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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 private foundations)

Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 2013

Open to Public Inspection

For the 2013 calendar year, or tax year beginning 2013, and ending D Employer Identification Number C Name of organization UNITED STEELWORKERS 7-00001 LOCAL Check if applicable Address change 35-0679800 Doing Business As Number and street (or P O box if mail is not delivered to street address) Telephone number Name change Initial return 2045 SCHRAGE AVENUE (219) 659-1181 City or town, state or province, country, and ZIP or foreign postal code Terminated 46394 **G** Gross receipts \$ 2,212,383 Amended return WHITING ΙN H(a) Is this a group return for subordinates? F Name and address of principal officer Application pending Yes H(b) Are all subordinates included?
If 'No,' attach a list (see instructions) MICHAEL N. BOYD 3 CARIBOU COURT BOLINGBROOK IL 60490 (insert no.) Tax-exempt status 501(c)(3) X 501(c) (5 4947(a)(1) or H(c) Group exemption number Website: ► USW7-1.ORG Form of organization X Corporation Trust Association Other ► L Year of formation 1937 M State of legal domicite ΙN Part I Summary Bnefly describe the organization's mission or most significant activities REPRESENT 1,118 UNION MEMBERS RIGHTS, NEGOTIATE COLLECTIVE BARGAINING AGREEMENTS FOR MEMBERS' Activities & Governance BENEFITS AND WORKING CONDITIONS, AND PROTECT THE RIGHTS OF MEMBERS UNDER THOSE AGREEMENTS AND FEDERAL AND STATE LAWS. If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 076 Total number of individuals employed in calendar year 2013 (Part V, line 2a) . . 5 16 Total number of volunteers (estimate if necessary) 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 . 7a -1,771.b Net unrelated business taxable income from Form 990-T, line 34 -1.771.Prior Year **Current Year** Contributions and grants (Part VIII, line 1h) 603,879 625,616. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 90,396 244,234. 9,987. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 6,503. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) . 704,262 876,353. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 5,119 7,484. Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10), 160,387 165,684. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25)REC Other expenses (Part IX, column (A), lines 11a-1 d. 183,533 192,911. Total expenses. Add lines 13-17 (must equal Part >>> 349,039 366,079. Revenue less expenses Subtract line 18 from line 16 355,223. 510,274. **End of Year** Beginning of Current Year 20 Total assets (Part X, line 16) . . 3,128,057. 3,638,680. 21 Total liabilities (Part X, line 26) 349. 698. Net assets or fund balances Subtract line 21 from line 20 . . 3,127,708. 3,637,982 Signature Block Under penalties of perjury, I declare that I have examined too return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Date Sign Here MICHAEL N BOYD PRESIDENT Type or print name and title Print/Type preparer's name Date Check X if Ronald W. 05/07/14 Borto P00670188 Paid **Preparer** Borto & Borto CPA's Firm's name Use Only Firm's address 1802 Robin Hood Blvd. Firm's EIN 8 35-1381228 (219) 865-3500 Schererville IN 463751844 Phone no Yes

Form 990 (2013)

TEEA0101 11/08/13

| Form | 1990 (2013) UNITED STEELWORKERS 7-00001 LOCAL | 35-0679800 | Page 2 |
|------|---|--|---------------------|
| Par | till Statement of Program Service Accomplishments | | |
| | Check if Schedule O contains a response or note to any line in this Part III | <u> </u> | <u></u> . [_ |
| 1 | Briefly describe the organization's mission: | | |
| | REPRESENT 1,076 LOCAL UNION MEMBERS' RIGHTS, NEGOTIATE COLLECTIVE | | |
| | BARGAINING AGREEMENTS FOR MEMBERS' BENFITS AND WORKING CONDITIONS | <u> </u> | |
| | See Form 990, Page 2, Part III, Line 1 (continued) | | |
| | | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the | | |
| | Form 990 or 990-EZ? | [] Y | es X No |
| | If 'Yes,' describe these new services on Schedule O. | | . — |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services | ? ∐ ` | res X No |
| | If 'Yes,' describe these changes on Schedule O. | | |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount | as measured by exp of grants and alloca | enses. Itions to |
| | others, the total expenses, and revenue, if any, for each program service reported. | | |
| | | | |
| 4 a | (Code:) (Expenses \$7, 484. including grants of \$) (F | Revenue \$ |) |
| | FRATERNAL ORDER OF POLICE \$220 | | |
| | INSTITUTE FOR GLOBAL LABOUR & HUMAN RIGHTS \$1,200 | | |
| | LAKE COUNTY POLICE ASSOC. LOCAL #72 \$200 | | |
| | FRATERNAL ORDER OF POLICE, LAKE COUNTY, IN \$220 | | |
| | NATIONAL CHILD SAFETY COUNCIL \$144 | | |
| | LAKE AREA UNITED WAY \$2,000 | | |
| | WHITING ELKS LODGE - GREAT LAKES NAVAL SERVICEMEN'S CHRISTMAS DI | NNER \$250 | |
| | WHITING ELKS LODGE #1273 - WHITING FIRE VICTIMS BENEFIT \$1,500 | | |
| | OPERATION CARE \$1,000 | | |
| | ALLIANCE FOR CLEAN RURAL ENVIRONMENT - ACRU LEGAL DEFENSE FUND \$ | 250 | |
| | SOAR CHAPTER 31-9 - SOAR SCHOLARSHIP \$500 | | |
| | | | |
| 4 b | (Code:) (Expenses \$1, 200. including grants of \$) (F | Revenue \$ |) |
| | LEGAL FEES FOR CONSULTATIONS RE: EMPLOYEE RIGHTS, ETC. | | |
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| | | | |
| 4 c | (Code:) (Expenses \$ 6,895. including grants of \$) (Fig. 1) | Revenue \$ |) |
| | LABOR LAW LIBRARY - EXPENSE OF LABOR LAW LIBRARY ONLINE SUBSCRIP | | ′ |
| | FOR RESEARCH PURPOSES REGARDING EMPLOYEE RIGHTS UNDER FEDERAL AND | | - |
| | STATE LABOR LAWS AND OTHER LABOR RELATED PUBLICATIONS | | |
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| | | | |
| 4 d | Other program services. (Describe in Schedule O.) | | |
| | (Expenses \$ including grants of \$) (Revenue \$ | |) |
| 4 e | Total program service expenses ► 15,579. | | |
| BAA | TEEA0102 07/02/13 | F | orm 990 (2013) |

| 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A | X X |
|---|-------------|
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I | x x x |
| for public office? If 'Yes,' complete Schedule C, Part I | x x x |
| In effect during the tax year? If 'Yes,' complete Schedule C, Part II | X X |
| assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III | X X |
| to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, | X |
| Part I | 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 | |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III | V |
| 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 | _ X |
| 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 | _x |
| 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. | が |
| 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 | 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 | Х |
| 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 | Х |
| e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X | <u> </u> |
| 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 | Х |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII | |
| 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 | Х |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E | Х |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? | 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 | х |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV | Х |
| Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV | х |
| 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) | х |
| Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II | Х |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III | х |
| 20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H | Х |
| b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? | |

Form 990 (2013) UNITED STEELWORKERS 7-00001 LOCAL

Partity Checklist of Required Schedules (continued)

| | | | Yes | No |
|------|---|------|--------|----------|
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II | 21 | х | _ |
| 22 | Did the organization report more than \$5,000 of grants or 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 |
| 24 a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a | 24a | | Х |
| t | 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 | | |
| c | I Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year? | 24d | | |
| 25 a | 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 | | <u> </u> |
| t | 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 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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 | | Х |
| 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 | | Х |
| t | A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV | 28b | | X |
| c | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If Yes, 'complete Schedule L, Part IV | 28c | | X |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M | 29 | | Х |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M | 30 | | Х |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? 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 Schedule N, Part II | 32 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If Yes,' complete Schedule R, Part I | 33 | | Х |
| 34 | Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1 | 34 | х | |
| 35 a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | Х |
| t | of 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 | | X |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If Yes, complete Schedule R, Part V, line 2 | 36 | | |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI | 37 | | Х |
| 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 | Х | |
| RAA | | Form | 990 (2 | 00121 |

| | Check if Schedule O contains a response or note to any line in this Part V | | | . [|
|------|--|------|-----|-----|
| | | | Yes | No |
| 1 a | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable | | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | | | |
| C | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1 c | | |
| 2 a | 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 16 | | | |
| | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2 b | X | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | |
| 3 a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3 a | X | |
| | If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O | 3 b | Х | |
| | 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)? | 4 a | | Х |
| | See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. | | | |
| 5 2 | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5 a | | X |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5 b | | X |
| | If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? | 5 c | | |
| | | 30 | | |
| | 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? | 6 a | | Х |
| b | If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6 b | | |
| | Organizations that may receive deductible contributions under section 170(c). | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7 a | | X |
| b | If 'Yes,' did the organization notify the donor of the value of the goods or services provided? | 7 b | | |
| C | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7с | | X |
| d | If 'Yes,' indicate the number of Forms 8282 filed during the year | | | - |
| | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7 e | | X |
| | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7 f | | X |
| | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7 g | | |
| | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a | | | |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the | 7 h | | |
| 0 | supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | |
| а | Did the organization make any taxable distributions under section 4966? | 9 a | | |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | 9 b | | |
| | Section 501(c)(7) organizations. Enter: | | | |
| | Initiation fees and capital contributions included on Part VIII, line 12 | l | - 1 | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b | | | |
| 11 | Section 501(c)(12) organizations. Enter: | | | |
| а | Gross income from members or shareholders | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) | | | |
| 12 a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12 a | | |
| | of Yes, enter the amount of tax-exempt interest received or accrued during the year 12b | | | |
| | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| | Is the organization licensed to issue qualified health plans in more than one state? | 13 a | | |
| | Note. See the instructions for additional information the organization must report on Schedule O. | | | |
| t | 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 | | | |
| c | Enter the amount of reserves on hand | | | |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | Х |
| | If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O | 14 b | | |

| Pai | rt VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b bel a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change Schedule O. See instructions. | ow, an s in | d for | |
|------------|---|----------------|---------------------------------|--|
| | Check if Schedule O contains a response or note to any line in this Part VI | | | . (x |
| Sec | ction A. Governing Body and Management | | | |
| | | | Yes | No |
| 1 a | a Enter the number of voting members of the governing body at the end of the tax year | 6 | | |
| ı | b Enter the number of voting members included in line 1a, above, who are independent 1b | 6 | | 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? | | | - x |
| 3 | | | | |
| 4 | Did the organization make any significant changes to its governing documents | | | X |
| _ | since the prior Form 990 was filed? | | <u> </u> | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | | <u> </u> | X |
| 6 7 a | Did the organization have members or stockholders? | | X | |
| ŧ | b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? | 7 b | x | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by | 7.5 | <u> </u> | |
| | the following a The governing body? | 8 a | х | |
| | b Each committee with authority to act on behalf of the governing body? | | | ┼ |
| | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the | 100 | | ├ |
| | organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O | 9 | | Х |
| <u>Sec</u> | ction B. Policies (This Section B requests information about policies not required by the Internal Rev | enue C | | |
| | | | Yes | No |
| | a Did the organization have local chapters, branches, or affiliates? | 10 a | ├ | X |
| | operations are consistent with the organization's exempt purposes? | 10 Ь | | |
| 11 a | a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | | Х | |
| ŧ | b Describe in Schedule O the process, if any, used by the organization to review this Form 990. | ļ | | |
| | a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 · · · · · · · · · · · · · · · · · · | 12 a | | Х |
| t | b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12 b | | |
| (| c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done | 12 c | | |
| 13 | Did the organization have a written whistleblower policy? | 13 | | X |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | <u> </u> | 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? | | | |
| á | a The organization's CEO, Executive Director, or top management official | 15 a | X | 1 |
| t | b Other officers of key employees of the organization | 15 b | Х | |
| | If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) | 1 | | |
| 16 | a 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 | | x |
| ŀ | 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 taken steps to safeguard the organization's exempt status with respect to such arrangements? | 16 b | | |
| Sec | ction C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed ► Indiana | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) availanspection. Indicate how you make these available. Check all that apply | ole for pi | nplic | |
| | 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 makes its governing documents, conflict of interest policy, and financial statements avaithe public during the tax year | lable to | | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization | tion | | |
| BAA | | 219) Form | 6 <u>59</u> – 1 990 (| |

Page 7

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

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

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

| Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. | | | | | | | | | | |
|--|--|--------------------------------|-----------------------|---------|--|---|--|-----------------|-----------------|---|
| | | (C) | | | | | | | | |
| (A) Name and Title | (B) Average hours per week (list | one bo | | | (D) Reportable compensation from the organization | (E) Reportable compensation from related organizations | (F) Estimated amount of other compensation | | | |
| | any hours for related organiza- tions below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | (W-2/1099-MISC) | (W-2/1099-MISC) | from the organization and related organizations |
| | 40.00 | 1 | | Х | | | | 5,700. | 0. | 0. |
| (2) HAROLD J. BAXTER VICE PRESIDENT | 40.00 | | | Х | | | | 5,400. | 0. | 0. |
| (3) DAVID J. DANKO SECRETARY-TREASURER | 40.00 | | | Х | | | | 7,103. | 0. | 0. |
| (4) MICHAEL R WOLFF REPRESENTATIVE | 40.00 | | | Х | | | | 6,293. | 0. | 0. |
| (5) LAWRENCE C SINCLAIR REPRESENTATIVE | 40.00 | | | Х | | | | 6,344. | 0. | 0. |
| | 40.00 | | | X | | | | 7,455. | 0. | 0. |
| _(7)_TIMOTHY_ENRIGHTREPRESENTATIVE | 40.00 | | | Х | | | | 6,306. | 0.1 | 0. |
| | 40.00 | | | Х | | | | 5,400. | 0. | 0. |
| _(9)_STEPHEN_M_HALJCSIK REPRESENTATIVE | 40.00 | | | Х | | | | 1,350. | 0. | 0. |
| (10) MACK G FOREMAN REPRESENTATIVE | 40.00 | | | Х | | | | 5,400. | 0. | 0. |
| (11) BRIDGET_BECKERREPRESENTATIVE | 40.00 | | | Х | | | | 4,050. | 0. | 0. |
| (12) MARY E FERNANDO DELEGATE | 24.00 | | | Х | | | | 944. | 0. | 0. |
| (13) GEORGIATTE SMITH DELEGATE | 24.00 | | | Х | | | | 906. | 0. | 0. |
| (14) | | | | | | | | | | |

| Part VII Section A. Officers, Directors, Trus | | Key | <u>Em</u> | | | es, | and | d Highest Con | pensated Emp | loyee | S (conti | nued) |
|--|---|-------------|--|---|--------------|--|-------------|-------------------------------------|--|------------------|--|-------|
| (A) Name and title | | | (D) Reportable compensation from the organization | (E) Reportable compensation from related organizations | amou | (F) Estimated amount of other compensation | | | | | | |
| | (list any hours for related organiza - tions below dotted line) | or director | nstitutional trustee | Officer | Key employee | Highest compensated employee | ormer | the organization (W-2/1099-MISC) | related organizations (W-2/1099-MISC) | fr org: an | om the anization d related anizations | |
| <u>(15)</u> | | | | | | | | | | | | |
| (16) | 1 | ┢ | | | | | | | | | | |
| (17) | | | | | | | _ | | | | • | |
| (18) | | <u> </u> | | | | | | | | | - | |
| (19) | | 1 | | | | | | | | | - | |
| (20) | | † | | | | | | | | | | |
| (21) | | | | | | | | | | | | |
| (22) | | | | | | | | | | | | |
| (23) | | | | | | | | | | | | |
| (24) | | | | | | | | | | | | |
| (25) | | | | _ | - | | | | | | | |
| 1 b Sub-total | | | | | | | > | 62,651. | 0. | | | 0. |
| d Total (add lines 1b and 1c) | | | | | | | eive | 62,651. d more than \$100,0 | 0. 000 of reportable cor | npensa | tion | 0. |
| from the organization • 0 | | | | | | | | | · | | Yes | No |
| 3 Did the organization list any former officer, director, on line 1a? If 'Yes,' complete Schedule J for such inc | | | | | | | | | | . 3 | | X |
| 4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the such individual | an \$150, | 000? | If 'Y | 'es' (| com | plete | Scl | hedule J for | | . 4 | | X |
| 5 Did any person listed on line 1a receive or accrue co for services rendered to the organization? If 'Yes,' co | mpensat | ion fr | om a | any | unre | lated | d org | ganization or individ | | . 5 | | X |
| Section B. Independent Contractors 1 Complete this table for your five highest compensate | d ındepe | nden | t cor | ntrac | ctors | that | rec | eived more than \$1 | 100,000 of | | | |
| compensation from the organization Report compen | | r the | cale | nda | r yea | ar en | dıng | (B) | | | C) | |
| Name and business addres | SS | | | | | | | Description o | f services | Compe | nsation | 1 |
| | | | | | | | | | | | | |
| | | | | _ | | | | | | | | |
| Total number of independent contractors (including to \$100,000 of compensation from the organization fr | out not lin | nited | to th | ose | liste | ed ab | ove |) who received mo | re than | | | |
| BAA | | TEEA | 108 | 11/1 | 1/13 | | | | | Form | 990 (2 | 2013) |

| _ | | Check if Schedule O co | ontains a respo | nse or note to any lir | | | (C) | |
|---|----------|--|----------------------|---------------------------------------|----------------------|--|---|--|
| | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| 5 5 5 | 1 a | Federated campaigns . | | | | _ | | |
| E S | þ | Membership dues | ⊢ | 625,616. | | | | |
| A S | C | Fundraising events | | | | | | |
| 유원 | d | Related organizations | | | | | | ļ |
| SKS SKS | е | Government grants (contribution | · | | | | | |
| 롲삒 | f | All other contributions, gifts, grasimilar amounts not included at | ants, and bove 1 f | | | | | |
| PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS | a | Noncash contributions included | | | | | | |
| AND | 9 h | Total. Add lines 1a-1f | | | 625,616. | | | |
| ĕ | | | | Business Code | 023,010. | | | |
| | 2 a | | | | - | _ | | |
| 2 | b | | | - | | · | | |
| 읳 | С | | | | | | | |
| SE | đ | | | | | | | |
| A | е | | | | | | | |
| 뜅 | f | All other program service | | | | | | |
| <u>æ</u> | <u>g</u> | Total. Add lines 2a-2f . | | | | | | |
| ļ | 3 | Investment income (include other similar amounts). | | | 00.660 | 0 | | 00.660 |
| | 4 | Income from investment of | | | 80,668. | 0. | 0. | 80,668. |
| | 5 | Royalties | • | · · · · · · · · · · · · · · · · · · · | | | | |
| } | | Γ | (ı) Real | (ii) Personal | | | | |
| İ | 6 a | Gross rents | 3,000 | | | | | |
| | b | Less: rental expenses | 4,771 | | į | | | |
| | | Rental income or (loss) | <u>-1,771</u> | | | | - | |
| ĺ | d | Net rental income or (loss | | | -1,771. | 0. | -1,771. | 0. |
| | 7 a | Gross amount from sales of | (r) Securities | (II) Other | | | | |
| - | | assets other than inventory. | 1,494,825 | · | | | | |
| | b | Less cost or other basis and sales expenses | 1 221 250 | | | | | |
| Ì | c | Gain or (loss) | 1,331,259 163,566 | | | | | |
| | | Net gain or (loss) | | | 163,566. | 0. | 0. | 163 <u>,</u> 566. |
| | | Gross income from fundra (not including \$ | | | 103,300. | | <u> </u> | 103,300. |
| | | of contributions reported | on line 1c) | | | | | |
| 2 | | See Part IV, line 18 | | а | | | | |
| OTHER REVEN | b | Less. direct expenses . | | b | | | | |
| 0 | C | Net income or (loss) from | fundraising eve | ents | | | | |
| | | Gross income from gamir See Part IV, line 19 | | a | | | | |
| i | | Less direct expenses . | | b | | | = | |
| | С | Net income or (loss) from | gaming activiti | es | | <u> </u> | | |
| | | Gross sales of inventory, and allowances | | a | | | | |
| | | Less cost of goods sold | | b | | | | |
| | с | Net income or (loss) from Miscellaneous Revenue | | | | | | |
| | 11 ^ | | | Business Code | | · | | |
| | | REIMBURSEMENTS | | 900099 | 6,113. | 6,113. | 0. | 0. |
| į | C | FROM MEMBERS TO DISBURSE (| | 900099 | 913. 1,248. | 913. 1,248. | 0. | 0. |
| | | All other revenue | | | 1,248. | 1,248. | | |
| | | Total. Add lines 11a-11d | | | 8,274. | | | |
| | 12 | Total revenue. See instru | uctions | | 87 <u>6,35</u> 3. | 8,274. | -1,771. | 244,234. |

Part IX | Statement of Functional Expenses

| | oot include amounts reported on lines b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|----|--|-----------------------|------------------------------|---|--------------------------------|
| 1 | Grants and other assistance to governments and organizations in the United States See Part IV, line 21 | 7,484. | 7,484. | | |
| 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. | | | | 1 |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 62,651. | | 62,651. | |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 65,002. | | 65,002. | |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 14,814. | | 14,814. | |
| 9 | Other employee benefits | 17,310. | | 17,310. | |
| 10 | Payroll taxes | 5,907. | | 5,907. | |
| | Fees for services (non-employees) | | | 5,907. | |
| | Management | 1 | | 1 | |
| | Legal | 1,200. | 1,200. | | |
| | Accounting | 11,710. | 1,200. | 11,710. | |
| • | Lobbying | | | 11,/10. | |
| | Professional fundraising services See Part IV, line 17 | | | | |
| | Investment management fees | 38,026. | | 38,026. | |
| | Other (If line 11g amt exceeds 10% of line 25, column | 30,020. | | 30,020. | |
| | (A) amount, list line 11g expenses on Schedule O) | | - | | |
| | Advertising and promotion | | | | |
| 13 | Office expenses | 13,771. | | 13,771. | |
| 14 | Information technology | 2,646. | | 2,646. | |
| 15 | Royalties | 10.054 | | | |
| 16 | Occupancy | 10,354. | | 10,354. | |
| 17 | Travel | | | | |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 11,362. | | 11,362. | |
| 20 | Interest | 10. | | 10. | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 12,756. | | 12,756. | |
| 23 | Insurance | | | | |
| 24 | Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| а | ENTERTAINMENT AND GIFTS | 104. | | 104. | |
| ь | PER CAPITA TAX | 3,270. | | 3,270. | |
| | LABOR LAW LIBRARY SUBSCRIPTION | 6,895. | 6,895. | | |
| | UNION ORGANIZATION AND PROMOTION | 80,807. | <u> </u> | 80,807 | |
| | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 366,079. | 15,579. | 350,500. | |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720) | | | | |

Part X | Balance Sheet

| | | Check it Schedule O contains a response or note to any line in this Part X | (A) Beginning of year | | (B) End of year |
|----------|------|--|--------------------------|------|--------------------|
| | 1 | Cash – non-interest-bearing | 0. | 1 | |
| - | 2 | Savings and temporary cash investments | 72,740. | 2 | 146,457. |
| | 3 | Pledges and grants receivable, net | | 3 | |
| į | 4 | Accounts receivable, net | | 4 | |
| | 5 | 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 instructions) Complete Part II of Schedule L | | 6 | |
| AS | 7 | Notes and loans receivable, net | | 7 | |
| S | 8 | Inventories for sale or use | | 8 | |
| ASSETS | 9 | Prepaid expenses and deferred charges | | 9 | |
| | 10 a | Land, buildings, and equipment cost or other basis. | | | |
| | | Complete Part VI of Schedule D | | | |
| | b | Less accumulated depreciation | 253,048. | 10 c | <u>258,757.</u> |
| 1 | 11 | Investments – publicly traded securities | 2,802,265. | 11 | 3,233,462. |
| | 12 | Investments — other secunities. 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 | 4. | 15 | 4. |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 3,128,057. | 16 | 3,638,680. |
| | 17 | Accounts payable and accrued expenses | | 17 | |
| | 18 | Grants payable | | 18 | |
| | 19 | Deferred revenue | | 19 | |
| L | 20 | Tax-exempt bond fiabilities | | 20 | |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| ABLLLTL | 22 | 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 | |
| į | 23 | Secured mortgages and notes payable to unrelated third parties | | 23 | |
| S | 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 | 349. | 25 | 698. |
| | 26 | Total liabilities. Add lines 17 through 25 | 349. | 26 | 698. |
| NET | | Organizations that follow SFAS 117 (ASC 958), check here ► X and complete | | | |
| | | lines 27 through 29, and lines 33 and 34. | | | |
| ASSETS | 27 | Unrestricted net assets | <u>2,733,198.</u> | 27 | <u>3,230,203.</u> |
| Ţ | 28 | Temporarily restricted net assets | <u>394,510.</u> | 28 | 407,779. |
| O R | 29 | Permanently restricted net assets | | 29 | |
| | | Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34. | | | |
| FUND | 30 | Capital stock or trust principal, or current funds | | 30 | |
| B | 31 | Paíd-ın or capital surplus, or land, building, or equipment fund | | 31 | |
| Ļ | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| BALAZCES | 33 | Total net assets or fund balances | 3,127,708. | 33 | 3,637,982. |
| É | 34 | Total liabilities and net assets/fund balances | 3,128,057. | 34 | 3,638,680. |
| RΔ | | | | | Form 990 (2013) |

TEEA0111 07/08/13

| -orn | 1990 (2013) UNITED STEELWORKERS 7-00001 LOCAL 35- | 06/9 | 800_ | | Pa | ge 12 |
|------|--|--------------|-------|-----------|--------------|-----------------|
| Pa | rt XI Reconciliation of Net Assets | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XI | <u></u> | | <u></u> . | | $\cdot \square$ |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | 87 | 6,3 | 53. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | | 6,0 | |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | | | 0,2 | |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | 3,12 | | |
| 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 | | | | |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, | | | | | |
| | column (B)) | 10 | ļ | 3,63 | 37 <u>,9</u> | <u>82.</u> |
| Pa | rt XII Financial Statements and Reporting | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | · <u>· ·</u> | | | | . [X] |
| | | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990. | н ва | sis [| | | |
| | If the organization changed its method of accounting from a prior year or checked 'Other,' explain | | | | | l |
| | in Schedule O | | l | _ | J | |
| 2 | a Were the organization's financial statements compiled or reviewed by an independent accountant? | | | 2 a | } | Х |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both | | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | _ | - | |
| | b Were the organization's financial statements audited by an independent accountant? | | | 2 Ы | x | 1 |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate | | 1 | - | | - |
| | basis, consolidated basis, or both: | | Ì | 1 | | 1 |
| | X Separate basis Consolidated basis Both consolidated and separate basis | | ļ | | , | 1 |
| | c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud | ıt, | ľ | | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | | ٠٠ | 2 c | | Х |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | | | | _ | |
| 3 | a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | | [| 3 a | | Х |
| | b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a | udıt | | | | |
| | or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | | 3 Ь | | 1 |

Form **990** (2013)

BAA

Supporting Statement of:

Form 990 p 9/Membership Dues

| Description | Amount |
|------------------------------|----------|
| REGULAR DUES INITIATION FEES | 625,556. |
| Total | 625,616. |

Supporting Statement of:

Form 990 p 9/Real Rental Expenses

| Description | Amount |
|----------------------------------|--------------------------|
| DEPRECIATION MAINTENANCE REPAIRS | 1,010. 244. 3,100. |
| Total | 417. |

Supporting Statement of:

Form 990 p 10/Depreciation column (C)

| Description | Amount |
|---|--------------------|
| TOTAL DEPRECIATION PER FORM 4562 LESS: DEPRECIATION TAKEN AGAINST RENTAL INCOME | 13,766. -1,010. |
| Total | 12,756. |

Supporting Statement of:

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

OMB No 1545-0047

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. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

| • 9 | Section | 501(c)(4), (5), or (6) orga | anizations: Complete Part III | | | |
|------|--|------------------------------|--|----------------------------|--|--|
| Name | of organiz | ation | | | Employer identifica | ition number |
| UN1 | TED | STEELWORKERS 7 | -00001 LOCAL | | 35-067980 | |
| Par | t I-A | Complete if the or | rganization is exempt under section | on 501(c) or is a s | section 527 organi | zation. |
| 1 | Provid | e a description of the or | ganization's direct and indirect political campa | aign activities in Part IV | / | |
| 2 | Politica | • | | | • | <u> </u> |
| 3 | | | · · · · · · · · · · · · · · · · · · · | | | |
| Par | t I-B | Complete if the or | rganization is exempt under section | on 501(c)(3). | | |
| 1 | Enter | the amount of any excise | e tax incurred by the organization under secti | on 4955 | ► \$ | |
| 2 | Enter | the amount of any excise | e tax incurred by organization managers unde | er section 4955 | | |
| 3 | | _ | ection 4955 tax, did it file Form 4720 for this | | | |
| 4 a | a Was a | correction made? | | | • | Yes No |
| | <u>- </u> | ,' describe in Part IV. | | | | |
| Par | | | rganization is exempt under section | | | |
| 1 | Enter | the amount directly expe | ended by the filing organization for section 52 | 7 exempt function activ | /ities ▶ \$ | |
| 2 | | | organization's funds contributed to other orga | | | |
| 3 | Total e | exempt function expendi | tures. Add lines 1 and 2. Enter here and on F | orm 1120-POL, | | |
| 4 | Did the | e filing organization file F | Form 1120-POL for this year? | | · · · · · · · · · · · · · · · · · · · | · · · Yes No |
| 5 | organi | zation made payments. | nd employer identification number (EIN) of al For each organization listed, enter the amour is received that were promptly and directly deaction committee (PAC). If additional space is | nt paid from the filing of | rganization's funds. Also olitical organization, suc | enter the |
| | | (a) Name | (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- |
| (1) | _ | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| (5) | | | | | | |
| (6) | | | | | | |

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

Schedule C (Form 990 or 990-EZ) 2013

| Schedule C (Form 990 or 990-EZ) 20 | ¹³ UNITED STEE | LWORKERS 7-00001 | LOCAL | 35-067 | 9800 Page 2 |
|--|---------------------------|---|---------------------------|-------------------------------------|-----------------------------|
| | the organization | n is exempt under se | | | |
| | | gs to an affiliated group (and | d list in Part IV each af | filiated group member's nar | ne, |
| | | share of excess lobbying ex | | | |
| B Check ► ☐ if the filin | g organization check | ed box A and 'limited contro | ol' provisions apply | | |
| | Limits on Lobbyi | | | (a) Filing organization's totals | (b) Affiliated group totals |
| 1 a Total lobbying expenditure | res to influence public | c opinion (grass roots lobby | ing) | | |
| b Total lobbying expenditure | res to influence a legi | islative body (direct lobbying | g) | . [| |
| c Total lobbying expenditur | res (add lines 1a and | 11b) | | | |
| d Other exempt purpose ex | xpenditures | · | | | |
| e Total exempt purpose ex | penditures (add lines | s 1c and 1d) | | , | |
| f Lobbying nontaxable am | ount Enter the amou | int from the following table ii | n | | |
| If the amount on line 1e, col | | The lobbying nontaxable | | | |
| Not over \$500,000 | | 20% of the amount on line 1e. | | | |
| Over \$500,000 but not over \$1 | 1,000,000 | \$100,000 plus 15% of the excess | s over \$500,000 | | |
| Over \$1,000,000 but not over \$ | \$1,500,000 | \$175,000 plus 10% of the excess | | | |
| Over \$1,500,000 but not over \$ | \$17,000,000 | \$225,000 plus 5% of the excess | over \$1,500,000. | | |
| Over \$17,000,000 | | \$1,000,000. | | | |
| g Grassroots nontaxable a | mount (enter 25% of | line 1f) | | | |
| h Subtract line 1g from line | e 1a. If zero or less, e | nter -0 | | , | |
| i Subtract line 1f from line | 1c. If zero or less, er | nter -0 | | | |
| | | r line 1h or line 1ı, did the or | | | · · · Tyes No |
| (Som | e organizations tha | 4-Year Averaging Period L t made a section 501(h) el | ection do not have to | | |
| | | ns below. See the instructi | | | |
| | | | T | | |
| Calendar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) Total |
| 2 a Lobbying non-taxable amount | | | | | |
| b Lobbying ceiling amount (150% of line 2a, column (e)) · · · · | | | | | |
| c Total lobbying expenditures | | | | | |
| d Grassroots nontaxable amount | | | | | |

f Grassroots lobbying expenditures BAA

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

Schedule C (Form 990 or 990-EZ) 2013

| Part II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)). | T file | d For | m 5768 | | 3 |
|---|------------------|-----------------|-------------------------|-------|----|
| | (a | 1) | | (b) | |
| For each 'Yes' response to lines 1a through 1ı below, provide ın Part IV a detailed description of the lobbying activity. | Yes | No | | ount | |
| 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 | - | *= - | | | |
| a Volunteers? | | | | | |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | | | - |
| c Media advertisements? | | | | | |
| d Mailings to members, legislators, or the public? | | | | | |
| e Publications, or published or broadcast statements? | | | | | |
| f Grants to other organizations for lobbying purposes? | | | | | |
| g Direct contact with legislators, their staffs, government officials, or a legislative body? | ļ | | | | |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | <u> </u> | | · | | |
| i Other activities? | | | | | |
| j Total. Add lines 1c through 1i | - | | | | |
| 2 a 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? | | | | | |
| Part III-A Complete if the organization is exempt under section 501(c)(4), section 501 section 501(c)(6). | (c)(5) | , or | | | |
| | _ | | | 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 |
| Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) answered 'Yes.' | (c)(5) Part I | , or s II-A, | section 5 line 3, is | 01(c) | |
| 1 Dues, assessments and similar amounts from members | | 1 | | | |
| 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). | | | | | |
| a Current year | | 2 a | | | |
| b Carryover from last year | | 2 b | | | |
| c Total | | 2 c | | | |
| 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | | 3 | | | |
| 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political | | | | | |
| expenditure next year? | | | | | |
| 5 Taxable amount of lobbying and political expenditures (see instructions) | | 5 | | | |
| Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group list), Part II-B, line 1 Also, complete this part for any additional information. | art II-A | , line 2 | 2, and | | |
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| Schedule C (Form 990 or 990-EZ) 2013UNITED STEELWORKERS 7-00001 LOCAL | 35-0679800 | Page 4 |
|---|-------------|----------------|
| Pant IV Supplemental Information (continued) | | |
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SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2013

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection Employer identification number

| IINTTE | D STEELWORKERS 7-00001 LOCAL | | | 35-0679800 |
|---------------|---|---|---|---|
| Part I | Organizations Maintaining Donor | | er Similar Funds | |
| <u> Faiti</u> | Complete if the organization answer | red 'Yes' to Form 990, P | art IV, line 6. | , 0, 7,000 and |
| | | (a) Donor advised to | funds | (b) Funds and other accounts |
| 1 To | al number at end of year | (=/ ====== | | (-) |
| | gregate contributions to (during year) | | | |
| _ | gregate grants from (during year) | | | |
| _ | gregate value at end of year | | | |
| 5 Dic | I the organization inform all donors and donor a the organization's property, subject to the organization's | dvisors in writing that the asse | ets held in donor advise | ed funds |
| 6 Did | the organization inform all grantees, donors, a | nd donor advisors in writing th | at grant funds can be i | used only |
| ımı | charitable purposes and not for the benefit of the benefit of the benefit of the benefit? | ne donor or donor advisor, or f | or any other purpose o | conferringYes No |
| Part II | Conservation Easements. Complete if the organization answer | red 'Yes' to Form 990, P | art IV, line 7. | |
| 1 Pu | rpose(s) of conservation easements held by the | organization (check all that a | pply) | |
| | Preservation of land for public use (e.g., recre | ation or education) | Preservation of an | historically important land area |
| | Protection of natural habitat | | Preservation of a c | ertified historic structure |
| | Preservation of open space | | | |
| 2 Co | mplete lines 2a through 2d if the organization hi | eld a qualified conservation co | ontribution in the form o | of a conservation easement on the |
| ias | t day of the tax year. | | Г | The state of the first |
| - Та | al number of concernation concerns | | } | Held at the End of the Tax Year |
| | al number of conservation easements al acreage restricted by conservation easemen | | L. | 2 a 2 b |
| | | | <u>-</u> | |
| | mber of conservation easements on a certified | • | ´ | 2 c |
| d Nu str | mber of conservation easements included in (c) ucture listed in the National Register - · · · · · | acquired after 8/17/06, and n | ot on a historic | 2 d |
| | mber of conservation easements modified, trans year > | sferred, released, extinguishe | d, or terminated by the | organization during the |
| 4 Nu | mber of states where property subject to conse | rvation easement is located > | | |
| | es the organization have a written policy regard | · , | • • | · |
| | d enforcement of the conservation easements it | | | |
| 6 Sta | iff and volunteer hours devoted to monitoring, in | especting, and enforcing consi | ervation easements du | ring the year |
| 7 Am | nount of expenses incurred in monitoring, inspec | cting, and enforcing conservat | ion easements during | the year |
| 8 Do | es each conservation easement reported on line d section 170(h)(4)(B)(ii)? | | | |
| 9 (n i | Part XIII, describe how the organization reports lude, if applicable, the text of the footnote to the servation easements. | conservation easements in its | revenue and expense | statement, and balance sheet, and |
| Part III | | tions of Art, Historical | Treasures, or Ot | her Similar Assets. |
| 1 a lf t | ne organization elected, as permitted under SFA | | <u>·</u> | pont and halance sheet works of |
| art | historical treasures, or other similar assets heli Part XIII, the text of the footnote to its financial s | d for public exhibition, educati | on, or research in furth | erance of public service, provide, |
| his | ne organization elected, as permitted under SFA torical treasures, or other similar assets held foi owing amounts relating to these items | AS 116 (ASC 958), to report in r public exhibition, education, | n its revenue statement or research in furtherai | t and balance sheet works of art, nce of public service, provide the |
| | Revenues included in Form 990, Part VIII, line | | | |
| (ii) | Assets included in Form 990, Part X | | | ▶ \$ |
| 2 If t | ne organization received or held works of art, hi ounts required to be reported under SFAS 116 | storical treasures, or other sin | nilar assets for financia | |
| | venues included in Form 990, Part VIII, line 1 . | | | . , ▶ \$ |
| b As | sets included in Form 990, Part X | | | ▶ \$ |

| Ochediae D (Louis 220) 5012 ONTIF | D SIEFTMOKVE | YK2 \-0000I | LUCAL | 33-0673 | 70UU | raye z |
|---|--|--|--|------------------------------|---------------------------------------|-----------|
| Part III Organizations Maintai | ning Collection | s of Art, Histo | rical Treasures, or | Other Similar Ass | ets (contil | nued) |
| Using the organization's acquisition items (check all that apply). | , accession, and oth | ner records, check | any of the following that a | are a significant use of its | collection | |
| a Public exhibition | | d Loan o | or exchange programs | | | |
| b Scholarly research | | e U Other | | | | |
| c Preservation for future generati | ons | | | | | |
| 4 Provide a description of the organiz Part XIII. | ation's collections a | nd explain how the | y further the organization | 's exempt purpose in | | |
| 5 During the year, did the organization to be sold to raise funds rather than | n solicit or receive d to be maintained a | onations of art, his s part of the organi | torical treasures, or other zation's collection? | sımılar assets | Yes | No |
| Part IV Escrow and Custodial line 9, or reported an ar | Arrangements | . Complete if the 1990, Part X, line | ne organization ansv e 21. | vered 'Yes' to Form | 990, Part | ΙV, |
| 1a Is the organization an agent, trustee | e, custodian, or othe | r intermediary for o | contributions or other ass | ets not included | Yes | No |
| b If 'Yes,' explain the arrangement in | | | | | | |
| | | | | | Amount | |
| c Beginning balance | | | | . 1c | | |
| d Additions during the year | | | | . 1 d | | |
| e Distributions during the year | | | | . 1 e | | |
| f Ending balance | | | | | | |
| 2 a Did the organization include an amo | ount on Form 990, F | Part X, line 21? | | | Yes | No |
| b If 'Yes,' explain the arrangement in | Part XIII Check her | e if the explantion | has been provided in Par | t XIII | | 니 |
| Part V Endowment Funds. Co | omplete if the or | ganization ans | wered 'Yes' to Form | 990, Part IV, line 10 |). | |
| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four ye | ears back |
| 1 a Beginning of year balance | | | · <u> </u> | | | |
| b Contributions | | | | | <u> </u> | |
| c Net investment earnings, gains, and losses | | | | | | |
| d Grants or scholarships | | | | | | |
| e Other expenditures for facilities and programs | | | | | | |
| f Administrative expenses | | | | | | |
| g End of year balance | | | | | | |
| 2 Provide the estimated percentage of | of the current year e | nd balance (line 1g | , column (a)) held as: | | · · · · · · · · · · · · · · · · · · · | |
| a Board designated or quasi-endown | nent - | 90 | | | | |
| b Permanent endowment ► | 90 | | | | | |
| c Temporarily restricted endowment | <u> </u> | 8 | | | | |
| The percentages in lines 2a, 2b, an | | | | | | |
| 3 a Are there endowment funds not in to organization by. | he possession of th | e organization that | are held and administere | ed for the | Yes | s No |
| (i) unrelated organizations | | | | | 3a(i) | |
| (ii) related organizations | | | | | 3a(ii) | |
| b If 'Yes' to 3a(II), are the related orga | | | | | . 3b | |
| 4 Describe in Part XIII the intended u | | ion's endowment fi | unds. | | | |
| Part VI Land, Buildings, and I | • • | | | | | |
| Complete if the organiz | ation answered | 'Yes' to Form 9 | 90, Part IV, line 11a | . See Form 990, Pa | rt X, line 1 | 10. |
| Description of property | | st or other basis investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book | value |
| 1 a Land | | | 18,000. | | 1 | 8,000. |
| b Buildings | | | 354,744. | 133,907. | 22 | 20,837. |
| c Leasehold improvements | | | | | | |
| d Equipment | | | 122,894. | 102,974. | 1 | 9,920. |
| e Other | | | | | | |
| Total. Add lines 1a through 1e (Column | (d) must equal Form | n 990. Part X. colui | mn (B), line 10(c)) | | 25 | 8.757 |

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Schedule **D** (Form 990) 2013

| Part VII Investments – Other Securities. Complete if the organization answered | Yes' to Form 990. P | art IV line 11b. See Form 990. Part X. | line 12 |
|---|--------------------------------|---|--------------|
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation Cost or end-of-year ma | |
| (1) Financial derivatives | | (b) Mothed of Validation Cool of the Crystal Ma | |
| (2) Closely-held equity interests | <u> </u> | | |
| (3) Other | | | |
| (A) | | | |
| (B) | | | |
| (C) | | | |
| (D) | | | |
| (E) | | | |
| (F) | | | |
| (G) | | | |
| (H) | | | |
| (I) | | | |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 12) . ▶ | | <u> </u> | |
| Part VIII Investments — Program Related. Complete if the organization answered " | Voc' to Form 000 D | art IV line 11a See Form 000 Bort V | lina 12 |
| (a) Description of investment type | (b) Book value | (c) Method of valuation: Cost or end-of-year | |
| | (b) Book value | (c) Wethod of Valuation. Cost of end-of-year | market value |
| (1) (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | - | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| (10) | | | |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 13) . ▶ | | | |
| Part IX Other Assets. | Vasita Farm 000 B | and NV See 11d Con France 200 Root V | E 45 |
| Complete if the organization answered " | res to Form 990, P | | Book value |
| (1) | <u>scription</u> | | DOOK VAIGE |
| (2) | | | · |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) (8) | | | _ |
| (9) | | | |
| (10) | | | - |
| Total. (Column (b) must equal Form 990, Part X, column (B), I | line 15) | - | |
| Part X Other Liabilities. | <i>me 10.)</i> | | |
| Complete if the organization answered 'Yes' to Fe | orm 990, Part IV, line 11 | e or 11f. See Form 990, Part X, line 25 | |
| (a) Description of liability | (b) Book value | | |
| (1) Federal income taxes | | | |
| (2) PAYROLL WITHHOLDING | 69 | 8. | |
| (3) | | | |
| (4) | | | |
| (5) (6) | | | |
| (7) | | - | |
| (8) | | | |
| (9) | | | |
| (10) | | | |
| (11) | | | |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 25) | ▶ 69 | 8. | |
| 2. Liability for uncertain tax positions in Part XIII, provide the text of the foot | | | ncertain |
| tax positions under FIN 48 (ASC 740) Check here if the text of the footnote l | has been provided in Part XIII | | |

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Schedule **D** (Form 990) 2013

| | (Form 990) 2013 | UNITED STEE | ELWORKERS ' | 7-00001 LC | CAL | | 35 <u>-</u> 067 <u>9</u> 800 | Page 5 |
|-----------|-----------------|---------------|----------------|------------|-----|---|------------------------------|-------------|
| Part XIII | Supplementa | Information (| continued) | | | | | |
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TEEA3305 07/01/13

Schedule **D** (Form 990) 2013

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| SCHEDULE | | Ģ | ants and Oth | er Assistance t | o Organizations | , i | | OMB No 1545-0047 |
|--|---|--|--|---|---|---|---|------------------------------------|
| (Form 990) | | Gov Comple | Governments, ar Complete if the organization | Governments, and Individuals in the United States omplete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. | the United Sta | ites or 22. | | 2013 |
| Department of the Treasury Internal Revenue Service | | ► Information | about Schedule I (| Attach to Form 990. Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. |). uctions is at <i>www.irs.g</i> | ov/form990. | | Open to Public Inspection |
| 8 A | RKERS 7-00001 LOCAL | LOCAL | | | | | Employer Identification number 35-0679800 | tion number |
| Part General In | General Information on Grants and Assistance | ants and Assista | ınce | | | | | |
| | Does the organization maintain records to substantiate the amount of the selection criteria used to award the grants or assistance? | o substantiate the arr rants or assistance? | ount of the grants or as | the grants or assistance, the grantees' eligibility for the grants or assistance, and | ses' eligibility for the grants or assistan | or assistance, and | | X Yes |
| Part II Grants and Form 990. | the organizations pro JOther Assistant Part IV. line 21 for | ce to Governme any recipient the | ng the use of grant function of the use of grant function of the contract of t | Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990. Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is pended. | ed States. Comple | te if the organization | on answered 'Yes | t, to |
| 1 (a) Name and address of organization or government | ss of organization nment | (a) | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| (1) NONE | | | | | | | | |
| (2) | | | | | | | | |
| (3) | 1 | | | | | | | |
| [4] | | | | | | | | |
| (5) | | | | | | | | |
| (6) | | | | | | | | |
| (7) | | | | | | | | |

Schedule I (Form 990) (2013)

TEEA3901 07/12/13

ALL DONATIONS ARE APPROVED BY THE BOARD AND AT MEMBERS MEETINGS AND APPROVAL DOCUMENTED IN THE MINUTES (f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III, column (b), and any other additional information required in Part I, line 2, Part III, column (b), and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Pt_I_Line_2 Part! BAA ~ co S 9

Page 2

35-0679800

UNITED STEELWORKERS 7-00001 LOCAL

Schedule I (Form 990) (2013)

Schedule I (Form 990) (2013)

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.
 Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

35-0679800 UNITED STEELWORKERS 7-00001 LOCAL Pt VI, Line 11b THE OFFICERS MEET WITH THE CPA WHO PREPARED FORM 990 TO REVIEW IT PRIOR TO FILING. Pt VI, Line 15a OFFICERS & DIRECTORS PAY IS APPROVED BY UNION MEMBERS AT A REGULAR MEMBERSHIP MEETING. Pt VI, Line 15b OFFICE MANAGER'S COMPENSATION IS BARGAINED WITH USW INTERNATIONAL UNION. BY-LAWS ARE ON THE WEBSITE; OTHER GOVERNING DOCS & FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST Pt_VI, Line 19 Pt VI, Line 6 ___ THIS IS A LOCAL UNION SERVING 1076 MEMBERS, BY REPRESENTING THEM TO THEIR EMPLOYER. THE UNION BARGAINS WITH MEMBERS EMPLOYER FOR PAY, BENEFITS, WORKING CONDITIONS, ETC. UNION OFFICERS ARE ELECTED BY THE MEMBERS Pt VI, Line 7a Pt_VI, Line 7a ___UNION REPS ARE ELECTED BY THE MEMBERS IN THE DIVISION THEY REPRESENT BASED ON THE BYLAWS, SOME DECISIONS MUST BE APPROVED BY MEMBERS Pt VI, Line 7b Pt_VI, Line 7b BASED ON THE BYLAWS, SOME DECISIONS ARE APPROVED BY THE BOARD OF OFFICERS & REPS CASH BASIS IS MODIFIED TO ACCRUE FOR PAYROLL TAX AND DUES WITHHELD, NOT YET REMITTED

(g) Sec 512(b)(13) controlled entity? Schedule R (Form 990) 2013 ŝ (f)
Direct controlling
entity × × × Open to Public OMB No 1545-0047 2013 Yes Inspection Identification of Related Tax-Exempt Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Employer identification number (f) Direct controlling entity 35-0679800 (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) Part I Identification of Disregarded Entities Complete if the organization answered 'Yes' on Form 990, Part IV, line 33. Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
 Attach to Form 990. * See separate instructions. Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. (d) Total income Related Organizations and Unrelated Partnerships (d) Exempt Code section TEEA5001 06/26/13 501(c)(5) 501(c)(5) 501(c)(5)(c)
Legal domicile (state or foreign country) (c)
Legal domicile (state or foreign country) (b)
Primary activity Z ΙN PA (b) Primary activity INTERNATIONAL INTERNATIONAL BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. LOCAL UNION UNION NOINI (a) Name, address, and EIN (if applicable) of disregarded entity (1) UNITED STEELWORKERS INTERNATIONAL UNION (3) UNITED STEELWORKERS INTERNATIONAL UNION 14) see Cont. Sheet for Sch. R. Part II (2) UNITED STEELWORKERS LOCAL 7-209 UNITED STEELWORKERS 7-00001 LOCAL (a) Name, address, and EIN of related organization 3340 PERIMETER HILL DR. - PITTSBURGH, PA 15222 FIVE GATEWAY CENTER __<u>NASHVILLE</u>__TN_37<u>2</u>11_ 23-7095102 WHITING, IN 46394 35-0415430 25-0818080 Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE R (Form 990) Part II 1 £¦ 3 ල

Continuation Page 1 of 1 35-0679800

Schedule R Cont (Form 990) 2013 UNITED STEELWORKERS 7-00001 LOCAL

Part II Continuation of Identification of Related Tax-Exempt Organizations

| (A) Name, address, and EIN of related organization | (B) Primary activity | (C) Legal domicile (state or foreign country) | (D) Exempt Code section | (E) Public charity status (if section 501(c)(3)) | (F) Direct controlling entity | (G) Sec 512(b)(13) controlled entity? | o)(13) entity? |
|--|-------------------------|---|-------------------------------|--|---------------------------------|---------------------------------------|-------------------|
| SOAR CHAPTER 7-PC-6 2045 SCHRAGE AVENUE | UNION RETIREE CHAPTER | Z | 501 (c) (5) | | | | × |
| USW DISTRICT 7 | UNION DISTRICT CHAPTER | NH | | | | | × |
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| | 1 | TEEA5102 06/27/13 | | | Schedule R Cont (Form 990) 2013 | Form 990) | 2013 |

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Schedule R (Form 990) 2013 UNITED STEELWORKERS 7-00001 LOCAL

Related Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

| (k) Percentage ownership | | | | | | | | | | | _ | | (i) Sec 512(b)(13) controlled entity? | Yes No | | | | | <u>-</u> - | · | | | | Schedule R (Form 990) 2013 |
|--|----------|---|---|---|---|-----|---|---|-----|---|---|---|--|-----------|------------------------------------|----------|--------------|---|--------------|---|-----|-----------------------|---|----------------------------|
|) ral or aging ner? | No | | | | | | | | | | | Part | | ۶ | _ | | | | | | | | | R (Forn |
| (j) General or managing partner? | Yes | | | | | | | | | | | , 990, | (h) Percentage ownership | | | | | | | | | | | edule I |
| (i) Code V-UBI amount in box 20 of Schedule K-1 (Form | 1065) | | | | | | | | | | | d 'Yes' on Form | Share of end-of- Po year assets o | | | | | | | | | | | Sch |
| (h) Disproportionate allocations? | Yes No | | | | | | | | | | | answere | _ | | | | | | | | | | | |
| | X. | | | | | | | | | | _ | ganization a | (f) Share of total income | | | | | , | | | | | | |
| (g) Share of end-of-year assets | | | | | | | | | | | | if the or during t | (e) Type of entity (C corp, S corp, | ner) | | | | | | | | | | |
| (f) are of total income | | | | | | | | | | | | omplete or trust | Type o | 5 | | | | | | | | _ | | |
| (f) Share of total income | | | | | | | | | | _ | | Trust C | (d) Direct controlling | Siluty | | | | | | | | | | 16/27/13 |
| nt income nrelated, from tax ections | 514) | | | | | | | | | | | ition or as a co | | | | | | | | | | | | TEEA5002 06/27/13 |
| Predominant income (related, unrelated, excluded from tax under sections | 512-514) | | | | | | | _ | | | | Corpora treated | (c) Legal domicile (state or foreign | coulliny) | | | | | | | | | | - |
| (d) Direct controlling entity | | ı | | | | | | | | | | t ble as a anizations | | | | _ | | _ | | | | | | |
| | _ | | | | 1 | | | | | | | S Taxa | (b) Primary activity | | | | | | | | | | | |
| (c) Legal domicile (state or foreign | country) | 1 | | | | | | | | | | izations re relate | | | - | <u> </u> | | | - | - | - | 1 | 1 | |
| (b) Primary activity | | | | | | | | | | , | | Related Organ it had one or mo | related organization | | | | | | | 1 | | 1 1 1 1 1 1 1 1 1 1 1 | | ļ |
| (a) Name, address, and EiN of related organization | | | 1 | 1 | • | [2] | 1 | 1 | (3) | | 1 | panimy Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. | (a) Name, address, and EIN of related organization | | (1) | | | | | | (3) | | | ВАА |

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35-0679800

Pariving Unrelated Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 37. Schedule R (Form 990) 2013 UNITED STEELWORKERS 7-00001 LOCAL

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.

| revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships. | ization. See instruc | lions regarding excil | USION TOF CERTAIN INV | estment partne | rsnips. | | | | | • |
|---|----------------------|---|--|---|---------------------------------|--|--|--|---|--------------------------------|
| (a) Name, address, and EIN of entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Predominant income (related, unre- lated, excluded | (e) Are all partners section 501(c)(3) organizations? | (f) Share of total income | (g) Share of end-of-year assets | (h) Dispropor- tionate allocations? | Code V-UBI amount in box 20 of Schedule K-1 | (J) General or managing partner? | (k) Percentage ownership |
| | | | section 512-514) | Yes No | | | Yes No | Form (1065) | Yes No | — |
| (1) | | | | | ! |]] [| | | | |
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| Schedule R | (Form 990) 2013 | UNITED STEELWORKER | S 7-00001 LOCAL | | 35-0679800 | Page 5 |
|------------|---------------------------------|--|-------------------------|---------------------|----------------|------------|
| Part VIII | Supplementa Provide addition | Information anal information for respon | nses to questions on Sc | hedule R (see instr | ructions). | |
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TEEA5005 06/27/13

Schedule R (Form 990) 2013

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Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

AND PROTECT THE RIGHTS OF MEMBERS UNDER THOSE AGREEMENTS AND FEDERAL AND STATE LAWS.

Form 4562

Depreciation and Amortization (Including Information on Listed Property)

OMB No. 1545-0172

2013

Department of the Treasury Internal Revenue Service Name(s) shown on return

(99)

► See separate instructions.

► Attach to your tax return.

Atlachment Sequence No. 179 Identifying number

UNITED STEELWORKERS 7-00001 LOCAL Business or activity to which this form relates

35-0679800

| For | rm 990 / Form 990F | EZ | | | | | | | | |
|---|--|---|---|--|--|---|---|--|--|--|
| Pä | Election To Exp Note: If you have an | pense Certain by listed property, c | Property Under Se complete Part V before yo | ection 179 ou complete Part I | · | | | | | |
| 1 | Maximum amount (see instr | ructions) | | | | 1 | | | | |
| 2 | Total cost of section 179 pro | operty placed in se | rvice (see instructions). | | | 2 | | | | |
| 3 | Threshold cost of section 17 | 79 property before | reduction in limitation (se | ee instructions) . | | 3 | | | | |
| 4 | Reduction in limitation. Sub- | tract line 3 from lin | e 2. If zero or less, enter | -0 | | 4 | | | | |
| 5 | Dollar limitation for tax year separately, see instructions | | | | | 5 | | | | |
| 6 | | Description of property | | (b) Cost (business | | (c) Elected cost | 17.70 T & 18 1 1 11 11 11 11 11 11 11 11 11 11 11 | | | |
| | - | | | | | | | | | |
| | | | | | | | | | | |
| 7 | Listed property. Enter the ar | mount from line 29 | | | . 7 | | | | | |
| 8 | Total elected cost of section | 179 property. Add | d amounts in column (c), | lines 6 and 7 | | 8 | | | | |
| 9 | Tentative deduction. Enter t | | | | | | | | | |
| 10 | Carryover of disallowed ded | | | | | | | | | |
| 11 | Business income limitation. | | | | | | | | | |
| 12 | Section 179 expense deduc | | | | | <u> 12</u> | | | | |
| 13 | Carryover of disallowed ded | | | | F 13 | | 3 25 7 2 | | | |
| | : Do not use Part II or Part III | | <u> </u> | | | | | | | |
| Par | t.II: Special Depreci | iation Allowan | ce and Other Depr | eciation (Do n | ot include liste | d property.) (See i | nstructions.) | | | |
| 14 | Special depreciation allowar tax year (see instructions) | | | | | | | | | |
| 15 Property subject to section 168(f)(1) election | | | | | | | | | | |
| 16 | Other depreciation (including | | | | | | | | | |
| Par | till MACRS Depred | | | | | | | | | |
| | | | Section | | | | | | | |
| 17 | MACRS deductions for asse | ets placed in servic | e in tax years beginning | before 2013 | | 17 | 12,172. | | | |
| | | | | | | | | | | |
| 10 | If you are electing to group a | any accole alaced i | in consice during the tax s | voor into one or m | ore general | _ [7] | | | | |
| 18 | If you are electing to group a asset accounts, check here | any assets placed i | in service during the tax | year into one or m | ore general | ▶ 🔲 🦳 | | | | |
| 18 | asset accounts, check here | <u> </u> | in service during the tax y | <u> </u> | <u> </u> | | em | | | |
| 18 | asset accounts, check here | <u> </u> | in Service During 2013 (C) Basis for depreciation (business/investment use | <u> </u> | <u> </u> | | (g) Depreciation deduction | | | |
| | Section B (a) Classification of property | - Assets Placed (b) Month and year placed | in Service During 2013 (c) Basis for depreciation | Tax Year Using (d) | the General D | epreciation Syste | (g) Depreciation | | | |
| 19 a | Section B (a) Classification of property 3-year property | - Assets Placed (b) Month and year placed | in Service During 2013 (c) Basis for depreciation (business/investment use only — see instructions) | Tax Year Using t (d) Recovery period | the General D (e) Convention | epreciation Syste | (g) Depreciation deduction | | | |
| 19 a | Section B (a) Classification of property 3-year property | - Assets Placed (b) Month and year placed | in Service During 2013 (c) Basis for depreciation (business/investment use anly — see instructions) | Tax Year Using 1 (d) Recovery period | the General D (e) Convention | epreciation Syste (f) Method | (g) Depreciation deduction | | | |
| 19 a | asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 7-year property | - Assets Placed (b) Month and year placed | in Service During 2013 (c) Basis for depreciation (business/investment use only — see instructions) | Tax Year Using t (d) Recovery period | the General D (e) Convention | epreciation Syste | (g) Depreciation deduction | | | |
| 19 a | asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 7-year property 10-year property | - Assets Placed (b) Month and year placed | in Service During 2013 (c) Basis for depreciation (business/investment use anly — see instructions) | Tax Year Using 1 (d) Recovery period | the General D (e) Convention | epreciation Syste (f) Method | (g) Depreciation deduction | | | |
| 19 a | asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 15-year property 15-year property | - Assets Placed (b) Month and year placed in service | in Service During 2013 (c) Basis for depreciation (business/investment use anly — see instructions) | Tax Year Using 1 (d) Recovery period | the General D (e) Convention | epreciation Syste (f) Method | (g) Depreciation deduction | | | |
| 19 a | asset accounts, check here Section B (a) Classification of property 3-year property | - Assets Placed (b) Month and year placed in service | in Service During 2013 (c) Basis for depreciation (business/investment use anly — see instructions) | Tax Year Using to (d) Recovery period 5.0 7.0 | the General D (e) Convention | S/L | (g) Depreciation deduction | | | |
| 19 a b c c d | asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property | - Assets Placed (b) Month and year placed in service | in Service During 2013 (c) Basis for depreciation (business/investment use anly — see instructions) | Tax Year Using t (d) Recovery period 5.0 7.0 | the General D (e) Convention HY HY | S/L S/L | (g) Depreciation deduction | | | |
| 19 a b c c d | asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental | - Assets Placed (b) Month and year placed in service | in Service During 2013 (c) Basis for depreciation (business/investment use anly — see instructions) | Tax Year Using 1 (d) Recovery period 5.0 7.0 25 yrs 27.5 yrs | the General D (e) Convention HY HY | S/L S/L S/L S/L | (g) Depreciation deduction | | | |
| 19 a b c d e f | asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 20-year property 25-year property Residential rental property | - Assets Placed (b) Month and year placed in service | in Service During 2013 (c) Basis for depreciation (business/investment use anly — see instructions) | Tax Year Using 1 (d) Recovery period 5.0 7.0 25 yrs 27.5 yrs 27.5 yrs | the General D (e) Convention HY HY MM MM | S/L S/L S/L S/L S/L S/L S/L | (g) Depreciation deduction | | | |
| 19 a b c d e f | asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 20-year property 25-year property 25-year property Nonresidential real | - Assets Placed (b) Month and year placed in service | in Service During 2013 (c) Basis for depreciation (business/investment use anly — see instructions) | Tax Year Using 1 (d) Recovery period 5.0 7.0 25 yrs 27.5 yrs | the General D (e) Convention HY HY MM MM MM | S/L S/L S/L S/L S/L S/L S/L S/L | (g) Depreciation deduction | | | |
| 19 a b c d e f | asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 20-year property 25-year property 25-year property Nonresidential real property | - Assets Placed (b) Month and year placed in service | in Service During 2013 (c) Basis for depreciation (business/investment use only — see instructions) 7,082. 12,392. | Tax Year Using to (d) Recovery period 5.0 7.0 7.0 25 yrs 27.5 yrs 27.5 yrs 39 yrs | the General D (e) Convention HY HY MM MM MM MM | S/L | (g) Depreciation deduction 708. 886. | | | |
| 19 a b c c d e f g h | asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C — | - Assets Placed (b) Month and year placed in service Assets Placed in | in Service During 2013 (c) Basis for depreciation (business/investment use anly — see instructions) | Tax Year Using to (d) Recovery period 5.0 7.0 7.0 25 yrs 27.5 yrs 27.5 yrs 39 yrs | the General D (e) Convention HY HY MM MM MM MM | S/L | (g) Depreciation deduction 708. 886. | | | |
| 19 a b c c d e f g h | asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C — | - Assets Placed (b) Month and year placed in service Assets Placed in | in Service During 2013 (c) Basis for depreciation (business/investment use only — see instructions) 7,082. 12,392. | Tax Year Using to (d) Recovery period 5.0 7.0 25 yrs 27.5 yrs 27.5 yrs 39 yrs ax Year Using th | the General D (e) Convention HY HY MM MM MM MM | S/L | (g) Depreciation deduction 708. 886. | | | |
| 19 a b c c d e e f g h i i 20 a b | asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 20-year property 20-year property 25-year property Nonresidential rental property Section C — Class life | - Assets Placed (b) Month and year placed in service Assets Placed in | in Service During 2013 (c) Basis for depreciation (business/investment use only — see instructions) 7,082. 12,392. | Tax Year Using to (d) Recovery period 5.0 7.0 25 yrs 27.5 yrs 27.5 yrs 39 yrs ax Year Using th | the General D (e) Convention HY HY MM MM MM MM | S/L | (g) Depreciation deduction 708. 886. | | | |
| 19 a b c c c d d e e f g h i i 20 a b c c | asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 20-year property 25-year property Nonresidential rental property Section C — Class life 40-year | - Assets Placed (b) Month and year placed in service Assets Placed in | in Service During 2013 (c) Basis for depreciation (business/investment use only — see instructions) 7,082. 12,392. | Tax Year Using to (d) Recovery period 5.0 7.0 25 yrs 27.5 yrs 27.5 yrs 39 yrs ax Year Using th | the General D (e) Convention HY HY MM MM MM MM | S/L | (g) Depreciation deduction 708. 886. | | | |
| 19 a b c c c d d e e f g h i i 20 a b c c | asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 20-year property 20-year property 25-year property Nonresidential rental property Section C — Class life | - Assets Placed (b) Month and year placed in service Assets Placed in | in Service During 2013 (c) Basis for depreciation (business/investment use only — see instructions) 7,082. 12,392. | Tax Year Using to (d) Recovery period 5.0 7.0 25 yrs 27.5 yrs 27.5 yrs 39 yrs ax Year Using th | the General D (e) Convention HY HY MM | S/L | (g) Depreciation deduction 708. 886. | | | |
| 19 a b c c c d d e e f g h i i 20 a b c c | asset accounts, check here Section B (a) Classification of property 3-year property | - Assets Placed (b) Month and year placed in service Assets Placed in structions.) | in Service During 2013 (c) Basis for depreciation (business/investment use only — see instructions) 7,082. 12,392. Service During 2013 T | Tax Year Using to (d) Recovery period 5.0 7.0 25 yrs 27.5 yrs 27.5 yrs 39 yrs ax Year Using the 12 yrs 40 yrs | the General D (e) Convention HY HY MM | S/L | (g) Depreciation deduction 708. 886. | | | |
| 19 a b c d e f g h i | asset accounts, check here Section B (a) Classification of property 3-year property | - Assets Placed (b) Month and year placed in service Assets Placed in structions.) at from line 28 ines 14 through 17, line | in Service During 2013 (c) Basis for depreciation (business/investment use only — see instructions) 7,082. 12,392. Service During 2013 T | Tax Year Using to (d) Recovery period 5.0 7.0 25 yrs 27.5 yrs 27.5 yrs 39 yrs ax Year Using the 12 yrs 40 yrs | the General D (e) Convention HY HY MM | S/L | (g) Depreciation deduction 708. 886. | | | |
| 19 a b c d e f g h i 20 a b c Par 21 | asset accounts, check here Section B (a) Classification of property 3-year property | - Assets Placed (b) Month and year placed in service Assets Placed in structions.) at from line 28 ines 14 through 17, line. Partnerships and S c d placed in service | in Service During 2013 (c) Basis for depreciation (business/investment use only — see instructions) 7,082. 12,392. Service During 2013 T es 19 and 20 in column (g), an orporations — see instructions during the current year, of the current year, or the current year. | Tax Year Using to (d) Recovery period 5.0 7.0 25 yrs 27.5 yrs 27.5 yrs 39 yrs ax Year Using the 12 yrs 40 yrs d line 21. Enter here is the content of th | the General D (e) Convention HY HY MM | S/L | (g) Depreciation deduction 708. 886. | | | |
| 19 a b c d e f g h i 20 a b c Par 21 22 | asset accounts, check here Section B (a) Classification of property 3-year property | - Assets Placed (b) Month and year placed in service Assets Placed in structions.) at from line 28 ines 14 through 17, line. Partnerships and S cd placed in service utable to section 2 | in Service During 2013 (c) Basis for depreciation (business/investment use only — see instructions) 7,082. 12,392. Service During 2013 T es 19 and 20 in column (g), an orporations — see instructions during the current year, 63A costs | Tax Year Using to (d) Recovery period 5.0 7.0 25 yrs 27.5 yrs 27.5 yrs 27.5 yrs 39 yrs ax Year Using the 12 yrs 40 yrs d line 21. Enter here as enter | the General D (e) Convention HY HY MM | S/L | (g) Depreciation deduction 708. 886. | | | |

| For | n 4562 (2013) | UNITED ST | EELWORK! | ERS 7-0 | 00001 | LOCAT | | | | | | | 35-0 | 67980 |) () | Page |
|--------------|---|---|---|-----------------------------|------------------------------|------------------------|--|----------------|----------------|---------------------------|--|---------------------------|-------------------------------|------------------------------|--|--------------------------------------|
| _ | rt V Listed | Property (Inc | lude automo | | | | | cor | npute | ers, and | property | used f | | | | , age |
| | Note: Fo | n, or amusemen or any vehicle for (a) through (c) c | · which vou a | re using th all of Secti | ne standa ion B, and | rd milea I Section | ge rate on Cifap | or de plica | educi able. | ting lea | se expen | se, con | nplete on | ly 24a, : | 24b, | |
| | Section | n A – Depreciat | ion and Oth | er Inform | ation (Ca | ution: S | See the i | instr | uctio | ns for li | mils for p | asseng | er autom | obiles.) | | |
| 24 | a Do you have eviden | ice to support the bu | usiness/investm | ent use clain | ned? | • • • | Yes | \bot | No | 24b l | 'Yes,' is th | e eviden | ce written? | • • • | Yes | |
| | (a) Type of property (list vehicles first) | (b) Date placed in service | (C) Business/ investment use percentage | Cos | d) st or r basis | (busin | (e) for deprecia ess/investra use only) | | | (f) Recovery period | • | (g) ethod/ ovention | | (h) preciation duction | s | (i) Elected ection 179 cost |
| 25 | • | | or qualified l | | | | | | | | | | 1 | | 27 | |
| 26 | used more than Property used m | 50% in a qualification 50% in | | | | <u>s)</u> | • • • • | <u>···</u> | ÷ | • • • • | •••• | 25 | <u> </u> | | <u> </u> | 200 |
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| _27 | Property used 50 | 0% or less in a q | ualified busir | ness use: | | | | | | | | | | | 153 | , |
| | | | | | | | | | +- | | | | | | | |
| | | | | | | | | | +- | | _ | - | - | | | |
| 28 | Add amounts in | column (h), lines | 25 through | 27. Enter I | nere and | on line 2 | 1, page | 1. | • • | | | 28 | | | - ````` | |
| 29 | Add amounts in | • • • | _ | | | | | | | | | | | . 29 | | |
| | | | | | B - Info | | | | | | | | | | | |
| Con to vo | nplete this section our employees, firs | for vehicles used st answer the ou | d by a sole p estions in Se | roprietor, p | partner, o | r other 'r u meet a | nore than | n 5° | % ow to co | mer,' or omoletir | related p | erson. | If you pro | ovided v ehicles | ehicles | i |
| | | | | 7 | | | | 1 | | | | | T . | | τ | <u> </u> |
| 30 | Total business/ir during the year (commuting miles | do not include | | | a) icle 1 | (b Vehi | | - | Vehi | cle 3 | Vehi | | Vehi | icle 5 | Ve | (f) hicle 6 |
| 31 | Total commuting mi | • | | | | | | \top | | | | | | | | |
| 32 | Total other personal miles driven | onal (noncommu | iting) | | | | | | | | | | | | | |
| 33 | Total miles drive | | | 1 | | | | l | | | | | 1 | | } | |
| | lines 30 through | 32 | | Yes | No | Yes | No | t | es | No | Yes | No | Yes | No | Yes | No |
| 34 | Was the vehicle during off-duty he | | | | | | | | | No | 1.00 | 110 | | | | 1 |
| 35 | Was the vehicle than 5% owner of | used primarily b or related person | y a more i? | | | | | | | | | | | | | |
| 36 | Is another vehicl personal use? | e available for | | | | | | | | | | | | 1 | | |
| | wer these question | ns to determine i | | - | - | | | | | | - | | - | not mo | re thar | 1 |
| 37 | Do you maintain | | | | | | of vehic | les, | inclu | ding co | mmuting | , | | | Yes | No |
| 38 | Do you maintain employees? See | a written policy : | statement tha | at prohibits | s persona | l use of | · · · · vehicles directors | , ex | cept | commu commu | ting, by y owners | our | | | | + |
| 39 | Do you treat all u | | | • | • | | | | | | | | | | | † |
| 40 | Do you provide n vehicles, and reta | nore than five ve | hicles to you | r employe | es, obtair | n informa | ation from | m yo | our e | mploye | es about | the use | of the | | | +- |
| 41 | Do you meet the Note: If your ans | requirements co wer to 37, 38, 39 | oncerning qua 9, 40, or 41 is | alified auto | omobile d | emonstr olete Sed | ation us ction B fo | e? (or th | See i | instructi vered v | ions.) ehicles. | | | | | DE 02: 1 |
| Pai | t VI Amorti | zation | | | | | | | | | | | | | 15 | |
| | Desc | (a) cription of costs | | Date ar | (b) mort/zation legins | | (C) Amortizabl amount | e | | C | (d) Code ection | } p | (e) ortization erlod or | | (f) Amortizat for this ye | |
| 42 | Amortization of c | osts that begins | during vour | 2013 tax v | ear (see | instruction | ons): | | | | | l he | rcentage | · | | |
| | | | | T . | | 7 | | | T | | | 1 | | | | |
| | | | | | | 1 | | | I | | | | | | | |
| 43 | Amortization of o | _ | ~ | | | | | | | | | | 43 | | | |
| 44 | Total. Add amou | unts in column (f |). See the in: | structions | for where | to repor | t | ٠. | | | <u></u> | | 44 | L | | |