

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



S

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Open to Public ...

OMB No 1545-0047

Department of the Treasury

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. A For the 2013 calendar year, or tax year beginning and ending C Name of organization Check if D Employer identification number INTERNATIONAL ASSOCIATION OF SHEET METAL Address AIR, RAIL AND TRANSPORTATION WORKERS Name Ichange 46-4039786 Doing Business As]initial return Number and street (or P.O box if mail is not delivered to street address) Room/suite E Telephone number Termin-1750 NEW YORK AVENUE, N.W. 783 5880 202 Amended return 74,053,642. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ X Applica WASHINGTON, DC 20006 H(a) Is this a group return F Name and address of principal officer: JOSEPH NIGRO ⊒Yes X No for subordinates? . . L SAME AS C ABOVE H(b) Are all subordinates included? Yes No Tax-exempt status: 501(c)(3) X 501(c) () (insert no.) 4947(a)(1) or if "No." attach a list. (see instructions) J Website: ► WWW.SMART-UNION.ORG H(c) Group exemption number ▶ K Form of organization: Corporation Trust X Association L Year of formation 2012 M State of legal domicile: DC Part | Summary Briefly describe the organization's mission or most significant activities: THE INTERNATIONAL ASSOCIATION OF Governance SHEET METAL, AIR, RAIL AND TRANSPORTATION WORKERS (SMART) IS A BROAD oxdot if the organization discontinued its operations or disposed of more than 25% of its net assets. 18 Number of voting members of the governing body (Part VI, line 1a) 0 Number of independent voting members of the governing body (Part VI, line 1b) Activities & 1479 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 0 Total number of volunteers (estimate if necessary) 6 Ò. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34. 0. 7b **Prior Year Current Year** 0. Contributions and grants (Part VIII, line 1h) 63,624,266. 63,690,442. Program service revenue (Part VIII, line 2g) 3,012,128 2,399,656. Investment Income (Part VIII, column (A), lines 3, 4, and 7d) 3,273,530 2,467,861. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 69,909,924. 68,557,959. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Ō. 0 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) ... 30,723,973 27,599,001. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 32,474,454. 31,704,588. Total expenses Add lines 13-17 (flust equal Part IX, column (A), line 25)
Revenue less expenses. Subtractine 18 from line 12 63,198,427. 59,303,589. 9,254,370. 6,711,497 Beginning of Current Year **End of Year** 20 Total assets (Part X) (ne (6) 137,600,893. 153,834,164. Total liabilities (Part X, line 26) 107,438,266. 44,955,678. Net assets or fund balances. Subtract line 21 from line 20 $30,\overline{162},627.$ 108,878,486. Part II Signature Block Under penalties of perjury, I declare that I have examined this setum, including accompanying schedules and statements, and to the best of my knowledge and belief, it is ne officer assed on all information of which preparer has any knowledge true, correct, and complete De Signature of office Sign JÖSEPH SELLERS, JR., GENERAL SECRETARY TREASURER Here Type or print name and title Print/Type preparer's name Preparer's signature JOANN WOODSON, CPA P01293745 Paid Firm's name CALIBRE CPA GROUP PLLC Preparer 47-0900880 Firm's EIN Use Only 7501 WISCONSIN AVENUE, SUITE Firm's address

LHA For Paperwork Reduction Act Notice, see the separate instructions.

BETHESDA, MD 20814

May the IRS discuss this return with the preparer shown above? (see instructions)

Form 990 (2013)

X Yes No

Phone no 202-331-9880

Howard Sulley 1 11

<u>4e</u>	Total program service expenses		990 (2012)
	(Expenses \$ including grants of \$) (Revenue \$)	
4d	Other program services (Describe in Schedule O)		
			
			
4c	(Code) (Expenses \$ including grants of \$) (Reven	ue \$)
		·· ····	
		 ::	-
			_
4b	(Code) (Expenses \$	ue \$)
	ACHIEVE A HIGHER STANDARD OF LIVING.	GOLIALIONS .	
4 a	(Code) (Expenses \$)
_	revenue, if any, for each program service reported.		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	- ·	
4	Describe the organization's program service accomplishments for each of its three largest program services, as	s measured by expense	es
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O.	└─ │Y es	S LALINO
2	If "Yes," describe these new services on Schedule O.	 .	X No
	the prior Form 990 or 990-EZ?	Yes	X No
2	Did the organization undertake any significant program services during the year which were not listed on		
	STATES AND CANADA AND TO PROTECT WORKERS' RIGHTS AS MEM		
	PRODUCTION, BUS AND MASS TRANSIT AND SHIPYARD INDUSTRIE		
	TO ENSURE A COOPERATIVE EFFORT DIRECTED TO FULLY DEVELOR DEMONSTRATE THE POSSIBILITIES OF WORKERS IN BUILDING TR.		
1	Briefly describe the organization's mission		
	Check if Schedule O contains a response or note to any line in this Part III		
	990 (2013) AIR, RAIL AND TRANSPORTATION WORKERS t III Statement of Program Service Accomplishments	46-4039786	Page 2
- .	ACC (COLC) A TO DATE AND MOANCHCOMANTON MODIFIED C	<i>16 1</i> 020706	_ ^

	·		res	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
-	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	х	
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		X
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_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasiendowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	1
	Part VI	<u>11a</u>	Λ	
þ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	IID		 -
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	-1.0		<u> </u>
•	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	17	X
	Did the organization maintain an office, employees, or agents outside of the United States?	1 <u>4a</u>	X	
D	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	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	140	-	
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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	17	<u> </u>	Х
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		X
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		Х
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<u> </u>	Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990	(2013)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		162	NO
_ ,	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	
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's pnor 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			v
28	of any of these persons? If "Yes," complete Schedule L, Part III	27		<u> </u>
20	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer.	205		
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u> </u>
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		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		.	
05-	Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	051		v
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		<u> </u>
5 0	If "Yes," complete Schedule R, Part V, line 2	26		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<u> </u>		 -
	Note. All Form 990 filers are required to complete Schedule O	38	х	
				2013)
			,	

Fo

	990 (2013) AIR, RAIL AND TRANSPORTATION WORKERS 46-4039	<u> 786</u>	P	age 5
Pai	rt 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 1a 201			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 1479			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
ь	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х	
ь	If "Yes," enter the name of the foreign country ► CANADA			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		Х
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).			
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?	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		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	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	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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 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?	9a		
þ	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Щ
0	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	.		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	.		
1	Section 501(c)(12) organizations. Enter	.		
а	Gross income from members or shareholders	.		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	.		
_	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
_	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
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			
þ	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			

332005 10-29-13

14a Did the organization receive any payments for indoor tanning services during the tax year?

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

X

Form **990** (2013)

14a

Form 990 (2013)

AIR, RAIL AND TRANSPORTATION WORKERS

46-4039786

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

	. Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 18			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 0			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	v	Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	l _	v	
	more members of the governing body?	7a	X	
В	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			X
	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7Ь		<u> </u>
8	The governing body?	8a	Х	
a b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	- 05	<u> </u>	
J	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х	
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	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	ì	Х
b	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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		i	
	ın Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	-	Х
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent		1	1
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		х	
a	The organization's CEO, Executive Director, or top management official	15a	X	├-
D	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b	├┷	
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			i
.ua	taxable entity during the year?	16a		x
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100	 -	
-	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		1
Sec	tion C. Disclosure		-	-
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availat	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncial	
	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 of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books are personally the person of the pe	tion 🕨	- _	
	DAVID M. DARCEY - 202 783 5880			
	1750 NEW YORK AVENUE, NW, 6TH FLOOR, WASHINGTON, DC 20006			
332000	3 10-29-13	Form	990	(2013)

rm 990 (2013)

AIR, RAIL AND TRANSPORTATION WORKERS

46-4039786 Pa

Page 7

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 any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key 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

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

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

(4)	(0)	T			21			(5)	(E)	(5)
(A) Name and Title	(B) Average		(C) Position		(D) Reportable	(E) Reportable	(F) Estimated			
Name and title	hours per	(do	(do not check more than one box, unless person is both an		compensation	compensation	amount of			
	week	offic	cer an	d a d	recto	or/trus	tee)	from	from related	other
	(list any	į						the	organizations	compensation
	hours for	all p			ŀ	8		organization	(W-2/1099-MISC)	from the
	related	te o	ustee			ensat		(W-2/1099-MISC)		organization
	organizations	Į	naltr	ļ	oyee	d Ho	ļ		1	and related
	below	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	line)	르	Ĕ	₹	Æ	물통	ᅙ			
(1) JOSEPH NIGRO	40.00	١.,						427 000	_	20 105
GENERAL PRESIDENT	40.00	Х	-	Х		<u> </u>		437,088.	0.	38,185.
(2) JOSEPH SELLERS JR	40.00	ļ.,		۱,,				401 710	_	CC 711
GENERAL SECRETARY TREASURE	1 40 00	X	-	X	<u> </u>		Ъ	401,710.	0.	66,711.
(3) NORMAN WHITEMAN	40.00	\ _{**}		Į.,				47 422		20 225
VICE PRESIDENT	40.00	X	⊢	Х	<u> </u>	⊢	ļ	47,423.	0.	39,335.
(4) BRUCE WORD	40.00	.		. ,		ĺ		E2 161	_	40 000
VICE PRESIDENT	40.00	Х		Х	┡	 		52,161.	0.	40,968.
(5) JOHN HELAK	40.00	X		٠,				22.265	_	27 (01
VICE PRESIDENT	40.00	A	├-	Х	<u> </u>		₩.	22,365.	0.	27,681.
(6) RONALD WHATLEY	40.00	x		x				[7 072	0.	42 766
VICE PRESIDENT	40.00	₽		^		├	ļ	57,872.	<u></u>	42,766.
(7) DAVID ZIMMERMANN	40.00	x		x				E0 147	0.	40 100
VICE PRESIDENT (8) MARK CURTIS	40.00	┞	<u> </u>	^	├-	₩	<u> </u>	58,147.	<u> </u>	42,133.
, - ,	40.00	X		x				E2 022	0.	E 353
VICE PRESIDENT	40.00	^	├	^	H	├		53,833.	<u> </u>	5,352.
(9) PAUL COLLINS	40.00	X		x				25 125	0.	25 021
VICE PRESIDENT (10) PATRICK LANDGRAF	40.00	^	\vdash	₽	⊢	┢	-	35,135.	<u> </u>	25,931.
VICE PRESIDENT	40.00	$ _{\mathbf{x}}$		X			ĺ	51,156.	0.	39,560.
(11) DEREK EVANS	40.00	╀≏	-	^	⊢	┢	-	31,130.	U•	39,300.
VICE PRESIDENT	40.00	x		x	ĺ			53,583.	0.	5,352.
(12) JOSEPH POWELL	40.00	╇	├	^	\vdash	╁	-	33,363.		3,332.
VICE PRESIDENT	40.00	X	l	x				54,787.	0.	35,319.
(13) PAUL HAYES	40.00	<u> </u>	⊢	^	┢	⊬	├-	34,707.	<u> </u>	33,313.
VICE PRESIDENT	40.00	\mathbf{x}	1	x	1	Ì	1	53,352.	0.	51,575.
(14) REGGIE HOHENBERGER	40.00	1	┢	^	⊢	⊢	├	33,332.		31,373.
VICE PRESIDENT	40.00	x		x				218,375.	0.	51 072
(15) MALCOM FUTHEY JR	40.00	╇	├	1	H	┢		210,373.	<u> </u>	51,972.
VICE PRESIDENT	40.00	$ \mathbf{x} $		x				302,574.	0.	67,217.
(16) JOHN PREVISICH	40.00	1	├	A	⊢	⊬	┢	302,374.	<u></u>	07,217.
VICE PRESIDENT	40.00	X		x			l	250,288.	0.	47,452.
(17) DAVID WEIR	40.00	╇	₩	┝≏	 	╁	Ͱ	230,200.		41,454.
VICE PRESIDENT	30.00	$ \mathbf{x} $	l	x	l			156,508.	0.	48,228.
332007 10-29-13	<u> </u>	IA	Ц_	Λ		<u> </u>	Ц_	1 130,300.		Form 990 (2013)

332007 10-29-13

46-4039786 AIR, RAIL AND TRANSPORTATION WORKERS Page 8 Form 990 (2013) Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) (C) (F) (D) (E) Position Name and title Average Reportable Reportable Estimated (do not check more than one box, unless person is both an officer and a director/trustee) hours per compensation compensation amount of week from from related other (list any organizations compensation the hours for organization (W-2/1099-MISC) from the ndrwdual trustee or related nstitutional trustee (W-2/1099-MISC) organization organizations and related below organizations Officer line) (18) ROBERT KERLEY 40.00 VICE PRESIDENT X 174,164 0. 33,750. (19) JOHN LESNIEWSKI 40.00 X VICE PRESIDENT 178,183 0. 34,473. 40.00 (20) JOHN R ENGLAND X 0. VICE PRESIDENT 170,733. 32,763. 40.00 (21) TROY L JOHNSON X VICE PRESIDENT 166,830 0. 37,663. (22) BONNIE L MORR 40.00 X 174,164 0. 33,750. VICE PRESIDENT 40.00 (23) PAUL W TIBBIT X 0. 2,911 524. VICE PRESIDENT 40.00 (24) RICHARD MCCLEES 252,684 X 0. 36,618. CHIEF OF STAFF 40.00 (25) CHRISTOPHER CARLOUGH DIRECTOR OF EDUCATION X 215,523 0 42,960. 40.00 (26) JAY POTESTA DIRECTOR OF GOVERNMENTAL A 216,199 0. 36,224. 964,462. 3,857,748. 0. 1b Sub-total 2,649,296. 0. 458.584. c Total from continuation sheets to Part VII, Section A

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Yes No Х 3 X 4

1423046.

141

X

line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

d Total (add lines 1b and 1c)

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation			
- ·	HEALTH INSURANCE ADMINISTRATOR	3,955,700.			
UNITED UNIONS		3,333,700.			
1750 NEW YORK AVENUE, WASHINGTON, DC 20006	LANDLORD - RENT	1,416,076.			
MOSAIC	L				
	PRINTING COMPANY	801,417.			
	LANDLORD - RENT	753,408.			
MAXIMUM TECHNOLOGIES					
4868 10TH STREET SOUTH, ARLINGTON, VA 22204	IT SUPPORT	510,312.			
Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 18					

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2013)

332008 10-29-13

6,507,044.

Page 9

	· • • • • • • • • • • • • • • • • • • •	Check if Schedule O cont		or note to any lin	e in this Part VIII			
	1		<u> </u>	or note to any m	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
G a	b	Membership dues	1b					
Ağ,	С	Fundraising events	1c					
ig ig	d	Related organizations	1d					
S,E	е	Government grants (contribut	ions) 1e					
ig P	f	All other contributions, gifts, gran	ts, and					ĺ
털		similar amounts not included abo	ve 1f					
E D	-	Noncash contributions included in lines	1a-1f \$					
<u>5 e</u>	h	Total. Add lines 1a-1f		. .				
	_	MEMBERGUID DURG		Business Code 900099	62 760 605	62 760 605		
j j	2 a			900099	62,760,695.	62,760,695.		
Program Service Revenue	b	PROTONIL MERETING THEON	P	900099	737,423.	737,423. 192,324.		
E S	C			300033	192,324.	192,324.		
<u>8</u> 8	d					· · · · · · · · · · · · · · · · · · ·		
۳.	e f			l				
İ		Total. Add lines 2a-2f	uc		63,690,442.			
\neg	3	Investment income (including	dividends, intere	est, and	<u>, , , , , , , , , , , , , , , , , , , </u>			
1		other similar amounts)		•	2,384,821.			2,384,821.
	4	Income from investment of ta	x-exempt bond p	oroceeds 🕨				
	5	Royalties		▶				
]			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less rental expenses						
	С	Rental income or (loss)		l				
		Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	5,510,518					
	Ь	Less cost or other basis	E 40E 603					
		and sales expenses	5,495,683,					:
		Gain or (loss)	14,033.		14,835.			14,835.
		Net gain or (loss)	a avanta (nat		14,033.			14,033.
휠	0 4	Gross income from fundraisin including \$						
Other Revenue		contributions reported on line						
<u>۾</u> ا		Part IV, line 18	а					
ᇍ	ь	Less direct expenses	b					į
0		Net income or (loss) from fund	draising events					
İ		Gross income from gaming ac	-					
[Part IV, line 19	а	L				
	Ь	Less: direct expenses	b					
- 1	С	Net income or (loss) from gam	ning activities					
	10 a	Gross sales of inventory, less	returns					
İ		and allowances	а					İ
	b	Less cost of goods sold	b					
L	С	Net income or (loss) from sale		 ▶				
}		Miscellaneous Revenu	<u> </u>	Business Code				1
		REIMBURSEMENTS		900099	1,909,716.	1,909,716.		
	b		COME	900099	558,145.	558,145.		
- 1	C			 				
-	d	= =			2,467,861.	 		
1	е 12	Total. Add lines 11a-11d Total revenue. See instructions.	•		68,557,959.	66,158,303.	0.	2,399,656.
332009 10-29					,,.			Form 990 (2013)

Form 990 (2013) AIR, RAIL AND Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com			omplete column (A)	
	Check if Schedule O contains a respon			(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	Management and general expenses	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		· <u>-</u> -		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	6 171 122		ì	
	trustees, and key employees	6,171,132.		 	
6	Compensation not included above, to disqualified			1	
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	11,708,121.			
7	Other salaries and wages Pension plan accruals and contributions (include	11,700,121.		-	
8	section 401(k) and 403(b) employer contributions	3,884,945.			
	Other employee benefits	3,363,815.			·
9 10	Payroll taxes	2,470,988.		 	
11	Fees for services (non-employees)	2,270,3001			··
'' a	Management				
b	Legal	1,377,404.			
c	<u> </u>	188,332.			
d	Lobbying				
e	D () () D () () 17				··
f	Investment management fees	88,240.	-		
g	- : : : : : : : : : : : : : : : : : : :				
_	column (A) amount, list line 11g expenses on Sch O.)	1,657,846.			
12	Advertising and promotion	353,029.			
13	Office expenses	1,315,739.			
14	Information technology	45,263.			
15	Royalties				
16	Occupancy	1,087,992.			
17	Travel	4,760,723.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	1 507 447			
19	Conferences, conventions, and meetings	1,507,447.			·
20	Interest	2,321,387.		 	
21	Payments to affiliates	182,225.			 .
22	Depreciation, depletion, and amortization	507,553.		· · · · · · · · · · · · · · · · · · ·	
23	Insurance Other expenses. Itemize expenses not covered	307,333.	· · · · · ·		
24	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 0.)				
а	OTHER POST RETIREMENT B	6,880,279.			
þ	ORGANIZING	5,788,315.			<u> </u>
С	OTHER EXPENSES	2,159,921.			<u> </u>
d	CONTRIBUTIONS	652,667.			
	All other expenses	830,226.		ļ	
25_	Total functional expenses. Add lines 1 through 24e	59,303,589.			
26	Joint costs. Complete this line only if the organization	li .			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)			<u> </u>	

46-4039786 Page 11

Form 990 (2013)
Part X Balance Sheet

rai	LA	Object (Object Object O			
		Check if 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	16,056,957.	1	22,767,115.
	2	Savings and temporary cash investments	8,528,990.	2	8,397,664.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	2,163,394.	4	1,315,588.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete	1		
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under	r		
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing	ng		
		employers and sponsoring organizations of section 501(c)(9) voluntary			
S		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	<u></u>
Assets	7	Notes and loans receivable, net	73,859.	7	63,553.
⋖	8	Inventories for sale or use	351,247.	8	267,886.
	9	Prepaid expenses and deferred charges	785,777.	9	426,938.
	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 4,603,220			
	ь	Less accumulated depreciation 10b 3,486,242	1,056,686.	10c	1,116,978.
	11	Investments - publicly traded securities	97,962,101.	11	107,939,498.
	12	Investments - other securities See Part IV, line 11	7,364,368.	12	8,368,199.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	3,257,514.	15	3,170,745.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	137,600,893.	16	153,834,164.
	17	Accounts payable and accrued expenses	5,199,447.	17	3,257,269.
	18	Grants payable	4 050 053	18	4 446 001
	19	Deferred revenue	1,272,053.	19	1,416,984.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ŝ	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		key employees, highest compensated employees, and disqualified persons			
		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	<u> </u>	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	100,966,766.		40,281,425.
	26	Schedule D Total liabilities Add lines 17 through 95		26	44,955,678.
	20	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here		26	44,555,070.
so .		complete lines 27 through 29, and lines 33 and 34.			
Net Assets of Fund Balances	27	Unrestricted net assets	29,070,165.	27	107,835,488.
a a	28	Temporarily restricted net assets	1,092,462.	28	1,042,998.
ă	29	Permanently restricted net assets	1,052,1021	29	1,042,000
ב ב	- "	Organizations that do not follow SFAS 117 (ASC 958), check here		_25	·
7		and complete lines 30 through 34.			
2	30	Capital stock or trust principal, or current funds		30	1
226	31	Paid-in or capital surplus, or land, building, or equipment fund	 	31	
7	32	Retained earnings, endowment, accumulated income, or other funds	 	32	
2	33	Total net assets or fund balances	30,162,627.	33	108,878,486.
	34	Total liabilities and net assets/fund balances		34	153,834,164.
_	<u> </u>	Town Incomined und her assers/fully paidfiles	1 23. , 000 , 033.		Form 990 (2013)

Form 990 (2013)

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	68	<u>, 55</u>	<u>7,9</u>	<u>59.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2				89.
3	Revenue less expenses Subtract line 2 from line 1	3				70.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4				27.
5	Net unrealized gains (losses) on investments	5	6	, 86	7,4	64.
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	62	, 59	4,0	25.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	108	, 87	8,4	86.
Pa	rt XII Financial Statements and Reporting		-	_		
	Check if Schedule O contains a response or note to any line in this Part XII					X
			_		Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		LX_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	i on a		l		
	separate basis, consolidated basis, or both			1		
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		Ĺ	2b	X	Ĺ
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basıs,				
	consolidated basis, or both:					
	Separate basis X 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 oversight of the	e audīt,	ŀ			
	review, or compilation of its financial statements and selection of an independent accountant?		L	2c	Х	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audi	ıt			
	Act and OMB Circular A-133?		ļ	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ıred audı	t			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		<u> </u>
				Form	990 ((2013)

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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.

OMB No 1545-0047

Open to Public Inspection

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

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

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

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

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

Section 50 (c)(4), (5), or (6) organiza				
	ATIONAL ASSOCIATIO			loyer identification number
	AIL AND TRANSPORTA			46-4039786
Part I-A Complete if the org	ganization is exempt under	r section 501(c) c	or is a section 527 o	rganization.
1 Provide a description of the organia2 Political expenditures3 Volunteer hours	zation's direct and indirect political	campaign activities in	Part IV ▶\$	
Part I-B Complete if the org	ganization is exempt under	r section 501(c)(3	3).	
1 Enter the amount of any excise tax			▶ \$	
2 Enter the amount of any excise tax			▶ \$	
3 If the organization incurred a section			•	Yes No
4a Was a correction made?	·	,		Yes No
b If "Yes," describe in Part IV				
Part I-C Complete if the org	ganization is exempt under	r section 501(c),	except section 501	(c)(3).
1 Enter the amount directly expende	d by the filing organization for secti	on 527 exempt function	on activities > \$	
2 Enter the amount of the filing organ				
exempt function activities			▶ \$	1
3 Total exempt function expenditures	s Add lines 1 and 2 Enter here and	on Form 1120-POL,		
line 17b			▶ \$	•
4 Did the filing organization file Form	1120-POL for this year?			Yes No
contributions received that were pr	mployer identification number (EIN) ation listed, enter the amount paid f romptly and directly delivered to a s additional space is needed, provide	rom the filing organiza separate political orgai	ition's funds. Also enter th nization, such as a separa	ne amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
			filing organization's funds If none, enter -0	contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
	WASHINGTON, DC			
INTERNATIONAL A	20006	52-2256216	558,000.	0.
	NORTH OLMSTED, OH			
UTU PAC	44070	34-6701463	0.	1,107,669.
				

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

SEE PART IV FOR CONTINUATION

Schedule C (Form 990 or 990-EZ) 2013

LHA

Schedule C (Form 990 or 990 EZ) 2013 AIR Part II-A Complete if the organiza	RAIL A	ND TRANSPOR	TATION WORK	ERS 46-4	4039786 Page 2
(election under section s		inpi under sectio	in 501(c)(s) and in	eu Form 5766	
		distant serves (see at least or	- D- + N/ b - #51-+- d		- address CIN
A Check ► L If the filing organization be			n Part IV each amiliated	group member's nai	ne, address, EIN,
expenses, and share of ex					
B Check ▶ ☐ If the filing organization ch	ecked box A a	na "limitea control" pre	ovisions apply	4-151	[(b) A(6) = 1 = 1
Limits on L (The term "expenditures	obbying Expe " means amou)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence	oublic opinion (grass roots lobbying)			
b Total lobbying expenditures to influence a	a legislative bo	dy (direct lobbying)			
c Total lobbying expenditures (add lines 1a	and 1b)				
d Other exempt purpose expenditures			\		
e Total exempt purpose expenditures (add	lines 1c and 1c	d)			
f Lobbying nontaxable amount. Enter the a			th columns		
If the amount on line 1e, column (a) or (b) is:		bying nontaxable am			
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,000,000		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,500,000		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,000,000		00 plus 5% of the exce			
Over \$17,000,000	\$1,000,		255 OVER \$1,300,000.		
Over \$17,000,000	1 \$1,000,	000			
Cracerate postsychia amount (onter 05)	/ -flin- 16	<u> </u>			
g Grassroots nontaxable amount (enter 259	•		ŀ		
h Subtract line 1g from line 1a If zero or les	•				+
i Subtract line 1f from line 1c If zero or les	· ·				<u></u>
j If there is an amount other than zero on e	ither line 1h or	line 1i, did the organiz	ation file Form 4720		—. —
reporting section 4911 tax for this year?					Yes No
•	that made a s		· Section 501(h) n do not have to comp es 2a through 2f on pa		
	obbying Expe	nditures During 4-Ye	ar Averaging Period		•
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2013

INTERNATIONAL ASSOCIATION OF SHEET METAL

redule C (Form 990 or 990-EZ) 2013 AIR, RAIL AND TRANSPORTATION WORKERS 46-4039786 Page 3

	Form 990 or 990 EZ 2013 AIN,				40-4033/00	F
Part II-B	Complete if the organizat	ion is exempt	under section 501(c)(3)	and has NOT file	ed Form 5768	_
	(election under section 50	01(h)).				

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(6	a)	(1	b)
of the lobbying activity	Yes	No	Ame	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?			<u> </u>	
e Publications, or published or broadcast statements?	-		<u></u>	
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
 h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? 		1	<u></u> _	
j Total Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912		<u> </u>	<u> </u>	
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912	ŀ			·
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), s	ection 501(c)	(5), or se	ection	
501(c)(6).		,(0), 01 00		
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1_1_	X	
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	<u> </u>	X
Part III-B Complete if the organization is exempt under section 501(c)(4), s 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes."				ne 3, is
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		00		
b Carryover from last year		2a 2b	<u> </u>	
c Total				
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du	00	2c 3		·
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		<u> </u>		
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying				
expenditure next year?	and political	4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
Part IV Supplemental Information	· ·-	<u> </u>	L	
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 I	I.∆ line 2 s	nd Part II.F	3 line 1
Also, complete this part for any additional information			ina raitire), iii le 1
PART I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS	INFORMATI	LON:		
SHEET METAL WORKERS INTERNATIONAL ASSOCIATION POLI	TICAL EDU	JCATIO	N LEAC	GUE
1750 NEW YORK AVENUE WASHINGTON, DC 20006				
UTU PAC				
OIO IAC				·
24950 COUNTRY CLUB BLVD NORTH OLMSTED, OH 44070		L 0/5	202	
332043	Schedu	le C (Form	990 or 990	J-EZ) 2013

SCHEDULE D

(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

Open to Public

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

INTERNATIONAL ASSOCIATION OF SHEET METAL

RATI. AND TRANSPORTATION WORKERS

Employer identification number 46-4039786

Pa	rt I Organizations Maintaining Donor Advise		or Accounts Complete if the
	organization answered "Yes" to Form 990, Part IV, line		or recoding to the
	Organization answered Tes to Form 330, Fart 17, Inte	(a) Donor advised funds	(b) Funds and other accounts
4	Total number at and of year	(a) perior davised failed	(b) rando and other abounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate value at and of year		
4	Aggregate value at end of year		d formula
5	Did the organization inform all donors and donor advisors in v	_	
_	are the organization's property, subject to the organization's	•	└─ Yes └─ No
6	Did the organization inform all grantees, donors, and donor a	• •	-
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose co	
Pa	rt II Conservation Easements. Complete if the org	Januaration answered "Vee" to Form 900. Be	Yes No
			t iv, line /
1	Purpose(s) of conservation easements held by the organization		weally important land area
	Preservation of land for public use (e.g., recreation or e	Preservation of a certific	orically important land area
	Preservation of open space	Freservation of a certific	ed historic structure
2	Complete lines 2a through 2d if the organization held a qualif	ind concentration contribution in the form of	
2		led conservation contribution in the form of	a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
a h	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	, ,	
u	listed in the National Register	arter of 17700, and not on a historic structure	~ 2d
3	Number of conservation easements modified, transferred, rel	eased extinguished or terminated by the	
3	year	eased, extinguished, or terminated by the t	organization during the tax
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per		
Ŭ	violations, and enforcement of the conservation easements if	• • •	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and	-	
8	Does each conservation easement reported on line 2(d) above	_	· —————————
_	and section 170(h)(4)(B)(ii)?	,,	Yes No
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense s	tatement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat	•	
	conservation easements		
Pa	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or Oth	ner Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue stateme	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	nibition, education, or research in furtherand	ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	bes these items.	·
ь	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement a	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of publi	ic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre-	asures, or other similar assets for financial c	
	the following amounts required to be reported under SFAS 1	-	
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
b	Assets included in Form 990, Part X	•	► \$ ► \$
	·		

		IL AND TRA							39786	
Par	t III Organizations Maintaining C	ollections of A	rt, Hist	torical Tre	easures, c	or Other	Simil	<u>ar Asse</u>	ts (continu	ed)
3	Using the organization's acquisition, accessi	on, and other record	ls, checl	k any of the t	following tha	at are a sig	nıfıcant	use of rts	collection i	tems
	(check all that apply)									
а	Public exhibition	d	· 🖳	Loan or exch	nange progra	ams				
b	Scholarly research	е	, 🗀	Other				_		
C	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ney further th	ne organizati	on's exem	pt purpo	ose in Par	t XIII.	
5	During the year, did the organization solicit o	r receive donations	of art, hi	storical treas	sures, or oth	er sımılar a	assets		_	
	to be sold to raise funds rather than to be ma								Yes	No_
Par	t IV Escrow and Custodial Arran		ete if the	organization	n answered	"Yes" to F	orm 990	, Part IV, I	line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21								
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	s or other as	ssets not ir	ncluded	_	_	
	on Form 990, Part X?							L	Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table					_	
									Amount	
C	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
	Did the organization include an amount on F							ــا.	」Yes	<u></u> ⊢⊢ №
	If "Yes," explain the arrangement in Part XIII.									<u> </u>
Par	t V Endowment Funds. Complete		-		_					
		(a) Current year	(b) P	rior year	(c) Two yea	rs back (c	1) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance		<u> </u>						!	
b	Contributions		<u> </u>							
C	Net investment earnings, gains, and losses		 						<u> </u>	
d	Grants or scholarships	 	 							
е	Other expenditures for facilities									
	and programs									
f -	Administrative expenses		_						 	
9	End of year balance				W L . I d				L	
2	Provide the estimated percentage of the cur	rent year end baland	-	g, column (a	i)) neid as					
	Board designated or quasi-endowment		_%							
b	Permanent endowment									
C	Temporarily restricted endowment ▶ The percentages in lines 2a, 2b, and 2c should be considered.	%								
20	Are there endowment funds not in the posse	•	ation the	at ava bald av	ad administr	and for the		-ation		
Ja	·	ssion of the organiz	auon m	at are neto at	nu aunimisie	ereu for the	e organi.	zation	[√	es No
	(ı) unrelated organizations								3a(i)	63 110
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organization:	s listed as required o	on Scher	dule R?					3ь	
4	Describe in Part XIII the intended uses of the								05	
_	t VI Land, Buildings, and Equipm		- WILLIAM	101100						
	Complete if the organization answere). Part IV	/. line 11a Sc	ee Form 990). Part X. lir	ne 10			
	Description of property	(a) Cost or o		(b) Cost			cumulate	ed T	(d) Book	value
		basis (investi		basis (٠, ٠	eciation		(-,	
1a	Land		<u>-</u>		·					
	Buildings									
	Leasehold improvements			1,37	4,556.	1,3	32,0	75.	42	,481.
	Equipment		_		8,664.		54,1		1,074	
	Other						<u> </u>			
_	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, colur	nn (B), line 1	0(c))			▶	1,116	,978.

Schedule D (Form 990) 2013

	AL ASSOCIATIO ND TRANSPORTA		, 46-4039786 _{Page} 3
Schedule D (Form 990) 2013 AIR, RAIL A Part VIII Investments - Other Securities.	IND IKANSPORIA	TION WORKERS	40-4039700 Page 3
L	4- F 000 D- + N/ 1	141 O 5- 000 D-171	
Complete if the organization answered "Yes" (a) Description of security or category (including name of security)	(b) Book value		ost or end-of-year market value
	(b) book value	(c) Method of Valuation Co	ost or end-or-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other	0 260 400	60.65	
(A) UNITED UNIONS	8,368,199.	COST	
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	8,368,199.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	to Form 990, Part IV, line	11c. See Form 990, Part X, line	13
(a) Description of investment	(b) Book value		ost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)	-		
(7)			
(8)		<u> </u>	
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	<u> </u>	<u> </u>	

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d See Form 990, Part X, line 15.

(a) Description		(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		<u> </u>
(6)		
(8)		
(9)	· · · · · · · · · · · · · · · · · · ·	
Total (Column (b) must equal Form 990, Part X, col. (R) line 15.)		⊾

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

1	(a) Description of liability	(b) Book value
(1) F	ederal income taxes	
(2) I	DUE TO AFFILIATES	1,581,825.
(3) I	DEFERRED REVENUE HELD FOR	
(4)	AFFILIATES	4,746,150.
(5)	AMOUNTS HELD FOR GENERAL	
(6)	COMMITTEES	11,105,703.
(7)	AMOUNTS HELD FOR LEGISLATIVE	
(8) I	BOARDS	3,262,568.
(9)		
Total. (C	olumn (b) must equal Form 990, Part X, col. (B) line 25.)	40,281,425.

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2013

332053 09-25-13

SEE PART XIV FOR CONTINUATIONS

Part XI	Reconciliation of	f Reven	ue per A	Judite	d Financial Statements	With Revenue per	Return	
					TRANSPORTATION		46-4039786	Page

	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	•		
1	Total revenue, gains, and other support per audited financial statements	1	75,42	25,423.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments 2a 6,86	7,464.		
b	Donated services and use of facilities 2b			
С	Recoveries of prior year grants 2c			
d	Other (Describe in Part XIII)			
е	Add lines 2a through 2d	2e		57,464.
3	Subtract line 2e from line 1	3	68,55	57,959.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII)			
c	Add lines 4a and 4b	4c		0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5		57,959.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expe	nses per Ret	urn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.			
1	Total expenses and losses per audited financial statements	1	59,30	03,589.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities 2a			
b	Prior year adjustments 2b			
C	Other losses 2c			
d	Other (Describe in Part XIII)			
е	Add lines 2a through 2d	2e		0.
3	Subtract line 2e from line 1	3	59,30	03,589.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII)		1	
С	Add lines 4a and 4b	4c		0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	59,30	03,589.
	rt XIII Supplemental Information.			
	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,	Part V, line 4, Pa	rt X, line 2; F	Part XI,
lınes	2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information			

PART X, LINE 2:

SMART ACCOUNTS FOR INCOME TAXES IN ACCORDANCE WITH THE

ACCOUNTING STANDARDS CODIFICATION (ASC) TOPIC INCOME TAXES. THESE

PROVISIONS PROVIDE CONSISTENT GUIDANCE FOR THE ACCOUNTING FOR UNCERTAINTY

IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND

PRESCRIBE A THRESHOLD OF "MORE LIKELY THAN NOT" FOR RECOGNITION AND

DERECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX

RETURN. SMART PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE

YEAR ENDED DECEMBER 31, 2013, AND DETERMINED THAT THERE WERE NO MATTERS

THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY

HAVE AN EFFECT ON ITS TAX-EXEMPT STATUS. AS OF DECEMBER 31, 2013, THE

STATUTE OF LIMITATIONS FOR TAX YEARS 2010 THROUGH 2012 FOR THE TWO

Schedule D (Form 990) 2013

332054 09-25-13

Part X Other Liabilities. See Form 990, Part X, line 25	
(a) Description of liability	(b) Amount
ACCRUED PENSION BENEFITS (SHEET METAL)	12,828,256.
ACCRUED POST RETIREMENT HEALTH CARE BENEFITS	12,828,256. 6,756,923.
	
	
	<u> </u>
	
 	
	-
	

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

INTERNATIONAL ASSOCIATION OF SHEET METAL AIR, RAIL AND TRANSPORTATION WORKERS 46-4039786 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the **United States** 3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (a) Region (b) Number of (c) Number of (d) Activities conducted in region (e) If activity listed in (d) (f) Total employees, agents, and independent expenditures is a program service, offices (by type) (e g, fundraising, program for and in the region services, investments, grants to describe specific type investments contractors recipients located in the region) of service(s) in region ın region in region PROGRAM SERVICES NORTH AMERICA UNION BUSINESS 2,419,279. 9 2,419,279. 3 a Sub-total b Total from continuation 0. 0 sheets to Part I

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

Schedule F (Form 990) 2013

2,419,279.

c Totals (add lines 3a

and 3b)

46-4039786

Schedule F (Form 990) 2013

Grants and Other Assistance to Organizations or Entitles Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

(i) Method of valuation (book, FMV, appraisal, other)					
(h) Description of non-cash assistance				į	:
(g) Amount of non-cash assistance					cempt by
(f) Manner of cash disbursement					recognized as tax-e)
(e) Amount of cash grant					foreign country,
(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
(c) Region					is listed above that are n I has provided a section
(b) IRS code section and EIN (if applicable)					recipient organization he grantee or counse
1 (a) Name of organization					2 Enter total number of it the IRS, or for which the

Schedule F (Form 990) 2013

Enter total number of other organizations or entities

3

INTERNATIONAL ASSOCIATION OF SHEET METAL AIR, RAIL AND TRANSPORTATION WORKERS

46-4039786

Schedule F (Form 990) 2013 AIR, RAIL AND TRANSPORTATION WORKERS 46-4039786

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

•	(h) Method of valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2013
	(g) Description of non-cash assistance					Schedul
	(f) Amount of non-cash assistance					
	(e) Manner of cash disbursement					
	(d) Amount of cash grant					
ri Ti	s) Number of recipients					
ditional space is needer	(b) Region					
Part III can be duplicated if additional space is needed.	(a) Type of grant or assistance					

AIR, RAIL AND TRANSPORTATION WORKERS 46-4039786 Schedule F (Form 990) 2013 Part IV Foreign Forms Page 4

1	Was the organization a U.S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2013

Schedule F	(Form 990) 2013 AIR, RAIL AND TRANSPORTATION WORKERS Supplemental Information	46-4039786	Page 5
Part V	Supplemental Information		
	Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounts	no method: amounts of	
•	investments vs expenditures per region); Part II, line 1 (accounting method); Part III (accounting method))
	(estimated number of recipients), as applicable. Also complete this part to provide any additional inform	ation	
		· · · · · · · · · · · · · · · · · · ·	

		·	· · · · · · · · ·
			
		<u></u>	
			
			
	·	<u> </u>	
	· ····································		

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990. ➤ See separate instructions. Information about Schedule J (Form 990) and its instructions is at www.irs

Name of the organization

Department of the Treasury

Internal Revenue Service

INTERNATIONAL ASSOCIATION OF SHEET METAL AIR, RAIL AND TRANSPORTATION WORKERS

Employer identification number 46-4039786

OMB No 1545-0047

Open to Public

Inspection

Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items. X First-class or charter travel X Housing allowance or residence for personal use X Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees X Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or X reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 16 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, X trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract X Compensation survey or study Independent compensation consultant Approval by the board or compensation committee □ Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization a Receive a severance payment or change-of-control payment? 4a b Participate in, or receive payment from, a supplemental nongualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of. a The organization? 5b b Any related organization? If "Yes" to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of. a The organization? 6a 6b b Any related organization? If "Yes" to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

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

Schedule J (Form 990) 2013

Regulations section 53.4958-6(c)?

Schedule J (Form 990) 2013 AIR, RAIL AND TRANSPORTATION WORKERS 46-4039786

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii).

Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation		(a) (a)	in prior Form 990
(1) JOSEPH NIGRO	Ξ	312,78	0	124,306.	19,300.	24,539.	480,927.	0
日日	≘		0.					0
(2) JOSEPH SELLERS JR	Ξ	265,86	0	135,844.	46,072.	24,539.	472,321.	• 0
GENERAL SECRETARY TREASURE	Ξ		0	0	0	0	0	0
(3) REGGIE HOHENBERGER	Ξ	174,00	0.	44,373.	31,611.	24,249.	274,235.	0
VICE PRESIDENT	Ξ	0	0	0	0	0	0	0
(4) MALCOM FUTHEY JR	Ξ	302,57	0	0	54,463.	12,754.	369,791.	0
VICE PRESIDENT	(<u>ii</u>)		0	0				0
(5) JOHN PREVISICH	Ξ	250,28	0	0	45,052.	2,400.	297,740.	0
VICE PRESIDENT	Ξ	0	0	0	0	0	0	0
(6) DAVID WEIR	€	156,50	0	0.	28,171.	20,057.	204,736.	
VICE PRESIDENT	(ii)		0	0	0	0	0	
(7) ROBERT KERLEY	(1)	174,164.	0	0.	31,350.	2,400.	207,914.	0
VICE PRESIDENT	(ii)		0	0	0	0	0	
(8) JOHN LESNIEWSKI	(i)	178,183.	0	0.	32,073.	2,400.	212,656.	
VICE PRESIDENT	▣		0.	0				0
	Ξ	170,73	0.	0.	30,732.	2,031.	203,496.	0
VICE PRESIDENT	▣		0.	0.				0
(10) TROY L JOHNSON	(E)	166,830.	0.0	0.	30,029.	7,634.	204,493.	0
VICE PRESIDENT	(11)		0.	0		0		0
(11) BONNIE L MORR	(:)	174,16	0	0	31,350.	2,400.	207,914.	0
VICE PRESIDENT	<u> </u>		0					0
(12) RICHARD MCCLBES	ε	202,84	0.	49,837.	16,002.	25,206.	293,892.	0
CHIEF OF STAFF	(II)		0.	0		0		0
(13) CHRISTOPHER CARLOUGH	Ξ	171,12	0	44,402.	22,483.	24,278.	262,284.	0
DIRECTOR OF EDUCATION	€	0	0			0		0
(14) JAY POTESTA	Ξ	171,12	0.	45,078.	15,051.	24,954.	256,204.	0
DIRECTOR OF GOVERNMENTAL A	≘		0		0			0
(15) ANDREW MAUTE	Ξ	128,66	0	44,200.	13,777.	24,076.	210,715.	• 0
INTERNATIONAL ORGANIZER	Ξ		0.		0			0
(16) COSTANTINO IANNONE	ε	171,12	0	45,078.	15,051.	24,954.	256,204.	0
DIRECTOR OF RAILROAD AND S	≘	0	0	0.	• 0	0	0.	0
332112				ć			Schedu	Schedule J (Form 990) 2013

AIR, RAIL AND TRANSPORTATION WORKERS 46-4039786

Schedule J (Form 990) 2013

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W.		2 and/or 1099-MISC compensation	(C) Retirement and	able	(E) Total of columns	(F) Compensation
(A) Name and Trle		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	Deneiits	(a)-(i)(a)	reported as deferred in prior Form 990
(17) REVIN MULCAHY	Ξ	161,587.	0	53,936.	14,765.	19,634.	249,922.	0
DIRECTOR OF ORGANIZING	€	0	0	0	0	0	0	0.
(18) JAMES JACKSON	Ξ	226,861.		0.	0	5,352.	232,213.	0
DIRECTOR OF CANADIAN AFFAI	€	0		0	0	1	ı	0
(19) CHARLES HENSON	Ξ	160,828.		206,709.	14,742.	25,757.	408,036.	0
ASSISTANT DIRECTOR OF JURI	€	i i		0				0
(20) GREGORY HALE	ε	209,041.		0	37,627.	2,376.	249,044.	0
FIELD SUPERVISOR - TRANSPO	Ξ			• 0		0		0
(21) JAMES A STEM JR	Ξ	188,725.		0	33,970.	17,153.	239,848.	0
NATIONAL LEGISLATIVE DIRECTOR	(ii)	0.		• 0				0
(22) JOHN RISCH III	(1)	174,164.		• 0	31,350.	2,400.	207,914.	0.
ALTERNATE LEGISLATIVE DIRECTOR	€	0		• 0		0		0
(23) JAMES WILLIAMS	Ξ	219,400.	0	0	39,492.	0	258,892.	0
GENERAL CHAIRMAN - TRANSPO	(ii)			• 0		0.		0
(24) TONY MARTELLA	(i)	198,956.		• 0	35,812.	6,646.	241,414.	0
EXECUTIVE DIRECTOR	(ii)		• 0	• 0				0
(25) KEVIN BRODAR	(i)	194,081.		• 0	34,93	7,338.	236,354.	0
ASSOC GENERAL COUNSEL	(ii)	0.		• 0				0
(26) VOCTOR BAFFONI	(i)	174,164.		• 0	31,350.	2,400.	207,914.	0
INTERNATIONAL STAFF	(iii)			• 0				0
(27) DOYLE K TURNER	(1)	91,783.		• 0	16,521.	9,274.	117,578.	0
VICE PRESIDENT	(ii)	• 0	• 0	• 0	• 0	0	0	0
	Ξ	:						
	(ii)							
	Ξ							
	(ii)							
	Ξ							
	(ii)							
	Ξ							
	<u>(ii</u>							
	Ξ							
	▤							

30

Schedule J (Form 990) 2013

INTERNATIONAL ASSOCIATION OF SHEET METAL AIR, RAIL AND TRANSPORTATION WORKERS

46-4039786

Page 3

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. Schedule J (Form 990) 2013

Part III | Supplemental Information

		Ī								
·										
							į.			

Schedule J (Form 990) 2013

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

OMB No 1545-0047

Open to Public Inspection

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

INTERNATIONAL ASSOCIATION OF SHEET METAL Emplo AIR, RAIL AND TRANSPORTATION WORKERS

Employer identification number 46-4039786

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
BASED UNION WHICH CONSISTS OF DULY CHARTERED LOCAL UNIONS, STATE,
PROVINCIAL AND DISTRICT COUNCILS. THE UNION REPRESENTS WORKERS IN
BUILDING TRADES, RAILROAD, PRODUCTION, BUS AND MASS TRANSIT AND
SHIPYARD INDUSTRIES OF THE UNITED STATES AND CANADA. THE PURPOSE OF
THE ORGANIZATION IS TO ENSURE A COOPERATIVE EFFORT DIRECTED TO FULLY
DEVELOP AND DEMONSTRATE THE POSSIBILITIES OF OUR TRADES IN VARIOUS
FIELDS OF INDUSTRY AND TO PROTECT WORKERS ORIGHTS AS MEMBERS.
FORM 990, PART VI, SECTION A, LINE 6:
THIS IS A MEMBERSHIP ORGANIZATION
FORM 990, PART VI, SECTION A, LINE 7A:
MEMBERS ELECT THE OFFICERS
FORM 990, PART VI, SECTION B, LINE 11:
THE RETURN IS REVIEWED PRIOR TO SIGNING AND FILING
FORM 990, PART VI, SECTION B, LINE 12C:
THE POLICY IS ISSUED ANNUALLY, MUST BE COMPLETED, SIGNED AND
RETURNED
FORM 990, PART VI, SECTION B, LINE 15:
SUBJECT TO BUDGET LIMITATIONS, INTERNATIONAL REPRESENTATIVES
AND INTERNATIONAL ORGANIZERS SHALL BE PAID THE AVERAGE OF THE THIRTY
HIGHEST PAID BUSINESS MANAGERS IN THE UNITED STATES AND CANADA; SALARY
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2013)

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2013
Open to Public Inspection

Employer Identification number 46-4039786

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

► Attach to Form 990. ►Information about Schedule R (Form 990) and its instructions is at www.rs.gov/form990.

INTERNATIONAL ASSOCIATION OF SHEET METAL

AIR, RAIL AND TRANSPORTATION WORKERS Name of the organization Department of the Treasury Internal Revenue Service

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

Part

	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
					-	
						;
		`				
Part II	Part II 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.	ions Complete if the organization ansv	wered "Yes" on Form 990, Par	t IV, line 34 because	it had one or more re	lated tax-exempt

(a)	(q)	(0)	(p)	(e)	(J)	(g) Section 512(b)(13)	2(b)(13)
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	controlled	pell
of related organization		foreign country)	section	status (if section	entity	entlty?	у?
				501(c)(3))		Yes	٩
SHEET METAL WORERS STAFF PENSION PLAN -							
52-6061955, 1750 NEW YORK AVENUE,							
WASHINGTON, DC 20006	PENSION PLAN	DISTRICT OF COLUMBIA 501A	501A			×	
SMWIA STAFF RETIREE HEALTH FUND - 52-6909050							
1750 NEW YORK AVENUE							
WASHINGTON, DC 20006	RETIREMENT HEALTH FUND	DISTRICT OF COLUMBIA 501(C)(9)	501(C)(9)			×	
SMWIA ACCIDENTAL DEATH AND DISMEMBERMENT							
PLAN - 52-1343750, 1750 NEW YORK AVENUE,							
WASHINGTON, DC 20006	DEATH BENEFIT FUND	DISTRICT OF COLUMBIA 501(C)(9)	501(C)(9)			×	
UTU INSURANCE ASSOCIATION							
24950 COUNTRY CLUB BLVD							
NORTH OLMSTED, OH 44070	INSURANCE	онто	501(C)(8)				×

Schedule R (Form 990) 2013

INTERNATIONAL ASSOCIATION OF SHEET METAL AIR, RAIL AND TRANSPORTATION WORKERS

Schedule R (Form 990) 2013

Part III Identification of 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.

Page 2

46-4039786

2	ucated as a partitionally duling the tax year.	ומא אבמו.	;						_	-	.	
(a)	<u>@</u>	<u>ତ</u> ୍ର	<u>5</u>			€	(6) -	E	E		_	¥
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or forcign	Direct controlling entity		Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Dispropo	code V-UBI amount in box 20 of Schedule		al or Per	General or Percentage managing ownership partner?
					,						2	
												i
part IV 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.	ganizations Taxable	as a Corp	oration or Trust Co year.	mplete if the	e organization	answered "Yes	" on Form 990	, Part IV, line	34 because it h	ad one or	more re	alated
(a) Name, address, and EIN of related organization	Z c	Рип	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp. S corp, or trust)		(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	1 1	Section 512(b)(13) controlled entity?
SHEET METAL TRANSPORTATION CORP 1750 NEW YORK AVENUE WASHINGTON, DC 20006	- 52-1685528	TRAVEL AGENCY	ENCY	DC		C CORP		60,862.	26,382	L.	1008	
332162 09-12-13			,	36					Sche	Schedule R (Form 990) 2013	orm 99	0) 2013

Page 3

INTERNATIONAL ASSOCIATION OF SHEET METAL AIR, RAIL AND TRANSPORTATION WORKERS

Schedule R (Form 990) 2013

36.
و ا
Ď,
, 35
34
<u>=</u>
≥
Par
990, Pa
6 F
ğ
5
es.
ion answered
SWE
ans
Ę
ızat
orgar
pe o
₽
ete
E E
ပ္ပိ
tions
nizatıc
Janiz
υ,
Related Or
ate
۵
Ē
≶
ransactions With F
g
Transa
Ë
>
art V
-

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				H	Yes	ş
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ns with one or more r	elated organizations listec	in Parts II·IV?			
				19	×	
b Gift, grant, or capital contribution to related organization(s)				1 P		×
c Gift, grant, or capital contribution from related organization(s)				10		×
d Loans or loan guarantees to or for related organization(s)				₽	×	
 Loans or loan guarantees by related organization(s) 				16	H	×
						:
f Dividends from related organization(s)				÷		×
g Sale of assets to related organization(s)				19		×
h Purchase of assets from related organization(s)				ŧ		×
i Exchange of assets with related organization(s)				÷	F	×
j Lease of facilities, equipment, or other assets to related organization(s)				į	Н	×
k Lease of facilities, equipment, or other assets from related organization(s)				¥		×
l Performance of services or membership or fundraising solicitations for related organization(s)	ianization(s)			╁	╁	
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			<u> </u>	×	İ
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			⊢	×	1
 Sharing of paid employees with related organization(s) 				⊢	×	
					-	
p Reimbursement paid to related organization(s) for expenses				4	×	
q Reimbursement paid by related organization(s) for expenses				10	×	
• Other terranges of each consequent to related assessment						
				<u>-</u>	+	×
J		-		2	\dagger	:
If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete t	is line, including covered	relationships and transaction thresholds.			1
(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved	olved		
(1)				i		
(2)						
(6)						
(4)						
(5)						
(9)						
332163 09-12-13	37	i	Schedule R (Form 990) 2013	(Form 9) (06	13

46-4039786

Page 4

INTERNATIONAL ASSOCIATION OF SHEET METAL AIR, RAIL AND TRANSPORTATION WORKERS Schedule R (Form 990) 2013

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

מות אים זכי כו כמות המינים כו למיני ודיים וביות מינים ביות המינים ביות ביות המינים ביות ביות המינים ביות המינים ביות המינים ביות ביות המינים ביות ביות המינים ביות המינים ביות המינים ביות המינים ביות המינים ביות המינים ביות המינים ביות המינים ביות המינים ביות המינים ביות המינים ביות המינים ביות המינים ביות המינים ביות המינים ביות המינים ביות המינים ביות המינים ביות ביות ביות ביות המינים ביות ביות ביות המינים ביות ביות ביות ביות ביות ביות ביות ביות	nince folial against 19 can in		comment parameters.	-						
(e)	(2)	<u> </u>	(D)	(e)	<u> </u>		Ξ	€	9	3
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	(related, unrelated, 501(c)(3)	partners sec 501(c)(3) ords ?	Share of total	Share of end-of-year	Dispropor- tonate	amount in box 20 managing of Schooling K1 paring? ownership	General o managing partner?	Percentage ownership
		country)	under section 512-514) yes	8	income	assets	Yes No	(Form 1065)	Yes No	
			•							
							_		_	
				_				-		
				_					-	
									\vdash	
						-				
									_	
							$\frac{1}{1}$		+	
							_			
									_	
									_	
							Ŧ		+	
					-					
				_						
									L	
							_			
]		-	

Schedule R (Form 990) 2013

INTERNATIONAL ASSOCIATION OF SHEET METAL AIR, RAIL AND TRANSPORTATION WORKERS 46-4039786 Page 5 Schedule R (Form 990) 2013 Part VII | Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions)

332165 09-12-13

	IL AND TH	<u>RA</u>	ISI	OE	RT?	<u> T/</u>	:01	N WORKERS	46-403	9786
Part VII Section A. Officers, Directors,	Trustees, Key Er	nplo	yee	es, a	nd F	ligh	est	Compensated Employ	ees (continued)	
· (A)	(B)							(D)	(E)	(F)
Name and title	Average			Pos				Reportable	Reportable	Estimated
,	hours	(check all that apply)				app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				оуев		the	organizations	compensation
	(list any	lacto				фшв		organization	(W-2/1099-MISC)	from the
	hours for related	b	8			ated		(W·2/1099-MISC)		organization and related
	organizations	rustee	trust		8	npens				organizations
	below	dualt	tiona	ا	e e	stcon	<u>.</u>			Organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) ANDREW MAUTE	40.00	\vdash		 	H	\vdash				
INTERNATIONAL ORGANIZER		1			x			172,862.	0.	35,319.
(28) COSTANTINO IANNONE	40.00									<u> </u>
DIRECTOR OF RAILROAD AND S		1			X	ł		216,199.	0.	36,224.
(29) KEVIN MULCAHY	40.00			Г						
DIRECTOR OF ORGANIZING		1			Х			215,523.	0.	31,169.
(30) JAMES JACKSON	40.00					\vdash				<u> </u>
DIRECTOR OF CANADIAN AFFAI		1		1	x			226,861.	0.	5,352.
(31) CHARLES HENSON	40.00				Г					
ASSISTANT DIRECTOR OF JURI		1		1	Х			367,537.	0.	41,876
(32) GREGORY HALE	40.00				Π					
FIELD SUPERVISOR - TRANSPO		1				Х		209,041.	0.	40,003.
(33) JAMES A STEM JR	40.00									
NATIONAL LEGISLATIVE DIRECTOR			L			X		188,725.	0.	51,123.
(34) JOHN RISCH III	40.00									
ALTERNATE LEGISLATIVE DIRECTOR		<u> </u>				X		174,164.	0.	33,750.
(35) JAMES WILLIAMS	40.00									
GENERAL CHAIRMAN - TRANSPO		L				X		219,400.	0.	39,492.
(36) TONY MARTELLA	40.00								-	
EXECUTIVE DIRECTOR						X		198,956.	0.	42,458.
(37) KEVIN BRODAR	40.00									
ASSOC GENERAL COUNSEL				L		X		194,081.	0.	<u>42</u> ,273.
(38) VOCTOR BAFFONI	40.00									
INTERNATIONAL STAFF				<u>L</u>		X		174,164.	0.	<u>33,7</u> 50.
(39) DOYLE K TURNER	40.00		ļ	l						
VICE PRESIDENT		L	L	<u> </u>		L	X	91,783.	0.	25,795.
				<u> </u>		L				
		Į	l	ļ	ļ					
		_	<u> </u>	<u> </u>	L	<u> </u>				
			l							
		<u> </u>	_	<u> </u>		<u> </u>				
	ļ	4			ļ					
		<u> </u>	\vdash	₽-	 	 	_			
		1			ſ					
		_	⊢	├-	_	├-	_			
	<u> </u>	ł	ļ							
		\vdash	\vdash		\vdash		_			
	<u> </u>	1			1	[
		<u> </u>	Ц_	<u> </u>	L	<u> </u>		 	· _ ·	
Table Date William Co. 1 A. P. 1								2 640 206		 450 E04
Total to Part VII, Section A, line 1c								2,649,296.	L	458,584

46-4039786

INTERNATIONAL ASSOCIATION OF SHEET METAL AIR, RAIL AND TRANSPORTATION WORKERS

Schedule R (Form 990) AIR, RAIL AND TRANSPORTAT

[Part II] Continuation of Identification of Related Tax-Exempt Organizations

(g) Section 512(b)(13) Yes No organization? × controlled × Direct controlling Public charity status (if section 501(c)(3)) Exempt Code section 501(C)(9) 501(C)(9) Legal domicile (state or foreign country) છ OHIO OHIO SHORT TERM DISABILITY Primary activity SUSPENSION BENEFITS BENEFITS 34-6701463, 24950 COUNTRY CLUB BLVD, NORTH UTU DISCIPLINE INCOME PROTECTION PROGRAM -Name, address, and EIN of related organization UTU GROUP VSTD PLAN - 27-6365479 NORTH OLMSTED, OH 44070 24950 COUNTRY CLUB BLVD OLMSTED, OH 44070