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Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

Open to Public Inspection

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

<u>A</u> F	or the	2012 calendar year, or tax year beginning JUL 1, 20	IZ and	enaing J	UN 30, 2013	
B c	heck if	C Name of organization	חני אזיי		D Employer identifi	cation number
	Addres	ONITED DROTHERHOOD OF CAREENTE.		4.2		
<u> </u>	Jchange Name	JOINERS OF AMERICA LOCAL UNION	NO. 12	43	, , ,	010107
<u> </u>	change			<del>-</del>		013107
<u> </u>	return	Number and street (or P O box if mail is not delivered to street add	dress)	Room/suite	E Telephone numbe	
<u> </u>	Termin	23 TITIDUNEND DICTAL				452-3862
<u> </u>	Amend	City, town, or post office, state, and ZIP code			G Gross receipts \$	110,000.
	Application pendin	TAIRBAND, AR 33701			H(a) Is this a group re	
	pono	F Name and address of principal officer: LAIRD GRANT	HAM		for affiliates?	Yes X No
		SAME AS C ABOVE	_		H(b) Are all affiliates inc	
		mpt status: $\square$ 501(c)(3) $\square$ 501(c) ( 5 ) $\blacktriangleleft$ (insert no )	4947(a)(1)	or 527		list. (see instructions)
	_	e: ► N/A				on number ▶ 0143
			Other LAE	OR L Year	of formation 1969	M State of legal domicile AK
Pa	rt I	Summary				
ø,	1	Briefly describe the organization's mission or most significant activ	itles: LABC	OR UNIC	ON	
anc		- Control of the Cont				·
Activities & Governance	2	Check this box 🕨 📖 if the organization discontinued its opera	ations or dispo	osed of more	than 25% of its net a	
Š	3	Number of voting members of the governing body (Part VI, line 1a)			3	10
8	4	Number of independent voting members of the governing body (Pa	art VI, line 1b)		4	0
es	5	Total number of individuals employed in calendar year 2012 (Part \	/, lıne 2a)		5	0
Σ̈́Ξ	6	Total number of volunteers (estimate if necessary)			6	10
Act	7 a	Fotal unrelated business revenue from Part VIII, column (C), line 12	2		7a	0.
	ь	Net unrelated business taxable income from Form 990-T, line 34			7b	0.
					Prior Year	Current Year
<u>o</u>	8	Contributions and grants (Part VIII, line 1h)			14,323.	0.
eun	9	Program service revenue (Part VIII, line 2g)	L	149,406.	91,635.	
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		169.	120.	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1	1e)		0.	18,245.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, colum	n (A), line 12)		163,898.	110,000.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.	
	14	Benefits paid to or for members (Part IX, column (A), line 4)	<u> </u>	7,004.	1,220.	
S	15	Salaries, other compensation, employee benefits (Part IX, column (	)	0.	0.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.	
ğ	ь	Total fundraising expenses (Part IX, column (D), line 25)		0.		
ш	17	Other expenses (Part IX, column (A), Imes 11a 11d, 11f 24e)			162,458.	
	18	Total expenses. Add lines 13-17 (must equal Raft-) County [A) jir	ne 25)		169,462.	118,583.
	1 7 G	Revenue less expenses. Subtract line 18 from line 12	()		<5,564.	<b>&lt;8,583.</b>
NET Assets or Fund Balances		Total assets (Part X line 16) AUG 2 6 2013	8	Be	eginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)	121		651,353.	630,365.
Z SEB	21	Total liabilities (Part X, line 26)	RS-OS		0.	0.
£25	22	Net assets or fund balances. Subtract line 21 from in 20 1 17			651,353.	630,365.
O Pa	ert II	Signature Block				
SUnd	er pena	Ities of perjury, I declare that Lhave examined this return, including accomp	anying schedu	les and staten	nents, and to the best of n	ny knowledge and belief, it is
true.	correc	t, and complete Declaration of preparer (other than officer) is based on all i	information of v	which prepare	r has any knowledge	
<b>=</b>		Mari Lamba			8-19	-13
, − ⊜ Sig	n	Signature of officer			Date	
		LAIRD GRANTHAM, FINANCIAL SECR	ETARY			
20 Her		Type or print name and title				
<u>(</u> SS) —		Print/Type preparer's name Preparer's signal	ture		Date Check [	PTIN
Paid	1	DON A CURTIS			8/12/2013 If self-emplo	yed 1200010775
Preg	arer	Firm's name DON A CURTIS & ASSOCIATE	S PLLC		Firm's EIN	26-4388619
•	Only	Firm's address P.O. BOX 7359				
	•	COVINGTON, WA 98042			Phone no 2	253.631.2106
May	the II	RS discuss this return with the preparer shown above? (see instruc	ctions)		,	Yes No
		0-12 LHA For Paperwork Reduction Act Notice, see the sepa		lions	-	Form <b>990</b> (2012)

# UNITED BROTHERHOOD OF CARPENTERS AND JOINERS OF AMERICA LOCAL UNION NO. 12

	1990 (2012). JUINERS OF AMERICA LOCAL UNION NO. 1243 92-0013107	Page 2							
Par	Statement of Program Service Accomplishments								
1	Check if Schedule O contains a response to any question in this Part III								
٠	Briefly describe the organization's mission:  OPERATION OF UNION HALL FOR THE BENEFIT OF MEMBERS IN THE CARPENTER								
	TRADE IN THE AREA								
2	Did the organization undertake any significant program services during the year which were not listed on	<b>V</b>							
	the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O.	X No							
3		X No							
•	If "Yes," describe these changes on Schedule O.	140							
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.								
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and								
	revenue, if any, for each program service reported.								
4a	(Code) (Expenses \$	)							
	TRADE IN THE AREA								
4b	(Code) (Expenses \$ including grants of \$ ) (Revenue \$	)							
4c	(Code) (Expenses \$	)							
4d	Other program services (Describe in Schedule O.)								
	(Expenses \$ including grants of \$ ) (Revenue \$ )								
<u>4e</u>	Total program service expenses	_							

Part N Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		'	
	If "Yes," complete Schedule A	_1_		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2_		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	_3_		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		:	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	-	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	E		х
6	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		
0	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<del>'-</del>		
•	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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,			<u> </u>
	Part VI	11a	Х	
þ	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		Х
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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
100	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
120	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	l		
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			,.
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			1,7
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<del>                                     </del>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		1	v
00	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<del>                                     </del>	^
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		(0040)

Form 990 (2012). Part 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		<u>X</u>
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		X_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	i		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			İ
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
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		X
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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Α_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
04	contributions? If "Yes," complete Schedule M	30	<b></b>	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			х
20	If "Yes," complete Schedule N, Part I	31		Λ
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		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32	<del> </del>	
-	sections 301.7701-2 and 301.7701·3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		-
<b>5</b> -7	Part V. line 1	34		x
35a		35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
~	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?			<del>                                     </del>
	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			<del> </del>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	1	x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			<u> </u>
	Note. All Form 990 filers are required to complete Schedule O	38	x	
	The state of the s			(2012)

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Form 990 (2012)

JOINERS OF AMERICA LOCAL UNION NO. 1243 Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V						
					Yes	No	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a_	0				
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b_	0				
C	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	ble gamıng				
	(gambling) winnings to prize winners?	_		1c			
2a	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	2a	0				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retuined	ms?		2b			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				l''	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3 <u>a</u>		X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	author	ity over, a				
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		Х	
b	If "Yes," enter the name of the foreign country: ▶		<u> </u>				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accou	nts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	action?	•	5b		Х	
C	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 to	he org	anızatıon solicit				
	any contributions that were not tax deductible as charitable contributions?			6a		X	
Ь	If "Yes," did the organization include with every solicitation an express statement that such contribution	tions o	r gifts				
	were not tax deductible?			6b			
7	Organizations that may receive deductible contributions under section 170(c).			_		.,	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices	provided to the payor?	7a		X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		<del> </del>	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as req	uirea			x	
_	to file Form 8282?		1	7c			
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	L	7e			
f	<ul> <li>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</li> <li>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</li> </ul>						
g	If the organization received a contribution of qualified intellectual property, did the organization file F		ROO as required?	7 <del>f</del> 7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		•	7h			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D			<del></del>			
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at		· · · · · ·	8	1	1	
9	Sponsoring organizations maintaining donor advised funds.	,	,				
а	Did the organization make any taxable distributions under section 4966?			9a	[	1	
ь	Did the organization make a distribution to a donor, donor advisor, or related person?			9b			
10	Section 501(c)(7) organizations. Enter:						
а	Initiation fees and capital contributions included on Part VIII, line 12	10a					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b					
11	Section 501(c)(12) organizations. Enter:						
а	Gross income from members or shareholders	11a		]			
b	Gross income from other sources (Do not net amounts due or paid to other sources against						
	amounts due or received from them )	11b		1			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a	ļ	ļ	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	1	1			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			ļ		<u> </u>	
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		ļ	
	<b>Note</b> . 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		1				
	organization is licensed to issue qualified health plans	13b		4			
	Enter the amount of reserves on hand	13c	<u> </u>	-	-	1	
	Did the organization receive any payments for indoor tanning services during the tax year?			14a	<u> </u>	X	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	le O		14b			

Form 990 (2012)

JOINERS OF AMERICA LOCAL UNION NO. 1243

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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			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 10			
	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			
ь	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	]	1	
	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			
_	of officers, directors, or trustees, or key employees to a management company or other person?	3	1	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		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	Х	
	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	Х	
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
_	persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
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		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	·		
000	tion D. 1 Onoics (This deciron D requests information about policies not required by the internal nevertee decay		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	100	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
_	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	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		X
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
				,
	In Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	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?			
а	T	15a		X
	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	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			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
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)	availat	ole	
	for public inspection. Indicate how you made these available. Check all that apply.			
	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, as	nd fina	ncıal	
	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:	<b>-</b>	
-	LAIRD GRANTHAM - 907 452-3862			
	25 TIMBERLAND DRIVE, FAIRBANKS, AK 99701			

JOINERS OF AMERICA LOCAL UNION NO. 1243

92-0013107

#### Form 990 (2012). Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employees."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

X Check this box if neither the organization in	nor any related	orga	anıza	ation	cor	nper	sat	ed any current officer, o	director, or trustee.	
(A) Name and Title	(B) Average hours per week	(do	Position (do not check more than obox, unless person is bottofficer and a director/trus		e than one		(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) EDWARD PUGLIESE	2.00							_	_	_
PRESIDENT		<u> </u>	L_	X	<u> </u>	<u> </u>		0.	0.	0.
(2) DON EVANS	2.00									
VICE PRESIDENT	1			X		ļ		0.	0.	0.
(3) ARTHUR SUTTON	2.00									
RECORDING SECRETARY			_	X	_	1		0.	0.	0.
(4) LAIRD GRANTHAM	2.00									_
FINANCIAL SECRETARY	0.00	<u> </u>	-	X				0.	0.	0.
(5) AARON EMERICK	2.00	┨		١.,						
TREASURER	1 2 00	├	1	Х		-		0.	0.	0.
(6) CHRIS STANKIEWICZ	2.00	-		١,,		1				_
CONDUCTOR	1 2 00	<u> </u>	-	X	₽-	1		0.	0.	0.
(7) MATTHEW HACKENMILLER WARDEN	2.00	1		x			ŀ	0.	0.	0.
(8) STEVE BELMONT	2.00			Ī						
TRUSTEE		1	1	X				0.	0.	0.
(9) JEFF BIZZARO	2.00									
TRUSTEE				X	L.,			0.	0.	0.
(10) JOSH BOLTON	2.00									
TRUSTEE				X	_			0.	0.	0.
<del>4.2 -</del>										
		T								
		<del>  -</del>	+							
		$\vdash$					-			
		1	$\vdash$	-	$\vdash$		-			
		1								
		1	┙	Ι.	1	1	1	1	I	Ī

JOINERS OF AMERICA LOCAL UNION NO. 1243

Page 8

Section A. Officers, Di	rectors, trustees, key Em	pioy	ees,	anc	וויו נ	<u>yne:</u>	<u> </u>	ompensated Employe	es (continued)				
(A)	(B)			_ (C	-			(D)	(E)	ŀ		(F)	
Name and title	Average	Position (do not check more than one					one	Reportable	Reportable			tımate	
	hours per week	box,	unles	ss pe	rson i	s boti r/trus	h an	compensation	compensatio	- 1		ount	of
	(list any	$\vdash$						from the	from related organizations			other nensa	tion
	hours for	trustee or director				pg		organization	(W-2/1099-MIS			om the	
	related	Sta	ustee			ensat		(W-2/1099-MISC)	·		org	anızatı	ion
	organizations below	lal fit	onal to		ea/olc	comp						d relat	
	line)	Individual	Institutional trustae	Officer	Key employee	Highest compensated employee	Former				orga	anızatı	ons
		=	-	<u> </u>	×	I 8							
		i											
										j			
						<u> </u>							_
		- 1					-						
		-											
-		$\vdash$				-							
	-	1											
								-		-			
			<u> </u>				<u>L</u>						
						1							
						Ļ		0		0.			
1b Sub-total	- A - D - A MIL O - Al A							0.		0.			0.
<ul> <li>c Total from continuation she</li> <li>d Total (add lines 1b and 1c)</li> </ul>	ets to Part VII, Section A							0.		0.			0.
2 Total number of individuals (in	ncluding but not limited to the	1086	liete	ed al	hov	e) w		<del></del>	) 000 of reportable	-			
compensation from the organ		1030	11010	Ju u	501	٠, •••		cocived more than \$100	s,ood of reportable				0
												Yes	No
3 Did the organization list any fo	ormer officer, director, or tri	ustee	e, ke	y er	nplo	yee	, or	highest compensated e	mployee on				
line 1a? If "Yes," complete Sc	hedule J for such individual	'									3		X
4 For any individual listed on lin	· ·		-					<u>-</u>	the organization				
and related organizations gre			-								4		X
5 Did any person listed on line							relat	ted organization or indiv	idual for services		•		Х
rendered to the organization?  Section B. Independent Contract		e J T	or s	ucn	per	son					5		
1 Complete this table for your fi		dene	ende	ent c	ont	racto	ors 1	that received more than	\$100,000 of com	nens	ation 1	from	
the organization. Report com										.,			
	(A)							(B)			((	<del></del>	
Name	and business address	NO	INC	Ε				Description of s	services		ompe	nsatio	'n
							_						
									1				
										-		-	
		_											
2 Total number of independent	contractors (including but r	not lu	mıte	d to	the	se li	sted	d above) who received r	more than				
\$100,000 of compensation from	rom the organization					0							

Form					ERICA LO	CAL UNION	NO. 1243	92-0013	107 Page <b>9</b>
Pai	t V	111	-						
			Check if Schedule O conta	ains a response	to any question i	n 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
Contributions, Gifts, Grants and Other Similar Amounts		b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribute All other contributions, gifts, grant similar amounts not included abov Noncash contributions included in lines	ts, and ve 1f					
Program Service C Revenue a	2	a b c d	CARPENTERS ADVA REIMBURSED EXPE  All other program service reverage and the service reverage and	NSES	Business Code 900099 900099	10,212. 1,275. 80,148. 91,635.	80,148.		
	3 4 5	9	Total. Add lines 2a·2f Investment income (including other similar amounts) Income from investment of tax Royalties	x-exempt bond p	oroceeds	120.			120.
	6	С	Gross rents Less: rental expenses Rental income or (loss) Net rental income or (loss)	18,245. 0. 18,245.		18,245.	18,245.		
	7	b c	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss)	(i) Securities	(ii) Other				
Other Revenue	8		Net gain or (loss) Gross income from fundraisin including \$ contributions reported on line Part IV, line 18	of					
Othe	9	c a	Less: direct expenses Net income or (loss) from fund Gross income from gaming ac Part IV, line 19	t draising events ctivities. See a	<b>&gt;</b>				
	10	c a b	b Less: direct expenses c Net income or (loss) from gaming activities d Gross sales of inventory, less returns and allowances c Less: cost of goods sold d		<b>&gt;</b>				
	11		Net income or (loss) from sale Miscellaneous Revenu	ie	Business Code				
	12	d e	All other revenue  Total. Add lines 11a-11d  Total revenue. See instructions		<b>&gt;</b>	110,000.	109,880.	0.	120.

JOINERS OF AMERICA LOCAL UNION NO. 1243 92-0013107 Page 10

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 respon		IS FAIL IA		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members	1,220.			
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)				<u> </u>
7	Other salaries and wages				
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		<del></del>		
b	Legal				
c	Accounting	6,617.			
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
9	· ·				
	column (A) amount, list line 11g expenses on Sch O)				
12	Advertising and promotion	10 616			
13	Office expenses	19,616.			
14	Information technology				
15	Royalties	16 714			
16	Occupancy	16,714.			
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	2 060			
19	Conferences, conventions, and meetings	2,969.			
20	Interest	40 501		_	
21	Payments to affiliates	40,581.			
22	Depreciation, depletion, and amortization	14,899. 2,349.			<del></del>
23	Insurance	2,349.			
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)  DONATIONS	13,618.		-	
a		13,018.			
b				-	
C				-	
d					
	All other expenses	118,583.			
25	Total functional expenses. Add lines 1 through 24e	110,303.			
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 I if following SOP 98-2 (ASC 958-720)	1		<u> </u>	L

Form 990 (2012)

92-0013107 Page 11 JOINERS OF AMERICA LOCAL UNION NO. 1243

**Balance Sheet** Part X Check if Schedule O contains a response to any question in this Part X (R) Beginning of year End of year 130,785. 124,577. 1 Cash · non-interest-bearing 54,977. 54,858. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 7 Notes and loans receivable, net 7 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 10a 625,592. basis. Complete Part VI of Schedule D 174,781. 465,710. 450,811. b Less: accumulated depreciation 10b 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 Intangible assets 14 15 Other assets. See Part IV, line 11 15 651,353. 630,365. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 Accounts payable and accrued expenses 17 18 Grants pavable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 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 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 0. 26 0. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ X and complete lines 30 through 34. 0. 30 Capital stock or trust principal, or current funds 30 0. 31 31 Paid-in or capital surplus, or land, building, or equipment fund 651,353. 630,365. 32 Retained earnings, endowment, accumulated income, or other funds 32 630,365. 651,353. 33 33 Total net assets or fund balances 651,353. 630,365. Total liabilities and net assets/fund balances

Form 990 (2012)

	UNITED BROTHERHOOD OF CARPENTERS AND						
Form	990 (2012) JOINERS OF AMERICA LOCAL UNION NO. 1243	92-00	13107	Pag	ge <b>12</b>		
Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in this Part XI				X		
		1.1	11(	٠ <u>،</u>	^^		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		110,000. 118,583.			
2	Total expenses (must equal Part IX, column (A), line 25)						
3	Revenue less expenses. Subtract line 2 from line 1	3		<u>3,5</u>			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	65	1,3	<u>53.</u>		
5	Net unrealized gains (losses) on investments	5					
6	g (3000)						
7							
8	·						
9	Other changes in net assets or fund balances (explain in Schedule O)	9	<12	<12,405			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,						
	column (B))	10	630	0,3	65.		
Pa	rt XII Financial Statements and Reporting			-			
	Check if Schedule O contains a response to any question in this Part XII				X		
				Yes	No		
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		_				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedu	ile O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?						
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review	ed on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Roth consolidated and separate basis						

Both consolidated and separate basis

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

**b** Were the organization's financial statements audited by an independent accountant?

Consolidated basis

review, or compilation of its financial statements and selection of an independent accountant?

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

consolidated basis, or both: X Separate basis

Act and OMB Circular A-133?

Form 990 (2012)

Х

Х

2c

За

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

**Political Campaign and Lobbying Activities** 

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.
 ► See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations. Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

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

•	Section 501(c)(4), (5), or (6) organiza				
Van		BROTHERHOOD OF C			oloyer identification number
		OF AMERICA LOCA			92-0013107
Pa	ert I-A Complete if the org	janization is exempt und	der section 501(c)	or is a section 527	organization.
2	Provide a description of the organiz Political expenditures Volunteer hours	ration's direct and indirect politi	cal campaign activities	ın Part IV ▶	\$
Pa	art I-B Complete if the org	anization is exempt und	der section 501(c)	(3).	
1	Enter the amount of any excise tax	incurred by the organization un	der section 4955	<b>&gt;</b>	\$
2	Enter the amount of any excise tax	incurred by organization manag	gers under section 495	5 ▶	\$
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	) for this year?		Yes No
	Was a correction made?				└─ Yes └─ No
	of "Yes," describe in Part IV.				(-\(0\)
1	Enter the amount directly expended Enter the amount of the filing organ		ection 527 exempt fund	ction activities	
_	exempt function activities		and organizations to a	<b>▶</b>	\$
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here	and on Form 1120-POL		<b>*</b>
	line 17b			· •	\$
4	Did the filing organization file Form	1120-POL for this year?			Yes No
5	Enter the names, addresses and er made payments. For each organiza				
	contributions received that were propolitical action committee (PAC). If				rate segregated fund or a
	(a) Name	( <b>b</b> ) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0
					-
			-		

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

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012 <					001310 / Page 2		
······································		exempt under sectio	n 501(c)(3) and file	ed Form 5768			
(election under sect	tion 501(h)).						
Check If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,							
expenses, and share	expenses, and share of excess lobbying expenditures).						
B Check 🕨 🔲 if the filing organizat	on checked bo	k A and "limited control" pro	ovisions apply.				
	s on Lobbying l itures" means	Expenditures amounts paid or incurred.		(a) Filing organization's totals	(b) Affiliated group totals		
1a Total lobbying expenditures to influ	ence public opii	nion (grass roots lobbying)					
<b>b</b> Total lobbying expenditures to influ	-						
c Total lobbying expenditures (add lii	_	, (,5,		-			
d Other exempt purpose expenditure	-			-			
e Total exempt purpose expenditures		nd 1d)					
f Lobbying nontaxable amount. Ente	•	•	h columns				
If the amount on line 1e, column (a) of		e lobbying nontaxable am					
Not over \$500,000		% of the amount on line 1e					
Over \$500,000 but not over \$1,000	,000 \$1	00,000 plus 15% of the exc	ess over \$500,000.				
Over \$1,000,000 but not over \$1,5	00,000 \$1	75,000 plus 10% of the exc	ess over \$1,000,000				
Over \$1,500,000 but not over \$17,	000,000 \$2	25,000 plus 5% of the exce	ss over \$1,500,000.				
Over \$17,000,000		,000,000.					
	-	•			,		
g Grassroots nontaxable amount (en	ter 25% of line 1	f)					
h Subtract line 1g from line 1a. If zero	or less, enter -(	).					
i Subtract line 1f from line 1c. If zero	Į						
j If there is an amount other than zer	o on either line	1h or line 1i, did the organiz	ation file Form 4720				
reporting section 4911 tax for this	year <sup>9</sup>				Yes No		
4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)							
	Lobbying	Expenditures During 4-Ye	ar Averaging Period				
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	( <b>d)</b> 2012	(e) Total		
2a Lobbying nontaxable amount							
b Lobbying ceiling amount (150% of line 2a, column(e))							
c Total lobbying expenditures							
d Grassroots nontaxable amount							
e Grassroots celling amount							
(150% of line 2d, column (e))				••••			
f Grassroots lobbying expenditures							

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012 JOINERS OF AMERICA LOCAL UNION NO. 1243 92-0013107 Page 3

[Part II-B] Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity		(a)		(b)	
		Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
9	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	!			
b	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	ion 501(c)	(5), or se	ction	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	Х	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		Х
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		X
1	answered "Yes."  Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	tical			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year		2b		
	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	expenditure next year?				
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
	Supplemental Information				
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; I	Part II-A (affilia	ated group	list): Part II	·A. line 2
	Part II-B, line 1. Also, complete this part for any additional information.		<b>3</b> p	,,	,
	, and the state of				
				<del></del>	

### **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 Open to Public inspection

Name of the organization

UNITED BROTHERHOOD OF CARPENTERS AND JOINERS OF AMERICA LOCAL UNION NO. 1243

**Employer identification number** 92-0013107

Par	I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the			
	organization answered "Yes" to Form 990, Part IV, line	e 6.				
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds			
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No			
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be u	used only			
	for charitable purposes and not for the benefit of the donor of		-			
	impermissible private benefit?	, , , ,	Yes No			
Par		ganization answered "Yes" to Form 990, Pa				
1	Purpose(s) of conservation easements held by the organizat	•				
	Preservation of land for public use (e.g., recreation or e		torically important land area			
	Protection of natural habitat	Preservation of a certif	• •			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of	of a conservation easement on the last			
	day of the tax year.		•			
	•		Held at the End of the Tax Year			
а	Total number of conservation easements		2a			
ь	Total acreage restricted by conservation easements	2b				
С	c Number of conservation easements on a certified historic structure included in (a)					
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure					
	listed in the National Register		2d			
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax					
	year ►					
4	Number of states where property subject to conservation ea	sement is located				
5						
	violations, and enforcement of the conservation easements it holds?					
6	Staff and volunteer hours devoted to monitoring, inspecting,	, and enforcing conservation easements du	uring the year 🕨			
7						
8						
	and section 170(h)(4)(B)(ii)?					
9						
	include, if applicable, the text of the footnote to the organiza	ition's financial statements that describes t	the organization's accounting for			
	conservation easements.					
Pai	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or O	ther Similar Assets.			
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.				
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statem	nent and balance sheet works of art,			
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherar	nce of public service, provide, in Part XIII,			
	the text of the footnote to its financial statements that descri	nbes these items.				
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement	and balance sheet works of art, historical			
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pub	olic service, provide the following amounts			
	relating to these items:					
	(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, historical tre	easures, or other similar assets for financial				
	the following amounts required to be reported under SFAS 1					
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$			
b	Assets included in Form 990, Part X		<b>s</b>			
	·					

		OF AMERIC	_							Page 2
Par	t III   Organizations Maintaining C	ollections of A	<u>rt, Hist</u>	orical T	reasures,	or Oth	<u>er Simil</u>	<u>ar Asse</u>	<b>ts</b> (continue	ed)
3	Using the organization's acquisition, accessi	on, and other record	ds, check	any of the	following th	at are a s	significant	use of its	collection if	tems
	(check all that apply):									
а	Public exhibition	c	ւ 🖳 ւ	oan or ex	change prog	rams				
b	Scholarly research	e	, 🗀	Other						
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ey further	the organiza	tion's exe	empt purp	ose ın Par	t XIII.	
5	During the year, did the organization solicit o	r receive donations	of art, his	storical tre	asures, or ot	her sımıla	ır assets		_	
	to be sold to raise funds rather than to be ma	aintained as part of	the organ	ization's c	collection?				Yes	No_
Par	Escrow and Custodial Arran reported an amount on Form 990, Par	•	ete if the	organızatı	on answered	d "Yes" to	Form 990	), Part IV, I	ine 9, or	
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for d	contributio	ns or other a	assets no	t included			
	on Form 990, Part X?								Yes	No No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing to	able:						
									Amount	
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 F	orm 990, Part X, line	21?						Yes	No
	If "Yes," explain the arrangement in Part XIII.	Check here if the e	xplanatio	n has bee	n provided ir	Part XIII				
Par	t V Endowment Funds. Complete	f the organization ar	nswered	"Yes" to F	orm 990, Pa	rt IV, line	10.		1	
		(a) Current year	<b>(b)</b> Pi	nor year	(c) Two ye	ars back	(d) Three	years back	(e) Four ye	ears back
1a	Beginning of year balance	<b></b> .								
b	Contributions									
c	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses		ļ							
9	End of year balance								<u> </u>	
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1ç	g, column	(a)) held as:					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
C	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c should equal 100%.									
3а	3a Are there endowment funds not in the possession of the organization that are held and administered for the organization									
	by: Yes No									
	(i) unrelated organizations 3a(i)									
	(ii) related organizations 3a(ii)									
b	b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?									
4										
Pa	rt VI Land, Buildings, and Equipn	1	I					_		
	Description of property	(a) Cost or of basis (invest	I		st or other s (other)		Accumulat epreciation		(d) Book	value
1a	Land				88,903	•			88	,903.
b	Buildings			5	18,702	•	158,1	23.		,579.
c	Leasehold improvements							İ		
d	Equipment									
е	Other				17,987	•	16,6	58.	1	,329.
Tota	I. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Pan	t X, colun	nn (B), line	10(c).)	-		<b>&gt;</b>	450	,811.

Schedule D (Form 990) 2012

	AMERICA LOCA		1243 92	-0013107 Page 3
Part VII Investments - Other Securities. Se			··	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	valuation: Cost or end	d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				<del> </del>
(A)				<del></del>
(B)		<del></del>		<del></del>
(C)				
(D)				
(E) (F)				
(G)				
				<del></del>
(1)			·	·· <del>·</del>
Total. (Col (b) must equal Form 990, Part X, col (B) line 12)				··· · · · · · · · · · · · · · · · · ·
Part VIII Investments - Program Related. S	ee Form 990, Part X, lin	e 13.	· · · · · · · · · · · · · · · · · · ·	
(a) Description of investment type	(b) Book value		valuation: Cost or end	d-of-year market value
(1)				
(2)				
(3)				
(4)			<u> </u>	
(5)				
(6)				
(7)				
(9)				
(10)				
Total (Col (b) must equal Form 990, Part X, col (B) line 13 ) ▶ Part IX Other Assets. See Form 990, Part X, line	15	<u></u>		
L	Description		-	(b) Book value
(1)	Document			(b) Book value
(2)				
(3)	-			
(4)				· · · · · · · · · · · · · · · · · · ·
(5)				,
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col. (B) lin			<u> </u>	
Part X Other Liabilities. See Form 990, Part X,	line 25.		777	
1. (a) Description of liability	-	(b) Book value	_	
(1) Federal income taxes				
(2)				
(3)			_	
(4)				
(5)				
<u>(6)</u>		<del></del>		
(7) (8)		<del></del>	_	
			-[	
<u>(9)</u> (10)		·	1	
(11)		<del></del>	1	
Total. (Column (b) must equal Form 990, Part X, col (B) lin	ne 25 )		†	
2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the te		e organization's financia	al statements that re-	ports the organization's
liability for uncertain tax positions under FIN 48 (ASC				
· · · · · · · · · · · · · · · · · · ·				

UNITED BROTHERHOOD OF CARPENTERS AND 92-0013107 Page 4 JOINERS OF AMERICA LOCAL UNION NO. 1243 Schedule D (Form 990) 2012 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2a Net unrealized gains on investments 2b Donated services and use of facilities Recoveries of prior year grants 2c d Other (Describe in Part XIII) 2d Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990. Part IX, line 25: Donated services and use of facilities 2a Prior year adjustments 2b c Other losses 2c d Other (Describe in Part XIII.) 2d Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990. Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 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.

Schedule D (Form 990) 2012

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

# 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

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED BROTHERHOOD OF CARPENTERS AND JOINERS OF AMERICA LOCAL UNION NO. 1243

Employer identification number 92-0013107

COLICIO DI ILIBITIDI DOID CITTO IL CONTROL DE CONTROL D
FORM 990, PART I, ITEM K, OTHER ORGANIZATION TYPE:
LABOR UNION
FORM 990, PART VI, SECTION A, LINE 6: DUES PAYING MEMBERS OF THE LABOR
UNION
FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS IN GOOD STANDING VOTE TO
ELECT MEMBERS OF THE GOVERNING BODY
FORM 990, PART VI, SECTION A, LINE 7B: LARGE AND UNUSUAL TRANSACTIONS
TAKEN BEFORE THE MEMBERSHIP FOR APPROVAL
FORM 990, PART VI, SECTION B, LINE 11: FORM 990 REVIEWED BY THE GOVERNING
BODY PRIOR TO FILING
FORM 990, PART VI, SECTION C, LINE 19: AVAILABLE ON REQUEST
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:
REMOVE THE BEGINNING BALANCE OF THE PAC ACCOUNT -12,405.
FORM 990, PART XII, LINE 2C
THE PROCESS HAS NOT CHANGED FROM THAT OF THE PRIOR YEAR

	<del></del>		<del></del>
Current Year Deduction	14,097. 14,097. 802.	0. 14,899.	•
Current Sec 179	0 0	0 0	
Accumulated Depreciation	144,026. 144,026. 15,856.	0.	
Basis For Depreciation	518,702. 518,702. 17,987.	88,903. 88,903. 625,592.	
Reduction in Basis	° ¢	0 0	
Bus % Excl			
Unadjusted Cost Or Basis	518,702. 518,702. 17,987.	88,903. 88,903. 625,592.	
No No	17		— <del></del>
Life	39.0017		
Method	S. S.	<u> </u>	
Date Acquired	VARIESSI.	VARIESL	
Description	BUILDINGS  * 990 PAGE 10 TOTAL BUILDINGS FURNITURE & FIXTURES OFFICE FURNITURE 3AND EQUIPMENT * 990 PAGE 10 TOTAL FURNITURE & FIXTUR	LAND  * 990 PAGE 10 TOTAL LAND  * GRAND TOTAL 990  PAGE 10 DEPR	
Asset No	ν	pref	

(D) - Asset disposed

228102 05-01-12

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction