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Form **990**

.e Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

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

Open to Public Inspection

A F	For the	e 2012 calendar year, or tax year beginning JUL 1, 2012 and ending	<u>JUN 30, 20</u>)13	
В	Check if	C Name of organization	D Employer ide	entification number	
ē	applicab	" UNITED ASSOCIATION OF JOURNEYMEN AND 210			
	Addre	SS LOCAL			
┌	Name chang		٦,	5-2116536	
⊨	Initial	Number and street (or P.O. box if mail is not delivered to street address) Room/s			
\vdash	return Termii	· •			I
<u> </u>	ated Amen	2901 EAST OURD FLACE		219)942-7224	
<u></u>	lreturn	City, town, or post office, state, and ZIP code	G Gross receipts \$	/10,	331.
<u> </u>	Application pendication	I MEKKIDDAIDDE, IN #0410	H(a) is this a gro		
	pendi	F Name and address of principal officer:DAVID MISCH	for affiliates	r?	X No
_		2901 E. 83RD PLACE, MERRILLVILLE, IN 4641	O H(b) Are all affiliat	es included? Yes [No
1.	Tax-ex	empt status 501(c)(3) 501(c)(5) ◀ (insert no.) 4947(a)(1) or	527 If "No," atta	ach a list. (see instructi	ons)
		te: ► PLUMBERSLOCAL210.ORG		nption number 🕨 02	
		organization: Corporation Trust Association X Other ► LABOR L Y			
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<u></u>	_		TNIAME TABOL	R MATTERS AN	m
9	1	· · · · · · · · · · · · · · · · · · ·		MAIIERS AD	<u> </u>
Governance		TO ADMINISTER TO ANY LABOR PROBLEMS OF MEMBE			
err	1	Check this box If the organization discontinued its operations or disposed of n	nore than 25% of its r	net assets.	4-
ò	3	Number of voting members of the governing body (Part VI, line 1a)		3	<u> 17</u>
ص ح	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	14
S	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	5
Activities	6	Total number of volunteers (estimate if necessary)		6	0
Ė	1	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
	1	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
20∰	─ ~	The difficulties taxable moonly from 1000 1, and 04	Prior Year	Current Ye	
7		Contributions and grants (Dart VIII June 11)	riioi reai	0.	0.
JAN 9 7	1	Contributions and grants (Part VIII, line 1h)	650,61		889.
e စု	1	Program service revenue (Part VIII, line 2g)			
₽ĕ	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		02.	321.
록	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	94,87		121.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	745,98		<u>331.</u>
Expenses NED	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,56	55. 3,	300.
ليلا	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
(g)	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	412,32	21. 418,	390.
Se	16a	Professional fundraising fees (Part IX, column (A) TO TO		0.	0.
ě,		Total fundraising expenses (Part IX-column F) une 25 0.	<u> </u>	,	
_ Ж	4,5	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e), (A)	317,12	279	579.
	17		733,01		269.
	18	Total expenses Add lines 13-17 (must equal Part IX) column (A), line (3)			
_ <u>~</u>	19	Revenue less expenses Subtract lines is from line 12	12,97		062.
Net Assets or Fund Balances		Total assets (Part X, line 16) Total line lites (Part X, line 26)	Beginning of Current		
Sset	20	Total assets (Part X, line 16)	916,54		841.
åå. Bet	21	Total liabilities (Part X, line 26)	36,40		<u>636.</u>
<u> </u>	22	Net assets or fund balances Subtract line 21 from line 20	880,14	<u> 13. 889,</u>	<u> 205.</u>
Pa	art II	Signature Block			
Und	ler pena	ilties of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the bes	t of my knowledge and be	lief, it is
		ct, and complete. Declaration of preparer (other than officer) is based on all information of which prep			
	,	David Wisch	Oil	10/2014	
Sia	_	Signature of officer	Date	10 / 20 1	
Sig					
Her	e	DAVID MISCH, BUSINESS MANAGER Type or print name and title			
			Data Tak	eck PTIN	
_	_	Print/Type preparer's name Preparer's signature Preparer's Signature	Date Che Che I Self	<u> Ш</u>	
Paid	đ	BERNARD C. BULLIVAN		employed P012086	
Pre	parer	Firm's name BANSLEY & KIENER, L.L.P.	Firm's Ell	$N_{\triangleright} 36-21523$	189
Use	Only	Firm's address 8745 W HIGGINS			
		CHICAGO, IL 60631	Phone no	0. (312)263-2	2700
May	v the II	RS discuss this return with the preparer shown above? (see instructions)		X Yes	No
`	01 12-1		·- · · · · · · · · · · · · · · · · · ·	Form 99	
2020	· 12-	one leave to the permont reduction not from the sector are instructions.			- 1-0 121

232002 12-10-1 Form **990** (2012)

35-2116536 Page **3**

Part IV Checklist of Required Schedules

endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 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 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 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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11d		•		Yes	No
2 Is the organization required to complete Schedule 8, Schedule of Contributor9 3 Dd the organization engage in direct or indered bothical campagin activities on behalf of or in opposition to candidates for public office? If It'ses, complete Schedule C, Part II 5 Section 801(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(f)) election in effect of the organization as otheric of memory and the program of the organization as otheric of memory and the organization as otheric of memory and the property of the organization as otherical memory and the property of the organization and the property of the organization and the property of the organization of	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	_		
3 Did the organization engage in direct or indirect political campagin activities on behalf of or in opposition to candidates for public citizor 2" l'Yes", complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(f) election in effect during the tax year" II" less, complete Schedule C, Part III Is the organization a section 501(c)(3) organization organization and property of the procedure 98-199 II" l'Yes, complete Schedule C, Part III Is 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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for the presence open pages, the environment, historic land areas, or historic structures? II" Yes, complete Schedule D, Part II Is Did the organization maintain collections of works of art, historical treasures, or other similar assets? If Yes, complete Schedule D, Part II Is Did the organization and amount of Part X, line 21, for escrive or custodial account liability; serve as a custodian for amounts not listed in Part X, in provide credit counseling, debt management, credit repair, or debt negotiation services? If Yes, complete Schedule D, Part V II If the organization savered through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quesiendowments? If Yes, the complete Schedule D, Part V III If the part and the saveration saveration as avoid endowments? If Yes, complete Schedule D, Part X, line 10" If Yes, complete Schedule D, Part V III If		If "Yes," complete Schedule A	_1_		
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4 Section 501(e)(3) organizations. Dot the organization engage in lobbying activities, or have a section 501(e)(4) election in effect during the tax year? if "Yes," complete Schedule C, Part II 5 Is the organization a section 501(e)(4), 501(e)(5), or 501(e)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 if "Yes," complete Schedule C, Part II 6 Did the organization maintain any donor advised funds or any semilar funds or accounts for which denors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 7 Did the organization members or hold a conservation essement, including easements to preserve open space, the environment, histonic land areas, or historic structures? If "Yes," complete Schedule D, Part III 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 9 Did the organization directly of the following questions: If "Yes," complete Schedule D, Part V 10 Did the organization directly of the following questions is "Yes," then complete Schedule D, Part V, VII, VIII, IX, or X as applicable. 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII 11 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII 11 Did the organization report an amount for other assets 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 11 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 VIII 11 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported by Inte	3				
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b Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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 V Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization and control of any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 15? If "Yes," complete Schedule D, Part VIII 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 VIII Line Schedule D, Part XIII Line 16? If "Yes," complete Schedule D, Part XIII Line 16? If "Yes," complete Schedule D, Part XIII Line 16? If "Yes," complete Schedule D, Part XIII Line 16? If "Yes," complete Schedule D, Part XIII Line 16? If "Yes," complete Schedule D, Part XIII Line 16? If "Yes," complete Schedule D, Part XIII Line 16? If "Yes," complete Schedule D, Part XIII Line 16? If "Yes," complete Schedule D, Part XIII Line 16? If "Yes," complete Schedule D, Part XIII Line 16? If Yes," complete Schedule D, Part XIII Line 16? If Yes, and It the organization asheroid secretary to the complete Schedule D, Part XIII Line 18. Did the organization ashool described in sect	•		7		x
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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 VI 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 VI 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. 12 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII 12 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 13 Did the organization report an amount for other assets 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 VII 14 Did the organization report an amount for other assets 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 XI 15 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 XI 16 Did the organization report an amount for other assets in Part X, line 15 If "Yes," complete Schedule D, Part XI 17 Did the organization included in consolidated financial statements for the tax year include a footnote that addresses the organization report an expert in Part X, line 15 If "Yes," complete Schedule D, Part XI 18 Did the organization answered "No" to line 12a, then completing Schedule D, Part XI and XII is optional 13 is the organization and in the organization report on Part IX, column (A), lin	Ü		g		х
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13	b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
14a Did the organization maintain an office, employees, or agents outside of the United States? 14a X 15 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 16 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 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 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 to and 8a? If "Yes," complete Schedule G, Part II 18 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 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		
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complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b			18		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20a X 20b	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b		complete Schedule G, Part III	19		
					X
	<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
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		X
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		Х
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? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1		
	Schedule K. If "No", go to line 25	24a		х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
А	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
Lou	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
J	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			
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
97	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20	 	- 1
27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
		07		х
00	of any of these persons? If "Yes," complete Schedule L, Part III	27	-	A
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	M.		35
	instructions for applicable filing thresholds, conditions, and exceptions)		^	
		28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	-	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00-		v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	<u> </u>	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	l	1	7.
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			3.5
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	l	1	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33_	<u> </u>	X
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_	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X_
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	ļ	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		1	
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
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	X	
		Form	990	(2012)

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Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V		_	<u> </u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 2	ł		:
b		l		
С				
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			1 '
	filed for the calendar year ending with or within the year covered by this return 2a 5	ļ		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	>		!
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a_	<u> </u>	X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
þ	If "Yes," enter the name of the foreign country			,
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	ļ	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c_		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		İ	
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		,	
		7a		
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	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			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	L	<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	_7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g_	ļ	
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	ļ	ļ
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			1
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	7.3a	
9	Sponsoring organizations maintaining donor advised funds.		616	
а	Did the organization make any taxable distributions under section 4966?	9a_	-	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<i></i>	
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b		ĺ		
_	amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	 	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а	·	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	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 13b			
C	Enter the amount of reserves on hand	<u> </u>		v
40	Did the organization receive any nayments for indeer tanning conjects during the tay year?	144-	,	ı ¥

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b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions.

	Check if Schedule O contains a response to any question in this Part VI			\mathbf{x}
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 1	<u>7</u>		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 1	4	1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	~		
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	ļ		
	of officers, directors, or trustees, or key employees to a management company or other person?	3	L	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	<u> </u>	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X_	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			<u> </u> i
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	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		
		11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		- L.70-	
12a		12a		X
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	-	<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	-	7,
13	Did the organization have a written whistleblower policy?	13	1	X
14	Did the organization have a written document retention and destruction policy?	34	-	X
15	Did the process for determining compensation of the following persons include a review and approval by independent	' *		ļ ["]
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		^	·
	The organization's CEO, Executive Director, or top management official	15a		X
a	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	15b	 	^
16-				,
ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	160	-	Х
h	, ,	16a		Α
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		- *
Sec	tion C. Disclosure	100	<u>. </u>	
17	List the states with which a copy of this Form 990 is required to be filed ►IN			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) availah	ole	
10	for public inspection. Indicate how you made these available. Check all that apply	, aranak		
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, a	ind final	ncial	
13	statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	ation •	•	
	DAVID MISCH - (219)942-7224			
_ •	2901 E. 83RD PLACE, MERRILLVILLE, IN 46410			

_

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

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

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.

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

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

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

(list any hours for related organizations below line) (1) DAVID MISCH BUSINESS MANAGER (1) MATT TERRY (Ist any hours for related organizations below line) (3) AVID MISCH 45.00 X (W-2/10) AVID MISCH 45.00	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
BUSINESS MANAGER	from the organization W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
MATT TERRY BUSINESS AGENT			
BUSINESS AGENT	81,481.	. 0.	58,550.
(3) MICHAEL GREENYA 0.50			
X	85,968.	0.	61,336.
(4) SALVADOR ESPINO 0.50 VICE-PRESIDENT X (5) RAYMOND CRAWFORD 0.20 RECORDING SECRETARY X (6) DAVID KOUNTZ 0.20 TREASURER X (7) DANNY GRONENDYKE 0.20 INSIDE GUARD X (8) KEITH KLEINFELDT 0.20 EXECUTIVE BOARD X (9) SCOTT DEGROOT 0.20 EXECUTIVE BOARD X (10) ROBERT DEPYSSLER 0.20 EXECUTIVE BOARD X (11) MARK MOSE 0.20 EXECUTIVE BOARD X (12) MIKE VANDERTUUK 0.20 FINANCIAL BOARD X (13) KEVIN HOOGEVEEN 0.20 FINANCIAL BOARD X (14) ALEX CORIANO 0.20 FINANCIAL BOARD X (15) LEE CULVER 0.20 EXAMINING BOARD X (16) MICHAEL BINDER 0.20			
VICE-PRESIDENT	1,250.	. 0.	576.
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(17) KENNETH DODRILL IR $\begin{bmatrix} 0.20 \\ 1 \end{bmatrix}$	0.	0.	0.
	_		_
EXAMINING BOARD X	0.	0.	0 • Form 990 (2012)

Page 8

ra	TT VII Section A. Officers, Directors, Trus		ploy	ees			ighe	st C	Compensated Employe	es (continued)				
	· (A)	(B)		(C) Position					(D)	(E)				
	Name and title	Average	J (do				h than	one	Reportable	Reportable		E	stimate	эd
		hours per week	box	, unle	ss pe	erson	is bot or/trus	h an	compensation	compensation	1	ar	nount	
		(list any	\vdash	T	Ī		1 1		from the	from related			other	
		hours for	director			İ	l-	ŀ		organization (W-2/1099-MIS			pensa rom th	
		related	5	stee			nsate		(W-2/1099-MISC)	(44-2/1033-1411)	30,		anızat	
		organizations	trustee	al tru		yee	Эш		(** = * * * * * * * * * * * * * * * * *			1 ~	d relat	
		below	Individual	Institutional trustee	 =	Key employee	lest co	늘				org	anızatı	ons
		line)	Ē	as e	Officer	ě,	Highest compensated employee	ᅙ						
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1b	Sub-total		<u> </u>		1		<u> </u>	ŀ	168,699.	-	0.	12	0,4	62
	Total from continuation sheets to Part V	II. Section A							0.		0.		<u> </u>	0
	Total (add lines 1b and 1c)	, 0001.07.71					•		168,699.		0.	12	0,4	
2	Total number of individuals (including but r	not limited to th	ose	liste	ed al	bove	e) wł	no r		.000 of reportab			<u></u>	
	compensation from the organization									,				(
		·											Yes	No
3	Did the organization list any former officer.	, director, or tru	uste	e, ke	y er	nplo	yee,	or	highest compensated e	mployee on				
	line 1a? If "Yes," complete Schedule J for s	such individual										3		X
4	For any individual listed on line 1a, is the si	um of reportab	le co	omp	ensa	ation	and	d otl	her compensation from	the organization				
	and related organizations greater than \$15	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J f	for such individual			4		X
5	Did any person listed on line 1a receive or	accrue compei	nsat	ion f	rom	any	unr unr	elat	ed organization or indivi	dual for services				
	rendered to the organization? If "Yes," con	nplete Schedul	e <i>J f</i>	or s	uch	pers	son					5		X
Sec	tion B. Independent Contractors								,					
1	Complete this table for your five highest co										npens	ation f	rom	
	the organization Report compensation for	the calendar y	ear e	endı	ng v	vith	or w	ıthır	the organization's tax	/ear				
	(A) Name and business	addross		~~~	_				(B) Description of s	00,000	0	()	C) nsatio	_
	Name and business	address	N	ONE	<u> </u>			\dashv	Description or s	ervices		ompe	risatio	. <u>'</u>
								ĺ						
						—-		\dashv						
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2	Total number of independent contractors (i	includina hut n	ot lir	nite	d to	thos	se lis	ted	above) who received m	ore than				
_	\$100,000 of compensation from the organi		""		0)							
										<u>,,</u>		Form	990 (2	2012

UNITED ASSOCIATION OF JOURNEYMEN AND 210 35-2116536 Form 990 (2012) LOCAL Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (C) Unrelated Revenue excluded from tax under (B) Related or Total revenue exempt function business sections 512, 513, or 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f Business Code 484,136. 484,136 2 a ASSESSMENT 900099 Program Service Revenue b DUES 900099 114,747 114,747 RENTAL INCOME 900099 24,000. 24,000. FINES 900099 11,006 11,006 f All other program service revenue 633,889 q Total, Add lines 2a-2f Investment income (including dividends, interest, and 321 321. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less direct expenses - 55 --c Net income or (loss) from fundraising events ▶ 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** <u>62,9</u>83 11 a ADMINISTRATIVE FEE 900099 62,983. 900099 9,119. 9,119 ь DEATH FUND

232009 12-10-12 321

0

4,019.

76,121

900099

d All other revenuee Total. Add lines 11a-11d

c MISCELLANEOUS INCOME

Total revenue. See instructions.

710,

4,019

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX (A) Total expenses (D) Fundraising Do not include amounts reported on lines 6b, Program service Management and 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to governments and 3,300. organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 167,378. 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) 67,179. 7 Other salaries and wages Pension plan accruals and contributions (include <u>122,386</u>. section 401(k) and 403(b) employer contributions) 41,258. Other employee benefits 20,189. 10 Payroll taxes Fees for services (non-employees): Management 175. b Legal 14,400. Accounting C Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, 8,268 column (A) amount, list line 11g expenses on Sch O.) 569. 12 Advertising and promotion 13,316. 13 Office expenses Information technology 14 Royalties 15 $9,\overline{908}$ Occupancy 16 11,219. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 5,947. Conferences, conventions, and meetings 19 Interest 20 148,089. 21 Payments to affiliates 39,240.22 Depreciation, depletion, and amortization 10,455. 23 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.) 4,532. CHRISTMAS EXPENSE REPAIRS & MAINTENANCE 4,303. 3,037. DEATH FUND BENEFIT 2,025 d FLOWERS AND FRUIT 4,096. e All other expenses Total functional expenses Add lines 1 through 24e 701,269 25 Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here If following SOP 98-2 (ASC 958-720)

Form 990 (2012)

Balance Sheet Part X Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 100,412. 67,709. Cash - non-interest-bearing 355,570. 368,906. 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 **Assets** 7 Notes and loans receivable, net 8 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 ì 10a Land, buildings, and equipment cost or other 896,946 basis Complete Part VI of Schedule D 10a 453,371. 479,935 443,575. 10b b Less accumulated depreciation 10c 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 14 Intangible assets 13,332. 15,948. 15 Other assets. See Part IV, line 11 15 916,546. 928,841 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Liabilities Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of 36,403. 25 <u>39,636.</u> Schedule D 36,403. 39,636. 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 585,258 633,870. Unrestricted net assets 27 255,3<u>35.</u> 294,885. 28 Temporarily restricted net assets 28 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 4 3> 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 880,143. 33 889,205. 33 Total net assets or fund balances 928,841. 916,546. 34 Total liabilities and net assets/fund balances

Form 990 (2012)

Form	990 (2012) LOCAL	<u>35-2116</u>	<u>536</u>	Pag	e 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	710		
2	Total expenses (must equal Part IX, column (A), line 25)	2		.,26	
3	Revenue less expenses Subtract line 2 from line 1	3		,06	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	880),14	<u>43.</u>
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			
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	889	, 20	<u> </u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				LX.
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Cash Counting method used to prepare the Form 990 Cash Cash Counting method used to prepare the Form 990 Cash Cash Cash Cash Cash Cash Cash Cash	D CASH	3		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	e O	' الشديد		<u>.</u>
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a	3.4		
	separate basis, consolidated basis, or both			ŀ	
	Separate basis X Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,			(
	consolidated basis, or both			اج -	48.
	Separate basis Consolidated basis Both consolidated and separate basis				134
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.	×		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ııred audıt		T	
	or audits, explain why in Schedule O and describe any stans taken to undergo such audits		3h		

232012

Form **990** (2012)

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 Inspection

Name of the organization

UNITED ASSOCIATION OF JOURNEYMEN AND 210

Employer identification number

		CAL		35-2116536
Paı	rt I Organizations M	laintaining Donor Advised I	Funds or Other Similar Funds or	Accounts. Complete if the
	organization answere	d "Yes" to Form 990, Part IV, line 6.		
		<u> </u>	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	<u></u>		
2	Aggregate contributions to (d	during year)		
3	Aggregate grants from (durin	ng year)		
4	Aggregate value at end of ye	ear		
5	Did the organization inform a	all donors and donor advisors in writ	ing that the assets held in donor advised fu	ınds
	are the organization's proper	rty, subject to the organization's exc	lusive legal control?	Yes No
6	Did the organization inform a	all grantees, donors, and donor advi-	sors in writing that grant funds can be used	l only
			onor advisor, or for any other purpose confe	•
	impermissible private benefit	رع المارية المارية المارية المارية المارية المارية المارية المارية المارية المارية المارية المارية المارية الم	, , ,	Yes No
Par	rt II Conservation Ea	sements. Complete if the organi	zation answered "Yes" to Form 990, Part IV	
1		easements held by the organization		
		or public use (e.g., recreation or educ		ally important land area
	Protection of natural ha	· ·	Preservation of a certified	•
	Preservation of open s	pace		
2	Complete lines 2a through 2d	d if the organization held a qualified	conservation contribution in the form of a	conservation easement on the last
	day of the tax year.			
	•			Held at the End of the Tax Year
а	Total number of conservation	n easements		2a
b	Total acreage restricted by c	onservation easements		2b
С	Number of conservation ease	ements on a certified historic structi	ure included in (a)	2c
d	Number of conservation ease	ements included in (c) acquired afte	r 8/17/06, and not on a historic structure	
	listed in the National Register	, , ,	·	2d
3	Number of conservation ease	ements modified, transferred, releas	ed, extinguished, or terminated by the orga	anization during the tax
	year >		, ,	<u> </u>
4	Number of states where prop	perty subject to conservation easem	ent is located	
5	Does the organization have a	a written policy regarding the period	c monitoring, inspection, handling of	
	violations, and enforcement of	of the conservation easements it ho	lds?	Yes No
6	Staff and volunteer hours de	voted to monitoring, inspecting, and	d enforcing conservation easements during	the year ▶
7	Amount of expenses incurred	d in monitoring, inspecting, and enfo	orcing conservation easements during the	/ear ▶ \$
8	Does each conservation ease	ement reported on line 2(d) above s	atisfy the requirements of section 170(h)(4)	(B)(i)
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the	organization reports conservation	easements in its revenue and expense state	ement, and balance sheet, and
	include, if applicable, the text	t of the footnote to the organization	's financial statements that describes the o	rganization's accounting for
	conservation easements			
Par	rt III Organizations M	laintaining Collections of A	rt, Historical Treasures, or Other	Similar Assets.
	Complete if the organi	zation answered "Yes" to Form 990), Part IV, line 8	
1a	If the organization elected, as	s permitted under SFAS 116 (ASC 9	58), not to report in its revenue statement	and balance sheet works of art,
	historical treasures, or other	sımılar assets held for public exhibit	ion, education, or research in furtherance o	of public service, provide, in Part XIII,
	the text of the footnote to its	financial statements that describes	these items	
b	If the organization elected, as	s permitted under SFAS 116 (ASC 9	58), to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar ass	sets held for public exhibition, educ	ation, or research in furtherance of public s	ervice, provide the following amounts
	relating to these items			-
	(i) Revenues included in Fo	rm 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form	990, Part X		► \$ ► \$
2	If the organization received o	or held works of art, historical treasu	res, or other similar assets for financial gain	
		ed to be reported under SFAS 116 (<u> </u>	
	Revenues included in Form 9	·	-	> \$
	Assets included in Form 990,			▶ \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 12-10-12

Schedule D (Form 990) 2012

	dule D (Form 990) 2012 LOCAL								<u> 16536</u>	
Pai	rt III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures, d	or Other	Simila	ar Asse	ts (continu	ed)
3	Using the organization's acquisition, accessi	on, and other record	ls, chec	k any of the	following tha	it are a sign	ificant i	use of its	collection i	tems
	(check all that apply)									
а	Public exhibition	d	ı <u> </u>	Loan or exc	hange progra	ams				
b	Scholarly research	e		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how ti	hey further t	he organizati	on's exemp	t purpo	se in Par	XIII	
5	During the year, did the organization solicit of	r receive donations	of art, h	istorical trea	sures, or oth	er sımılar a:	ssets			
	to be sold to raise funds rather than to be made	aintained as part of t	the orga	ınızatıon's c	ollection?				Yes	No_
Pai	t IV Escrow and Custodial Arran	gements. Comple	ete if the	e organizatio	n answered '	"Yes" to Fo	rm 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Pa	rt X, line 21								
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	ns or other as	sets not in	cluded			
	on Form 990, Part X?								Yes	No No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table:						
									Amount	
c	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 F	orm 990, Part X, line	21?						Yes	No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	xplanati	on has been	provided in l	Part XIII				
Pai	t V Endowment Funds. Complete	f the organization ar	swered	"Yes" to Fo	rm 990, Part	IV, line 10.				
		(a) Current year	(b) F	Prior year	(c) Two year	rs back (d)	Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance					-				
b	Contributions									
С	Net investment earnings, gains, and losses			•						
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs					1				
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur	rent year end baland	e (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		%							
b	Permanent endowment ▶	%								
С	Temporarily restricted endowment ▶	<u></u> %								
	The percentages in lines 2a, 2b, and 2c show	ıld equal 100%.								
За	Are there endowment funds not in the posse	ssion of the organiz	ation th	at are held a	and administe	red for the	organiz	zation		
	by.								Y	es No
	(i) unrelated organizations								3a(ı)	
	(ii) related organizations								3a(iı)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Sche	dule R?					3b	
4	Describe in Part XIII the intended uses of the									
Pai	t VI Land, Buildings, and Equipm	ient. See Form 990), Part X	, line 10.						
	Description of property	(a) Cost or o	ther	(b) Cost	t or other	(c) Acci	umulate	ed	(d) Book	value
		basis (investr	nent)		(other)	depre	ciation			
1a	Land			5	0,000.				50	,000.
b	Buildings				0,724.	14	9,2	78.		,446.
C	Leasehold improvements				1,178.		1,0			,113.
ď	Equipment				7,616.		8,1			,504.
	Other				7,428.		4,9			,512.
	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colur					ightharpoonup		,575.

(a) Description of security or category (including name of security)	(b) Book value		tion Cost or end-	of-year market value
(1) Financial derivatives	<u> </u>	(2)		
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)		·		
(D)				
(E)				
(F)				
(G)				
(H)				
(1)	,			
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			<u> </u>	
Part VIII Investments - Program Related. Se				
(a) Description of investment type	(b) Book value	(c) Method of valua	ition Cost or end-	of-year market value
(1)				
(2)				
(3)	 			
(4)	· · · · · · · · · · · · · · · · · · ·			
(5)				
(6)				
(7)				
(8)				
(9)				
(10)			· · · · · · · · · · · · · · · · · · ·	
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	16		·	
· · · · · · · · · · · · · · · · · · ·	Description			(b) Book value
(1)				(5) 20011 10.00
(2)				
(3)				
(4)				
(5)				· · · · · · · · · · · · · · · · · · ·
(6)				<u></u> .
(7)				
(8)				· · · · · · · · · · · · · · · · · · ·
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	15)		>	
Part X Other Liabilities. See Form 990, Part X, II				
1. (a) Description of liability		(b) Book value	****	
(1) Federal income taxes				4
(2) DUE TO OTHER FUNDS		39,594.		
(3) PAYROLL WITHHOLDINGS		42.		
(4)				
(5)				
(6)				*
(7)				
(8)				
(9)				
(10)				
(11)				
		39,636.		

232053 12-10-12

Scho	edule D (Form 990) 2012 LOCAL	OF JOURNEYMEN AND 21	35-21165	36 Page 4
	rt XI Reconciliation of Revenue per Audited Finance	cial Statements With Revenue		JO Page 4
1	Total revenue, gains, and other support per audited financial statem		1	_
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	
5_	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part		5	
Pa	rt XII Reconciliation of Expenses per Audited Finan	icial Statements With Expenses	s per Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1		
а	Donated services and use of facilities	2a		
b	• •	2b		
С		2c		
d	,	2d		
e			2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 . 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	,	4b		
C		+ 1 lmo 19)	4c	
5 Pa	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Par rt XIII Supplemental Information	(i, iine 16.)	5	
	uplete this part to provide the descriptions required for Part II, lines 3,	5 and 0 Part III lines 1a and 4 Part IV I	ings 1h and 2h: Part V	Ino 4: Port
	e 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also comp			

Schedule D (Form 990) 2012

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

UNITED ASSOCIATION OF JOURNEYMEN AND 210 LOCAL

Employer identification number 35 – 2116536

FORM 990, PART I, ITEM K, OTHER ORGANIZATION TYPE:
LABOR_UNION
FORM 990, PART VI, SECTION A, LINE 6: THE UNION IS A LABOR ORGANIZATION
WHOSE MAIN OBJECTIVE IS TO COORDINATE LABOR MATTERS AND TO ADMINISTER TO
ANY LABOR PROBLEMS OF ITS MEMBERS. THE UNION'S MEMBERS ARE THOSE COVERED
INDIVIDUALS WHO WORK FOR EMPLOYERS SUBJECT TO THE COLLECTIVE BARGAINING
AGREEMENT WITH THE UNION.
FORM 990, PART VI, SECTION A, LINE 7A: THE OFFICERS OF THE UNION ARE
ELECTED TO THEIR POSITION BY THE UNION MEMBERS.
FORM 990, PART VI, SECTION A, LINE 7B: THE UNION'S MEMBERSHIP CONSISTS OF
INDIVIDUALS WORKING FOR EMPLOYERS UNDER A COLLECTIVE BARGAINING AGREEMENT
WITH THE UNION AND INDIVIDUALS WHO HAVE RETIRED FROM THE UNION. A MEMBER
IS ONE WHO HAS SATISFIED ITS REQUIREMENT FOR MEMBERSHIP AND IS IN GOOD
STANDING WITH THE UNION. DEPENDING ON THE TYPE OF MEMBERSHIP STATUS A
MEMBER HAS DETERMINES THE VOTING RIGHTS OF THE MEMBER. JOURNEYMAN, RETIRED
JOURNEYMAN AND LIFE MEMBER JOURNEYMAN HAVE FULL VOTING RIGHTS ON ALL
MATTERS. PRODUCTION WORKERS AND APPRENTICES HAVE NO VOTING RIGHTS.
FORM 990, PART VI, SECTION B, LINE 11: THE GOVERNING BODY AUTHORIZES THE
BUSINESS MANAGER TO REVIEW AND APPROVE THE FILING OF THE FORM 990.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS FORM 990

AVAILABLE FOR INSPECTION UPON REQUEST.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. $^{232211}_{01-04-13}\,$

Schedule O (Form 990 or 990-EZ) (2012)

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Related Organizations and Unrelated Partnerships ▶ See separate instructions. ASSOCIATION OF JOURNEYMEN AND 210 ▶ Attach to Form 990. UNITED LOCAL Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

Part

2012 Open to Public Inspection

OMB No 1545-0047

Employer identification number

35-2116536

Direct controlling

entity

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year) End-of-year assets **e** Total income € Legal domicile (state or foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity Part II

(g) Section 512(b)(13) controlled entity? Direct controlling Public charity Exempt Code section 9 Legal domicile (state or Primary activity Name, address, and EIN

ŝ × Yes entity status (if section 501(c)(3)) foreign country) INDIANA CONTRIBUTIONS TO STATE AND COCAL CANDIDATES MAKES POLITICAL PLUMBERS LOCAL UNION 210 POLITICAL ACTION COMMITTEE - 37-1505960, 2901 EAST 83RD of related organization PLACE, MERRILLVILLE, IN 46410

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

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Schedule R (Form 990) 2012

232161 12-10-12 LHA

Schedule R (Form 990) 2012 LOCAL

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year) Part III

Page 2

35-2116536

(a)	(q)	(၁)		(e)	(£)	- 6	(6)	(£)	(5)	8	(K)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	ne Share of total income ider		Share of end-of-year assets	Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	General or Percentage managing ownership partner? Yes No
							12.75				
Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	ganizations Taxable a	as a Corpo	ration or Trust (Co	omplete if the organi	zation answe	ered "Yes" to Fc	rm 990, Parl	t IV, line 34	because it had or	н ог тог	e related
(a) Name, address, and EIN of related organization	Zc	Primi	(b) Primary activity	(c) Legal domicile Direct c (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 Perend-of-year ow assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
			,								
						:					
232162 12-10-12				20					Schedule	R (Form	Schedule R (Form 990) 2012

UNITED ASSOCIATION OF JOURNEYMEN AND 210 Schedule R (Form 990) 2012 LOCAL

35-2116536

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	lated organizations listed	ın Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		×
b Gift, grant, or capital contribution to related organization(s)				1b		×
c Gift, grant, or capital contribution from related organization(s)				5		×
d Loans or loan guarantees to or for related organization(s)				19		×
				٩		×
				<u>ש</u>	-	4
•				w markenshite		' ;
f Dividends from related organization(s)				=	1	4
g Sale of assets to related organization(s)				19		×
h Purchase of assets from related organization(s)				4		×
Exchange of assets with related organization(s)				;=		×
Lease of facilities, equipment, or other assets to related organization(s)				Έ		×
				+		>
n Lease of facilities, equipment, of other assets from related organization (s) Deformance of connect or membership of fundament colonistions for related organization (s)	(a)doltotion			€ ₹		×
Defermance of services of morning of landaasing sometiments of	anization(3)			: ;		; >
m Periormance of services of membership of fundraising solicitations by related organization(s)	anization(s)			E	+	()
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			Ę	1	×
 Sharing of paid employees with related organization(s) 				9		×
p Reimbursement paid to related organization(s) for expenses				1p		×
				10		×
r Other transfer of cash or property to related organization(s)				÷		×
s Other transfer of cash or property from related organization(s)				18		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete th	is line, including covered	relationships and transaction thresholds			
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	volved		
(1)						-
(2)						
(3)						
(4),						
(5)						
. (9)						
232163 12-10-12	21		Schedule R (Form 990) 2012	R (Form	(066	2012

Page 4

UNITED ASSOCIATION OF JOURNEYMEN AND 210

Schedule R (Form 990) 2012 LOCAL

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

S, and EIN Primary activity Legal domincle Predomental models (State of foreign (State of foreign Country) under section 572-514 (Ves No. norme a country) (State of foreign Predomental models) (State of foreign Country) (State of foreign Predomental models) (State of foreign Country) (State of foreign Predomental models) (State of for	(a) (b) (c) (d)	(q)	(0)	(p)	(e)	(£)	(b)	(£)	Ξ	s	(X
Country Under Section 572-514 Nee No Income assets Income I	Name, address, and EIN of entity	Primary activity		Predominant income (related, unrelated,	Are all partners sec 501(c)(3) orgs?	Share of total		Dispropor- tionate allocations?	Code V-UBI amount in box 20	General or managing partner?	Percentage ownership
				under section 512-514)	Yes No	ıncome		Yes No	(Form 1065)	Yes No	
Schedule R (cm 880) 2012											
Schedule R (Form 890) 2012											
Schedule R (Form 980) 2012											
Schedule R (Form 980) 2012											
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Schedule R (Form 990) 2012											
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						•					
Schedule R (Form 990) 2012											
Schedule R (Form 990) 2012											
	•								Schedule	R (Forn	n 990) 2012

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Schedule R	R (Form 990) 2012 LOCAL	35-2116536 Page 5
Part VII	R (Form 990) 2012 LOCAL Supplemental Information	
•	Complete this part to provide additional information for responses to questions on Schedule R (see	instructions)
	•	
		_
-		
		
		
		···-

15201010 700701 0701500

Current Year Deduction	11,557.	15,100.	1,059.	1,059.	5,365.	6,159.	11,524.	,	39,240	, , , , , , , , , , , , , , , , , , ,	zation Deduction
Current Sec 179		0		0	y	e	0	•0	o	*	ımercial Revitalı
Accumulated Depreciation	137,721.	215,965. 353,686.	33,857.	33,857.	2,980.	23,608.	26,588.	O commence to	414,131.		vage, Bonus, Con
Basis For Depreciation	450,724	301,178.	37,428.	37,428.	26,823.	30,793.	57,616	50,000.	896,946.		* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction
Reduction In Basis			•	0		Mary 2 a	0	0	0.		711.
Bus % Excl				,							
Unadjusted Cost Or Basis	450,724.	301,178.	37,428.	37,428.	26,823.	30,793.	57,616.	50,000.	896,946.		(D) - Asset disposed
No No	1.0	16	16		16	16	\$-4 ²		,	. *	<u>(</u>
Lıfe	39.001.6	000.	000	` ***	5.00	5.00				***	
Method	Ţ	Ħ.	L.	* *	ij	H			*		
Date Acquired	08010081	VARIESSL	AARIESSL		VARIESSL	082808SL		VARIESL	Ů.	\$ 14	
Description	S	O TOTAL	QUIPMENT	AGE IO TOIALI RE & FIXTUR RTATION	*	; H	PAGE 10 TOTAL	TOTAL	TOTAL 990 DEPR	The state of the s	
ğ	BUILDINGS 2BUILDING	3IMPROVEMENTS * 990 PAGE 1 BUILDINGS ** FURNITURE &	40FFICE E	FURNITURE & FINTERALION EQUIPMENT	6AUTOMOBILE	8AUTOMOBILE	990 RANSE AND	AND 990 AND	* GRAND PAGE 10		
Asset No	•	- ,			_				** , ,		228102 05-01-12

23.1

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury Internal Revenue Service (99)

► See separate instructions.

► Attach to your tax return.

Name(s	shown on return			Busin	ness or activity t	to which th	nis form relate:	5	Identifying number
UNI	TED ASSOCIATION OF	JOURNEYM	EN AND						
LOC				<u>FO</u>	RM 990	PAG	E 10		<u>35-2116536</u>
Par	Election To Expense Certain Prope	rty Under Section 1	79 Note: If yo	ou have any li	sted proper	ty, com	plete Part	V before y	
1 M	axımum amount (see ınstructions)							1	500,000
2 To	otal cost of section 179 property place	ed in service (see	instructions	·)				2	
3 T	reshold cost of section 179 property	before reduction	ın limitation					_3	2,000,000
4 R	eduction in limitation Subtract line 3	from line 2 If zero	or less, ent	er ·0·				4	
5 Do	llar limitation for tax year. Subtract line 4 from lin	e 1 If zero or less, enter	-0- If married fil	ling separately, si	e instructions			5	
6	(a) Description of pr				ness use only)		(c) Elected	cost	
									· ***
							•		*
	 		· · · · · · · · · · · · · · · · · · ·						
									18
7 1	ated property. Enter the amount from	lino 20		L	7				
	sted property. Enter the amount from		an aaluma /	a) linea 6 ani					- can called the control of
	otal elected cost of section 179 properties	•	s in column (c), imes o am	<i>3 /</i>			8	
	entative deduction Enter the smaller		044 5 46	-00				9	
	arryover of disallowed deduction from	•						10	
	usiness income limitation. Enter the s		•		•	1		11	· ·
	ection 179 expense deduction. Add I					<u> </u>		12	**************************************
	arryover of disallowed deduction to 2				▶ 13	<u> </u>			- *
	Do not use Part II or Part III below fo		•					_	
Par	II Special Depreciation Allowa	ance and Other D	epreciation	(Do not incli	ude listed pr	roperty)		-
14 S	pecial depreciation allowance for qua	alified property (otl	her than liste	ed property) p	olaced in ser	vice du	rıng	-	
th	e tax year						•	14	
15 P	operty subject to section 168(f)(1) el	ection						15	
16 O	ther depreciation (including ACRS)							16	39,240
Par	MACRS Depreciation (Do no	ot include listed p	roperty) (Se	e instructions	s)				
			Se	ection A					
17 M	ACRS deductions for assets placed	ın service in tax ve	ears beginnii	ng before 20°	12			17	
	ou are electing to group any assets placed in ser	•	•	•		ere	▶□] [A Source of the state of the st
	Section B - Assets						I Deprecia	tion Syste	em
		(b) Month and	(c) Basis fo	or depreciation	(d) Recov				
	(a) Classification of property	year placed in service		investment use instructions)	period	e y	e) Convention	(f) Method	(g) Depreciation deduction
100	3.year property								
19a	3-year property	-							
<u>b</u>	5-year property						•		
<u>c</u>	7-year property	[®]			+				
d_	10-year property	4			+				
<u>e</u>	15-year property	4							
f	20-year property	_							
<u>_</u> g_	25-year property	· ·			25 yrs	3		S/L	
.	Residential rental property	/			27 5 yr	rs	_MM	S/L	
h	nesidential rental property	/			27 5 yr	rs	MM	S/L	
	Alan and dark at and a second	/			39 yrs	s	MM	S/L	
1	Nonresidential real property	/					MM	S/L	
	Section C - Assets I	Placed in Service	During 201	2 Tax Year U	Jsing the Al	Iternati	ve Deprec	iation Sys	stem
20a	Class life	T			T			S/L	
b	12-year				12 yrs	;		S/L	
	40-year	 			40 yrs		MM	S/L	
Par		., ,	<u> </u>		1				
		- 28						24	
	sted property Enter amount from lin		oc 10 c 0	Oun column (a) and line (01		21	
	otal. Add amounts from line 12, lines	-							39,240.
E	iter here and on the appropriate line:	s or your return P	artnersnips a	and 5 corpor	auons · see	แารเท		22	ı 37,44U,

23

23 For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs

UNITED ASSOCIATION OF JOURNEYMEN AND 210 Form 4562 (2012) LOCAL Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or Part V 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. Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles) 24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No (b) (c) (e) (g) Date Business Elected Basis for depr Type of property Cost or Recovery Method/ Depreciation (business/investment placed in investment section 179 (list vehicles first) deduction other basis period Convention service use percentage use only) cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 25 26 Property used more than 50% in a qualified business use % % % 27 Property used 50% or less in a qualified business use S/L % S/L % % S/L 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 29 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (f) (d) (a) (b) (c) (e) 30 Total business/investment miles driven during the Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use Yes Yes Yes Yes Yes Yes No No No No No No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Nο Yes employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI | Amortization

(f) (b) (a) (c) (d) (e) Date amortization Description of costs Amortization for this year Amortizable amount begins period or percentage 42 Amortization of costs that begins during your 2012 tax year 43 43 Amortization of costs that began before your 2012 tax year 44 Total. Add amounts in column (f) See the instructions for where to report 44

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