or trust)	-	 	-	Yes	No No
GLASS 2020 BURDETTE STREET		MI			!				
FERNDALE, MI 48220	 	 	<u> </u>			 		 '	NO
MADISON LTD OA 4040 RED BLUFF	1	тх			,	1		'	No
PASADENA, TX 77503 MAINLAND GLASS CO	 	 '	<u> </u>		,	 			No
53 E WEST JERSEY AVE		ΝJ			'				
PLEASANTVILLE, NJ 08232 MANGO & VACARINO	<u> </u>	<u> </u>	<u> </u>			 		<u> </u> '	I NIO
MANGO & VACARINO PAINTING	1				,	1		'	No
1411 GRAMS WAY GARNET VALLEY, PA 19060		PA			!				
MANSFIELD BROTHERS	'	Ţ	1		,	Ţ] '	No
311 SUMNEYTOWN PIKE NORTH WALES, PA 19454		РА			'				
MARINIS BROS INC	 			<u> </u>	 	<u> </u>		+	No
755 GRANTHAM LN NEW CASTLE, DE 19720		DE						_ '	
MARY CLEARY DRYWALL & CORP	,	·	7		,	1			No
2432 ARLINGTON AVE		PA			'	'			
ABINGTON, PA 19001 MASON BUILDING	 	 	 	+		 	+	+	No
GROUP	1	DE	1		,	1		'	
35 ALBE DRIVE NEWARK, DE 19702 MBA ENTERPRISES-	<u> </u>	<u> </u>	<u> </u>			 		<u> </u> '	No
MBA ENTERPRISES- HAGEN CNST LLC	1	PA	1		,	1		'	NO
2207 STATE ROAD BENSALEM, PA 19020								'	
MC CARL'S INC OA	,		'		,	'		T '	No
1413 NINTH AVENUE BEAVER FALLS, PA 15010		PA							
MC DONALD PAINTING	,		1		,	1		T '	No
12301 MCNULTY RD UNIT E PHILADELPHIA, PA		PA			'				
MC LAUGHLIN	 		<u> </u>		-	 		+	No
ERECTORS 3502 COLUMBIA MEMORIAL PK		тх			'				
KEMAH, TX 77565 MCD	 	 '	 			 	-	 '	No
2432 ARLINGTON AVE		PΑ			1			'	
ROSLYN, PA 19001 MCS STRUCTURES OA	 	 	 			+'	1	+	No
P O BOX 547 BROOMALL, PA 19008		РА			!				
MELROSE ENTERPRISES					<u> </u>	1		+ +	No
130 DICKERSON	1	PA	1		,	1		'	
ROAD NORTH WALES, PA 19454		1			1	1		'	
4									

related organization domicile controlling entity income of-year ownership 512 (state or foreign entity (C corp, S assets controlling entity)	(i) action (b)(13) trolled atity? SS No No
MERCHANT CONSTRUCTION CO 160 EMERSON STREET WOODBURY, NJ 08096	No
160 EMERSON STREET WOODBURY, NJ 08096	No
OVERHEAD DOORS NJ 220 KAIGHIN AVE CAMDEN, NJ 08103	l l
METAL ALLIANCE INC	No
424 PIKE ROAD HUNTINGTON VALLEY, PA 19006	
METALAN ERECTORS INC	No
51 BARRY RD CHALFONT, PA 18914 METRO GLASS & METAL PA	No
60 FALCON DRIVE CHALFONT, PA 18914 METRO GLASS INC	No
100 JERSEY AVENUE NEW BRUNSWICK, NJ 08901	
MGM INDUSTRIES 6835 GREENWAY AVE PHILADELPHIA, PA 19142	No
MISSOURI VALLEY GLASS CO	No
3080 ELM POINT INDUSTRIAL ST CHARLES, MO 63301	
MODERN MIRROR & GLASS CO	No
20809 KRAFI BLVD ROSEVILLE, MI 48066	
MORRISON PAINTING 784 PARK ROAD LANSDALE, PA 19446	No
MOSER CUSTOM CONSTRUCTION LLC	No
425 DELAWARE AVENUE HELLERTOWN, PA 18055	
MOUNT WELL CONSTRUCTION	No
421 WHITE HORSE PIKE HADDON HEIGHTS, NJ 08035	
MVP INTERIORS PO BOX 94 WILLIAMSTOWN, NJ	No
08094 NATIONAL GLASS & METAL CO INC	No
1424 EASTON ROAD HORSHAM, PA 19044	
NESMITH & COMPANY INC	No
2440-48 TASKER STREET PHILADELPHIA, PA 19145	

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NEW CENTURY BUILDING SYSTEMS				or crusty				Yes	No No
P O BOX 875 GLASSBORO, NJ 08028		ĽИ							
NEWMAN GLASS & METAL									No
1515 HADDON AVE CAMDEN, NJ 08103 NORTH AMERICAN CONSTR OA		LИ							No
3491 N MARYLAND AVE		WI							
MILWAUKEE, WI 53211									
NORTH EAST CONTRACTORS		DE							No
87 BLUE HEN DRIVE NEWARK, DE 19713		DE							
NORTHWOOD CONSTRUCTION CO INC									No
70 COMMERCE DRIVE WARMINSTER, PA 18974		РА							
NOVINGERS INC									No
1441 STONERIDGE DRIVE MIDDLETOWN, PA		PA							
17057 OCEAN CNTY GLASS& METAL LLC OA									No
426 HERBERTSVILLE ROAD BRICK, NJ 08724		ĽΩ							
OCM CONSTRUCTION									No
203 MAIN ST 204 FLEMINGTON, NJ 08822		ĽΝ							
ODYSSEY PAINTING CO INC OA									No
P O BOX 7 HOUSTON, PA 15342		PA							
ODYSSEY-GERONIMO JV		PA							No
P O BOX 1888 HOUSTON, PA 15317									
OFFSHORE GLASS 40 OLD TURNPIKE PLEASANTVILLE, NJ		ľ							No
08232 ONE-PIECE DRYWALL								+	No
INC 3324 N ROCKFIELD DRIVE WILMINGTON, DE		DE							
19810 PRABINOWITZ GLASS									No
1401-15 NORTH AMERICAN ST PHILADELPHIA, PA 19122		PA							
PAINTING INDUSTRY INS FND OA									No
45 WEST FOURTEENTH STREET NEW YORK, NY 10011		NY							
PALESTINI WALLCOVERING INC		NJ							No
35 PLUMSTEAD ROAD SEWELL, NJ 08080									

Form 990, Schedule R, Part IV - Identificat						1 ,	1 45	1 45	-
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	ıncome	(g) I Share of end- of-year assets	(h) - Percentage ownership	(i) Section 512(b)(control entity	ion)(13) olled ty?
PANTHERA PAINTING	+	-		Of trust,		 	-	Yes	No No
333 MORGANZA RD CANONSBURG, PA 15317		РΑ			<u> </u>				
PAPER MASTER LLC	1				<u> </u>	<u> </u>		+	No
323 ELTON LANE GALLOWAY, NJ 08205 PAUL LABADIE		ĽΝ			<u> </u>	<u> </u>			No
131 LARK DRIVE HOLLAND, PA 18966		РΑ							140
PAUL RESTALL COMPANY JS					1	1			No
PO BOX 250 SWARTHMORE, PA 19081		PA							
PENN ACOUSTICS INC	1	-						+	No
551 EASTON RD WARRINGTON, PA 18976		PA							
PERMASTEELISA CLADDING TECH		СТ			 			+ +	No
123 DAY HILL ROAD WINDSOR, CT 06095			!		'	'		!	
PGW 30 ISABELLA STREET PITTSBURGH, PA		PA							No
15212 PHA	+	<u> </u>	<u> </u>			 		+	No
1800 SOUTH 32ND STREET PHILADELPHIA, PA 19145		РА							
PHA - GLAZIERS 1800 SOUTH 32ND ST PHILADELPHIA, PA		PA			1				No
19145 PHA PAINTER		-	 		 '	 		+'	No
GLAZIER & DRYWALL		D.A.	1			1		'	
1800 SOUTH 32ND STREET PHILADELPHIA, PA 19145		PA							
PHILA CARPENTRY SYSTEMS		1			1				No
509 VINE ST PHILA, PA 19106		РА	1			1		'	
PHILA, PA 19106 PHILADELPHIA D & M INC	1	<u> </u>			 			+	No
500 DAVIS DRIVE PLYMOUTH MEETING, PA 19462		PA							
PONNS & CO INC	·		<u>'</u>		<u> </u>	,		† †	No
P O BOX 368 ESSINGTON, PA 19029		PA							
POTTSGROVE GLASS CO		1			1	1			No
480 SWAMP PIKE SCHWENKSVILLE, PA 19473		PΑ	1		<u> </u>				
PRECISION GLASS TINT	1		1		1	7		+	No
155 POWELL PLACE ROAD TABERNACLE, NJ		ίΝ							
08088	1	1	1	1	1 '	1 '	1	'	'

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PREMIUM PAINTING				or cruse)				Yes	No No
5317 DELMAR DRIVE CLIFTON HEIGHTS, PA 19018		PΑ							
PRO GREEN PAINTING LLC									No
P O BOX 18 NORRISTOWN, PA 19404		РА							
PRP SERVICES									No
108 ARROWHEAD PARK DRIVE BRICK, NJ 08724		NJ							
R A KENNEDY & SONS									No
245 BRIDGEWATER ROAD ASTON, PA 19014		PΑ							
RALPH E JONES INC									No
P O BOX 1933 HARRISBURG, PA 17105		PA							
RECORD-USA INC									No
4324 PHIL HARGETT CT		NC							
MONROE, NC 28110 REDEVELOPMENT AUTHORITY OA									No
OF PHILADELPHIA PHILADELPHIA, PA 19107		PΑ							
REGAL PAINTING CO									No
45 NOCENTINO DRIVE SWEDESBORO, NJ 08085		ΓN							
REILLY GLAZING									No
200 E WASHINGTON STREET NORRISTOWN, PA 19401		РА							
RETAIL STOREFRONT GROUP									No
PO BOX 1070 LEEDS, AL 35094		AL							
REVO INDUSTRIES									No
300 E LANCASTER AVE WYNNEWOOD, PA 19096		PA							
RITTER CONTRACTING									No
103 HIDDEN COVE DRIVE CHURCHVILLE, PA		PA							
18966 ROBERT SEAN CONSTRUCTION									No
921A BETHLEHEM PIKE		PΑ							
AMBLER, PA 19002 S & S PAINTING								+	No
WALLCOVERING GLADWYNE, PA 19035		PΑ							
SALVO									No
CONSTRUCTION INC PO BOX 8204		NJ							
CHERRY HILL, NJ 08002									

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SCENIC GLASS INSTALLATION CORP				,				165	No
2 SHORE TERRACE BARNEGET, NJ 08005		NJ							
SEAMLESS FLOORING SOLUTION INC		PA							No
331 MAPLE AVE HORSHAM, PA 19044									
SENATE GLASS & ALUMINUM COMPAN		PA							No
604 SALEM RD ETTERS, PA 17319									
SERVICE PAINTING INC		PA							No
P O BOX 433 MARCUS HOOK, PA 19061		PA							
SHAFFER & DESOUZA									No
17 MIFFLIN AVENUE HAVERTOWN, PA 19083		PA							
SHANNON PLASTERING & DRY									No
CARRIAGE HOUSE CINNAMINSON, NJ 08077		NJ							
SHOOSTER DEVELOPMNT		PA							No
P O BOX 349 MEDIA, PA 19063									
SIOUTIS COATING ENTERPRISES									No
406 NORTH SPROUL ROAD BROOMALL, PA 19008		PA							
SKYLIGHT CONSLTNTS OF AMER									No
3409 W PERRY STREET INDIANAPOLIS, IN 46221		IN							
SKYTECH CONTRACTORS INC									No
P O BOX 309 MONTGOMERYVILLE, PA 18936		PA							
SMITH CONSTRUCTION CO		PA							No
3331 STREET ROAD BENSALEM, PA 19020 SNOW GLASS									No
132 E BLACKWELL ST DOVER, NJ 07801		ľΩ							
SPECIALTY WOODWORK									No
1383 LAKE ROAD FEASTERVILLE, PA 19053		PA							
SPECTRUM ARENA LP									No
BROAD ST PATTISON PHILADELPHIA, PA 19148		PA							
SPECTRUM PAINTING CORP OA									No
200 SUMMERFIELD STREET SCARSDALE, NY 10583		NY							
10303	I	I	ı	I	I		ı	ı	I

Form 990, Schedule R, Part IV - Identifica						l (>	l (15)	1 (5)	
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STANLEY ACCESS TECHNOLOGIES				or crusty				Yes	No No
65 SCOTT SWAMP ROAD FARMINGTON, CT 06032		СТ							
STENTON CORPORATION		PA							No
P O BOX 456 ESSINGTON, PA 19029									
STERLING GLASS DUAL PANE INC		NY							No
1415 NIGARA STREET BUFFALO, NY 14213 STONE ROOTS INC		TV I							No
114 MOUNTAIN VIEW ROAD ENOLA, PA 17025		PA							
STONEYBROOK PAINTING									No
44 SCHOOLHOUSE LN LEVITTOWN, PA 19055		PA							
STOREFRONT SYSTEMS INC		PA							No
55 BROOK DRIVE HOLLAND, PA 18966 SYNERGY GLASS AND									No
DOOR 1116 MACDADE BLVD		PA							
COLLINGDALE, PA 19023									
T III ENTERPRISES INC PO BOX 119		PA							No
HORSHAM, PA 19044 T D PATRINOS PAINTING OA									No
3191 INDUSTRIAL		PA							
BLVD BETHEL PARK, PA 15102									
TANGLEWOOD PAINTING									No
278 BRIDGEWATER ROAD BROOKHAVEN, PA		РА							
THE PHILLIES									No
CITIZENS BANK PARK PHILADELPHIA, PA 19148		PA							
THE RIFF GROUP									No
100 SCHELL LANE PHOENIXVILLE, PA 19460		РА							
THOMAS BUILDING GROUP		DE							No
35 ALBE DRIVE NEWARK, DE 19702									
THOMAS J BURLEIGH PAINTING INC		PΑ							No
228 DORA AVE HORSHAM, PA 19044 THOMPSON GLASS &									No
MIRROR									INU
96 NORTH BEVERWYCK ROAD LAKE HIAWATHA, NJ 07034		NJ							

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TINT-PRO INC				or crusty				Yes	No No	
400 W MAIN ST COLLEGEVILLE, PA 19426		РА								
TITAN OUTDOOR LLC									No	
100 PARK AVE NEW YORK, NY 10017 TORRADO		NY							No	
CONSTRUCTION CO										
3311-13 EAST THOMPSON ST PHILADELPHIA, PA 19134		PA								
TREND PAINTING									Νo	
PO BOX 811 DOYLESTOWN, PA 18901		PΑ								
TRITECH									Νo	
328 STONYHILL DRIVE CHALFONT, PA 18914		PA								
TYCON CONSTRUCTION LLC									Νo	
1250 BETHLEHEM PIKE HATFIELD, PA 19440		PΑ								
TYSZKA WALLCOVERING									No	
2569 B HUNTINGDON PIKE HUNTINGDON		PA								
VALLEY, PA 19006 U S GLASS & METAL									No	
INC 3415 WEIKEL STREET PHILADELPHIA, PA 19134		РА								
UNION COUNTY CONSTRUCTION									No	
GROU		NJ								
638 CHERRY STREET GLOUCESTER CITY, NJ 08030		143								
UNION COUNTY GLASS OA									Νo	
P O BOX 927 ELIZABETH, NJ 07201		NJ								
UNITED AMERICAN BUILDERS INCOA									No	
205 ARCH STREET PHILADELPHIA, PA 19106		PA								
VAN HAWK PAINTING									No	
331 MAPLE AVENUE HORSHAM, PA 19044		PA								
VICTORY PAINTING LLC									No	
PO BOX 12585 PHILADELPHIA, PA 19151		РΑ								
VINCENT POOLS INC									No	
1823 DEEP RUN ROAD PIOPERVILLE, PA 18947		PA								
VINELAND GLASS		.							No	
921 LANDIS AVENUE VINELAND, NJ 08360		ι								

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W & W GLASS SYSTEMS		NY		,				les	No
300 AIRPORT EXECUTIVE PAR NANUET, NY 10954 WELLCRAFT									No
CONSTRUCTION CO 180 NEW ROAD		PΑ							No
SOUTHAMPTON, PA 18966 WILLET STAINED GLASS STUDIOS									No
P O BOX 587 WINONA, MN 55987		MN							
WILLIAM STEELE & SONS 400 STENTON		PA							No
AVENUE PLYMOUTH MEETING, PA 19462		FA							
WILLIAMS SPECIALTY SERVICE 100 CRESCENT		GA							No
CENTRE PKWY TUCKER, GA 30084 WILLIAMSPORT									No
MIRROR & GLASS CO 317 RAILWAY STREET WILLIAMSPORT, PA		РА							
17701 WINDERCO INC OA									No
908 NORTHWOOD AVENUE CHERRY HILL, NJ 08002		NJ							
WINDOW REPAIRS & RESTOR OA 10 FOREST DRIVE		NJ							No
GLASSBORO, NJ 08028 WM PROUD MASONRY RESTORATION									No
2610 N AMERICAN ST PHILADELPHIA, PA 19133		PA							
WOLFE SCOTT ASSOCIATES		PA							No
2522 SOUTH STREET PHILADELPHIA, PA 19146 WORLDWIDE LABOR									No
SUPPORT INC OA 1416 INGALIS		MS							NO
AVENUE PASCAGOULA, MS 39569 WYATT INC									No
4545 CAMPBELLS RUN ROAD PITTSBURGH, PA 15205		PA							NO
ZACK PAINTING COMPANY									No
900 KING GEORGES ROAD FORDS, NJ 08863		NJ							
ZMS ARCHITECTURAL METAL 142 FRANKLIN ST		NJ							No
ELWOOD PARK, NJ 07407									

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493058004104 OMB No 1545-0172 Depreciation and Amortization (Including Information on Listed Property) Department of the Treasury Internal Revenue Service (99) See separate instructions. ► Attach to your tax return. Sequence No 179 Business or activity to which this form relates **Identifying number** Name(s) shown on return FORM 990 PAGE 10 IUPAT DISTRICT COUNCIL NO 21 JOB RECOVERY FUND 23-2860609 **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Total cost of section 179 property placed in service (see instructions) • • • • • • 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,000,000 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- · · · · · · · Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married 5 (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 6 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 Tentative deduction Enter the smaller of line 5 or line 8 · · · · · · · · 9 Carryover of disallowed deduction from line 13 of your 2011 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2013 Add lines 9 and 10, less line 12 . | 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 MACRS Depreciation (Do not include listed property.) (See instructions.) MACRS deductions for assets placed in service in tax years beginning before 2012 · · · · · · If you are electing to group any assets placed in service during the tax year into one or more general Section B—Assets Placed in Service During 2012 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (g)Depreciation year placed in (business/investment (e) Convention (f) Method deduction period property service only—see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property S/L g 25-year property 25 yrs 27 5 yrs MM S/L h Residential rental property 27 5 yrs ΜМ S/L ΜМ i Nonresidential real 39 yrs property ΜМ Section C—Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L **c** 40-year MMS/L 40 yrs **Summary** (see instructions) Part IV 21 Listed property Enter amount from line 28 · · · · · · · · · · · · 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions • • 22 0 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Part V

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

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. **epreciation and Other Information (Caution:** See the instructions for limits for passenger automobiles.

24a Do you have evider	nce to support	the business/inve	stment ι	ıse claıme	d? ┌ Yes	Гпо		24	lb If "Y	es," is	the ev	idence	written?	,	s L	0
(a) Type of property (list vehicles first)	(b) Date placed in service	n investment Cost o		t) r other isis (e) Basis for depri (business/inve use only		deprecia s/investr		(f) Recovery period	(g) ry Method/ Convention		(h) Depreciation/ deduction				(i) Elected section 179 cost	
25Special depreciation allo		• •	y placed	ın service	during the	tax year	and u	used more	e than							
50% in a qualified busi	•	•								25						
26 Property used more	e than 50% I	in a qualified bi	usiness	use	T			1			1					
		%									+			+		
		%														
27 Property used 50%	orless in a		ness us	е					lo /i		_					
		%							S/L - S/L -		+			\dashv		
		%							S/L -		+			┪		
28 Add amounts in co	olumn (h), lır	nes 25 through	27 En	ter here	and on lu	ne 21,	page	1	28							
29 Add amounts in co	olumn (ı), lın	e 26 Enterhei	e and o	n line 7,	page 1								29			
	(),				mation	on U	se d	of Veh	icles				<u>'</u>			
omplete this section	for vehicles	used by a sole	propri	etor, par	tner, or o	ther "n	nore	than 5%	owne	r," or	relate	ed per	son			
f you provided vehicles to	your employee	es, first answer the	e questio		_			n except		mpletir T						
30 Total business/inv			ng the	(a) (b) Vehicle 1 Vehicl				(c) 2 Vehicle 3			(d) Vehicle 4			e) icle 5	(f) 5 Vehicle 6	
year (do not inclu	de commutir	ng miles) .	•	Venicle 1		Venicle 2					• • • • • • • • • • • • • • • • • • • •		1		s 5 Vellicle (
31 Total commuting i	miles driven	during the yea	r .													
32 Total other persor	nal(noncomm	nutina) miles di	riven										+			
33 Total miles driven	•							-		-+			+			
through 32	· · ·	· · ·														
34 Was the vehicle a	vaılable for p	ersonal use		Yes	No	Yes	No	Yes	N	0 1	es/	No	Yes	No	Yes	No
during off-duty hours?																
35 Was the vehicle u	sed primarily	y by a more tha	n 5%													
owner or related p	erson? .													↓		
36 Is another vehicle	available fo	r personal use	?.													
Section Sectio	ns to determ														not mo	re tha
37 Do you maintain a employees?			nat prof	nibits all	personal	use of	vehi	cles, in	cluding	comr	nutın	g, by	your	Y	'es	No
employees.			• • •			• •	•		• •			•				
38 Do you maintain a employees? See the												your •				
39 Do you treat all us	e of vehicles	s by employees	s as per	rsonal us	se?											
40 Do you provide movehicles, and reta				oyees,o	btaın ınfo	rmatio	n fro	m your	employ	ees a	bout	the us	se of			
41 Do you meet the r	eauırements	concernina au	alıfıed a	automob	ıle demor	nstratio	n us	e? (See	ınstru	ctions) .					
Note: If your answ	-							=			-					
	rtization	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	15 1 6.	, do 110	e compre			7 101 1110			110100					
Allio	T CIZACIOII	(b)	T		_	Т			Т	(e)						
(a)		Date		(c) A mortızable			(Αn	A mortizati			Λmo	(f) irtizati	on for	
Description of c	l l							ection I .		period			this ye			
40.4		begins	2015		,	<u>_</u>			Įρε	ercent	aye					
42 A mortization of co	sts that beg	ins auring you	7 2012	tax year	(see ins	tructio	1S)				-					
			+													
										<u> </u>						
43 A mortization of co	_	•		•			•			· _	43					
44 Total. Add amount	ts ın column	(f) See the ins	tructio	ns for wh	nere to re	port				.	44					