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SCANNED JUN 1 1 2014

· 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

OMB No 1545-0047 2013

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.

Open to Public Inspection

A	For the	2013 cale	endar year, or tax year beginning JANUARY 01 , 2013, and ending	DECEM	BER 31	, 20 13
В	Check if	applicable.	C Name of organization USW DISTRICT 2 LOCAL 12934		D Employ	yer identification number
	Address	change	Doing Business As			38-1551119
	Name ch	hange	Number and street (or P O box if mail is not delivered to street address) Room/suite		E Telepho	one number
	Initial ret	turn	P. O. BOX 2380			989-496-4780
	Termina	ted	City or town, state or province, country, and ZIP or foreign postal code			
	Amende	d return	MIDLAND, MI. 48641-2380		G Gross r	receipts \$
$\overline{\Box}$		ion pending			•	r subordinates? ☐ Yes
				•	•	es included? Yes No
$\overline{}$	Tax-exe	mpt status	□ 501(c)(3)			a list (see instructions)
j	Website			H(c) Group		•
ĸ		organization		11(0) 0.000	T .	e of legal domicile MI
P	art I	Summ			1 III Olak	y or regar donnere [VII
	1		escribe the organization's mission or most significant activities: LOCAL UI	NION ENEC	DCED (COLLECTIVE
0	1 '		ING AGREEMENT TO BETTER THE WORKING CONDITIONS OF THE LOCAL U			
auc			ENTATION TO THE MEMBERS.	MIOIA VIAL	IUPK	DAIDE
Ë	2		is box ► if the organization discontinued its operations or disposed of n	nore than	25% of	ite not accate
ŏ	3		of voting members of the governing body (Part VI, line 1a)		3	1
∞ ಶ	4		of independent voting members of the governing body (Part VI, line 1b)		4	803
es	5		mber of individuals employed in calendar year 2013 (Part V, line 2a)		5	0
Ĭ	6		nber of volunteers (estimate if necessary)		6	32
Activities & Governance	7a		elated business revenue from Part VIII, column (C), line 12		7a	0
•	, a		lated business taxable income from Form 990-T, line 34		7b	
	"	IVEL UITE	lated business taxable income nonn onn 990-1, line 34	Prior Yea		Current Year
	8	Contribu	tions and grants (Part VIII, line 1h)	11101 101		- Julient Teal
ī	9					
Revenue	1	-	service revenue (Part VIII, line 2g)		267989	<u> </u>
æ	10		ent income (Part VIII, column (A), lines 3, 4, and 7d)		5318	· · · · · · · · · · · · · · · · · · ·
	11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	0
	12		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		273307	296690
	13		nd similar amounts paid (Part IX, column (A), lines 1–3)	_		
	14		paid to or for members (Part IX, column (A), line 4)	_	39715	
ses	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)		148023	···
ë	16a		onal fundraising fees (Part IX, column (A), line 11e)		0	0
Expenses	b		draising expenses (Part IX, column (D), line 25)			
_	17		penses (Part IX, column (A), lines 11a–11d, 11f–24e)		34137	
	18		penses. Add lines 13–17 (must equal Part IX, column (A), line 25)		221875	· · · · · · · · · · · · · · · · · · ·
- "	19	Revenue	less expenses. Subtract line 18 from line 12		46114	
sets or	-00	T-4-1	11-1-	inning of Cur		
SS6	20		sets (Part X, line 16)		1169218	1256215
Net As	21		ts or fund balances. Subtract line 21 from the 20		0	
_			10 0. faria Salatioss. Subtract into 2. from 10 20		1169218	1256215
	art II		ture Block			
Ur tn.	ider pena ie. correc	ities of perju t. and comp	iry, I declare that I have examined this return, including accompanying schedules and statement lete. Declaration of preparer (other than officer) is based on all information of which preparer has	its, and to th s any knowle	e best of a	my knowledge and belief, it is
_		17	× 2/2 / 2	T	-/	~/ 1 × 6/
Sig	10	Sugn	ature of officer	Dot	<u>5//</u>	3/2011
	ere	Sign	~ //	Date	ə ·	
пе	er e	Tyrn	D. THOMAS BILLS FINANCIAL SECRET	ALY		
			e or print name and title			Total
Pa	id	Fririty	pe preparer's name Preparer's signature Date		Check	
Pr	epare	er			self-em	ployed
Us	se On	ly Firm's r	name_ ▶	Firm	s EIN ▶	·
	46		address >	Phor	ne no	
			s this return with the preparer shown above? (see instructions)	· · ·	<u> </u>	🗌 Yes 🗌 No
For	Paper	work Redu	ction Act Notice, see the separate instructions. Cat No 1	1282Y		Form 990 (2013)

Form **990** (2013)

Part	Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1		1
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		√
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		V ✓
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	-	1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a		14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
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	15		✓
16	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	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	l	✓

Part	Checklist of Required Schedules (continued)			-3-
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
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		1
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		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		√ ✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		√
26	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		√
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		1
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	,	1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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? <i>If "Yes," complete Schedule R, Part I </i>	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		✓
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		1
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? <i>If "Yes," complete Schedule R</i> ,			,
38	Part VI	37		√
				<u> </u>

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	· .		✓
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		3 3	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		:24	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		^'v.	
0-	reportable gaming (gambling) winnings to prize winners?	1c	√	****************************
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		李記	
_	Statements, filed for the calendar year ending with or within the year covered by this return 2a 332	-	7	-
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	7. 427	1 4 70
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	11	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	35		
→ a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		1
b	If "Yes," enter the name of the foreign country: ▶	v	* 1 € 2 6 ° 5 ° 1 ° 1	i veria
•	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.	40.00		7en 165 - 1841
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		✓
7	Organizations that may receive deductible contributions under section 170(c).		4.,	P. 35
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	1.0	· - 2	. · . · ·
	and services provided to the payor?	7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		✓
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			_
	required to file Form 8282?	7c	2732	✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		√
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	-	√
h o	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		V
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	*	*	ar €∰m e
	organization, have excess business holdings at any time during the year?	8	<u> </u>	
9	Sponsoring organizations maintaining donor advised funds.	۳		
a	Did the organization make any taxable distributions under section 4966?	9a	<u> </u>	1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		7
10	Section 501(c)(7) organizations. Enter:	ر من	, ,	وور ۱۰۰
а	Initiation fees and capital contributions included on Part VIII, line 12			Tag in Pray 1 s
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b 0	1 1		5 15 A
11	Section 501(c)(12) organizations. Enter:	1 .		
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.)			.S ₹ .3
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		1
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		E.	182
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			54.3
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		✓
	Note. See the instructions for additional information the organization must report on Schedule O] :		
b	Enter the amount of reserves the organization is required to maintain by the states in which	4		95
	the organization is licensed to issue qualified health plans	} ः	1.50	EN SO
C	Enter the amount of reserves on hand	1		7.7
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	-	/
D	THE STANDARD MEDIA FORM 7.20 TO RECORD THESE DAVIDEDIS / IT "IND " DIOVIDE AD EXCIPIDADION IN SCHEOUIE CI	14D		

	0 (2013)			Page U
Part '	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
	Check if Schedule O contains a response or note to any line in this Part VI			
Section	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 803			
	If there are material differences in voting rights among members of the governing body, or			1
	if the governing body delegated broad authority to an executive committee or similar			-
	committee, explain in Schedule O.			1
b	Enter the number of voting members included in line 1a, above, who are independent		! :	į l
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		/
6	Did the organization have members or stockholders?	6	✓	├
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	_		
_	one or more members of the governing body?	7a		<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		!	į
•	The governing body?	8a	✓	
a b	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	00	•	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		1
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		1
13	Did the organization have a written whistleblower policy?	13	-	1/
14	Did the organization have a written document retention and destruction policy?	14	┢─	\ <u>\</u>
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?	:	ľ	d :
а	The organization's CEO, Executive Director, or top management official	15a		✓
b	Other officers or key employees of the organization	15b		1
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		√
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		√
Secti	on C. Disclosure	, , , , ,		1 -
17	List the states with which a copy of this Form 990 is required to be filed ▶		• •	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	n 501	(c)(3)s	s only)
	available for public inspection. Indicate how you made these available. Check all that apply.		- • •	.,
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	polic	y, and
	financial statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	€	
	organization: ► D. THOMAS BILLS 1824 WYLLYS, MIDLAND, MI. 48642			

_			
-orm	990	(201	3)

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

Check if Schedule O contains a response or note to a	nv line in this Part VII						\Box

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 no	r any relate	d orga	anız	atıo	n c	ompe	nsa	ited any curren	t officer, director	, or trustee.
				(0	2)			1		
(A)	(B)	٠.			ition			(D)	(E)	(F)
Name and Title	Average		(do not check more than one box, unless person is both as					Reportable	Reportable	Estimated
	hours per	officer and a director/trustee)						compensation	compensation from	amount of
	week (list any hours for	악고	В	Q	<u>چ</u>	₽,E	Б	from the	related organizations	other compensation
	related	dire	it u	Officer	yer	P and	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	Ctal	, in		Key employee	8 8		(W-2/1099-MISC)		organization and related
	line)	Individual trustee or director	al tra		yee	mpe				organizations
		ee	Institutional trustee			Highest compensated employee				
			- u			eg.				
(1) MARK R. LEWIS	60									
PRESIDENT				1				19655		
(2) ALVIN L. ZIMMERMAN	55			Ė				13033		
VICE PRESIDENT	† 			1				11206		
(3) JUDY APO	10									
RECORDING SECRETARY				✓				3409		
(4) D. THOMAS BILLS	25				i					
FINANCIAL SECRETARY				✓	<u> </u>			15908		
(5) TIMOTHY J. SMITH	5									
TREASURER				✓		<u> </u>		1364		
(6) C. SCOTT GROULX	11			١.			1			
GUIDE				✓				3735		
(7) ROBERT CHAMPINE	11			١,				1		
GUARD			<u> </u>	✓	_		-	6587	ļ	· · · · · ·
(8) GREGORY S. ABBATE	11	Į		١,						
TRUSTEE			<u> </u>	✓	<u> </u>		▙	953	_	
(9) JOHN MENDYK	11			,						
TRUSTEE			<u> </u>	/	_		<u> </u>	6497		
(10) THOMAS P. WOODS	11			١,						
TRUSTEE			_	✓	_		-	6811		
(11) MIKE ORVOSH	11			١,						
GUARD	Ì		_	~			 	2282		
(12)										
(13)		 	├	-		<u> </u>	╁			
(10)	 									
(14)				-				1		
····/	† -	1								

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees	s, ar	nd H	lighe	st C	ompensated E	mployees (c	ontinuec	1)		900
					•	C)								_
	(A)	(B)	(do n	ot ch		ition more	than e	one	(D)	(E)		_	F)	
	Name and title	Average hours per					rs both		Reportable compensation	Reportable compensation			nated unt of	
		week (list any				_	or/trus	<u> </u>	from	related		-	her	
		hours for related	ndıv.	nstit	Officer	e e	ğğ.	Form	the organization	organization (W-2/1099-M			nsation the	
		organizations	ecto	L to	뽁	ğ	oyee	Q	(W-2/1099-MISC)	(** 2 1000	³⁰ ,	organ	ızatıon	
		below dotted	ă	Institutional trust		Key employee) Ag						elated zations	
		""",	Individual trustee or director	uste		•	Highest compensated employee					o.gam	Lucionio	
]		l ée	ł		i d							
(15)														
(16)		<u> </u>												
						<u> </u>					$-\!$			
(17)					ļ	١								
44.00			_	_	_	<u> </u>	-	-			$-\!\!\!+\!\!\!\!-$			
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(21)														
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(22)		ļ	ļ				ļ							
(22)				-		1		╁	1		-+			
(23)			1											
(24)					<u> </u>			t^-						
3=.:2		†	1											
(25)														
					L.	L	l							
1b	Sub-total							•						
C	Total from continuation sheets to Part			٠	•	•		•						
d	Total (add lines 1b and 1c) .							<u>.</u>	78103					
2	Total number of individuals (including bu reportable compensation from the organ		d to th	nose	e lis	ted	abov	e) w	vho received m	ore than \$10	0 000,000 o	व		
	reportable compensation from the organ	IZation									-	\neg	Yes	No
3	Did the organization list any former of	fficer, direc	tor. c	or ti	rust	ee.	kev	emi	olovee, or high	nest compe	nsated	\Box	163	110
	employee on line 1a? If "Yes," complete											3		√
4	For any individual listed on line 1a, is the	e sum of re	porta	ble	con	npe	nsatio	on a	and other comp	pensation fro	om the			
	organization and related organizations	greater th	an \$	150	,000	0? /	f "Ye	es,"	complete Sch	nedule J foi	r such			
	ındıvıdual											4		✓
5	Did any person listed on line 1a receive of													
	for services rendered to the organization	? If "Yes," (comp	ete	Sci	nea	uie J	tor .	sucn person		• •	5		<u>√</u>
	on B. Independent Contractors					14	+	4	hara that reserve		- 6100 (200 -4		_
1	Complete this table for your five highest compensation from the organization. Re													×
	year.	port compe		•	U		Ja. 0. 10		your onding wi		no organ	Latio	,,, 0	•
	(A)						_	Τ	(B)			(C)		
	Name and business add	dress							Description of	services	Co	ompens	ation	
						_		_						
								+						
2	Total number of independent contractor	ors (includi	na hi	ıt r	not	lımı	ted t		hose listed ab	ove) who				
_	received more than \$100,000 of compen							- LI		,				

Part	VIII	Statement of Revenue			l Al l	D		
		Check if Schedule O contain	<u>s a res</u>	sponse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512-514
ats Its	1a	Federated campaigns	1a					
ìrar our	b	Membership dues	1b					
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising events	1c					
	d	Related organizations	1d					1
s, C mil	е	Government grants (contributions						
ion r Si	f	All other contributions, gifts, grants						
but		and similar amounts not included abo						
ıtı O	g	Noncash contributions included in lines	1a-1f: \$	•	{			
and	_	Total. Add lines 1a-1f		•				
				Business Code			-	
Ē	2a	MEMBERSHIP DUES		900099	293310			
æ	b					8.01		
<u>8</u>	c							
ē	d	***************************************						
S E	e							
Program Service Revenue	f	All other program service reve						
5	g	Total. Add lines 2a-2f		•	-			
	3	Investment income (includin						
		and other similar amounts)		•	3380			
	4	Income from investment of tax-e	xempt b	ond proceeds ►				
	5	Royalties		. i ▶				
		(i) F		(ii) Personal				
	6a	Gross rents					}	
	ь	Less: rental expenses					1	
	c	Rental income or (loss)			ŀ			
	d			>				
	7a	Gross amount from sales of (i) Sec		(ii) Other				
		assets other than inventory						
	ь	Less, cost or other basis						
		and sales expenses						
	С	Gain or (loss)						
	d			<u> ▶</u>				
	-							-
enne	8a	Gross income from fundraisin events (not including \$	g					
Other Reve		of contributions reported on line See Part IV, line 18						
ŧ	b	Less: direct expenses	-					
0		Net income or (loss) from fund		·				
		Gross income from gaming ac		, overlie . P				
	"-	See Part IV, line 19		,				
	b	Less: direct expenses		5			İ	
		Net income or (loss) from gan						
		Gross sales of inventory			<u> </u>	·		
		returns and allowances .						
	١ ـ			5	ł			
	b	Less: cost of goods sold . Net income or (loss) from sale			 		-	
		Miscellaneous Revenue	,3 UI III\	Business Code			-	+
	44-	IMISCENIA IEUUS NEVENUE		Duaniesa Code	 		 	<u> </u>
	11a			-				
	b						 	
	С	All all and a second						
	d	All other revenue		<u> </u>		· · · · -		
	1	Total. Add lines 11a-11d .				<u></u>	-	-
	12	Total revenue. See instruction	ΠS.		296690		1	1

Part IX	Statement of Funct	tional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	ll other organization	ns must complete co	olumn (A).
	Check if Schedule O contains a respon	se or note to any lir	ne in this Part IX		<u></u> . 🗀
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	28390 78103			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	70103			
7 8	Other salaries and wages	23652			
9	Other employee benefits	7472			
10	Payroll taxes	40715			
11	Fees for services (non-employees):				
а	Management				
b	Legal				
C	Accounting				
d	Lobbying	7145			· · · · · · · · · · · · · · · · · · ·
e	Professional fundraising services. See Part IV, line 17		·	<u> </u>	<u> </u>
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses	2306			
14	Information technology		·		
15	Royalties			· · · · · · · · · · · · · · · · · · ·	
16	Occupancy	1450			
17	Travel			<u> </u>	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	7380			
, 20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance	3080			
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	SCHOLARSHIPS	10000			
b					
C					
d					
е	All other expenses			ļ	
_25	Total functional expenses. Add lines 1 through 24e	209693		 	
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)				

Р	art X				
		Check if Schedule O contains a response or note to any line in this Pa		· · ·	(B)
			(A) Beginning of year		End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	1164063	2	1251060
	3	Pledges and grants receivable, net		3	
Assets	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 sponsoning organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities	442	11	442
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	4713	15	4713
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1169218	16	1256215
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20 21	Tax-exempt bond liabilities		20	·
m	22	Loans and other payables to current and former officers, directors,		21	
Liabilities	22	trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		26	
Net Assets or Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets		27	
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets	• "	29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	1169218	33	1256215
	34	Total liabilities and net assets/fund balances	1169218		1256215

D	4	
rage		_

Part	XI Reconciliation of Net Assets	_		
	Check if Schedule O contains a response or note to any line in this Part XI			<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1	_	296690
2	Total expenses (must equal Part IX, column (A), line 25)	2		209693
3	Revenue less expenses. Subtract line 2 from line 1	3		86997
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1169218
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		125621
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>	<u> </u>
				Yes No
1	Accounting method used to prepare the Form 990: ✓ Cash ☐ Accrual ☐ Other			į
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in		
	Schedule O.			
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	✓
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled or		į
	reviewed on a separate basis, consolidated basis, or both:			ŀ
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?		2b	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a		
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for of the audit, review, or compilation of its financial statements and selection of an independent according to the second selection of the second selection selection of the second selection selec			
	·		2c	
	If the organization changed either its oversight process or selection process during the tax year, e Schedule O.	xpiain in		
0-		forth in		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?		25	
L	If "Yes," did the organization undergo the required audit or audits? If the organization did not und		3a	
b	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3ь	
	Toquired addit of addits, explain why in concedure o and describe any steps taken to undergo such	addits.		n 990 (2013

ŞCHEDULE 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.

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

Open to Public Inspection

USW DISTRICT 2 LOCAL 12934	38-1551119			
PART VI LINE 6: ALL MEMBERS IN GOOD STANDING ARE VOTING MEMBERS.				
LINE 7A: ALL OFFICERS ARE ELECTED TO A THREE YEAR TERM BY THE VOTING MEMBER	SHIP			
LINE 7B: DECISIONS ARE PROPOSED OR RECOMMENDED TO THE MEMBERSHIP AT A MON	ITHLY MEETING AND VOTED ON			
LINE 8A: MEETING MINUTES ARE RECORDED AND APPROVED AS DOCUMENTED BY THE V				
LINE 8B: COMMITTEE'S DOCUMENT RECOMMENDATIONS AND PROPOSE CHANGES AT RE	GULAR MONTHLY MEETINGS.			
LINE11B: ALL FINANCIAL STATEMENTS AND REPORTS TO THE DEPT. OF LABOR AND IRS	ARE AVAILABLE TO ANY MEMBER			
FOR REVEIW UPON REQUEST.				
LINE 19: IT IS A REQUIREMENT FOR THIS ORGANIZATION TO FILE LM-2 REPORTS TO THE I	DEPT. OF LABOR/ OLMS AND			
THEY CAN BE VIEWED BY THE PUBLIC ON THE INTERNET WEB PAGE OR A HARD COPY C	AN BE REQUESTED.			
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