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Return of Organization Exempt From Income Tax

2013

OMB No 1545-0047

Internal Revenue Service

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

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

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

Open to Public Inspection

Ā	For th	e 2015 calend	dar year, or tax year beginning , 2013, and endi	ng		, 20
В	Check	f applicable	٥	Employer identification no		
	Address	change	C Name of organization UNITED ASSOCIATION OF JOURNEYMEN & 295 PPF Doing Business As		_	9-0488966
	Name c	hange	Number and street (or P O box if mail is not delivered to street address)	loom/suite		Telephone number
$\overline{}$	Initial re	=	743 N BEACH STREET			386) 252-7171
=	Termina		City or town, state or province, country, and ZIP or foreign postal code		+	637,733
Ħ.	Amende	ed return	Daytona Beach, FL 32114		٦	Gross receipts \$
二		on pending	F Name and address of pnncipal officer BRETT MIRSKY			Cross receipts \$
_			Same as C above	H(a) Is this a gro	up return	for Yes X No
	Website	ch a list (see instructions)			
		organization	V.UA295.ORG Corporation	H(c) Group exen		····
^	irt I	Summar	· · · · · · · · · · · · · · · · · · ·	.3 M State	or legal oc	omicile FL
تيسنيا	1		TO PROMOTE EMPLOYN The the organization's mission or most significant activities TO PROMOTE EMPLOYN	MENT AND	TOB C	POTENTAL AR
	'		ION MEMBERS	MENI AND C	JOB 5.	ECORITY OF
Activities & Governance		<u> </u>	TON MINUDING			
nar						······································
Ver	2	Check this h	oox ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its	s not assets		
တိ	3			1	3	E
රු	4		oting members of the governing body (Part VI, line 1a) ndependent voting members of the governing body (Part VI, line 1b)			
itie:	5				4	5
ĭį	6			H	5	5
ĕ	72		• • • • • • • • • • • • • • • • • • • •	i i	6	
	1 .		ted business revenue from Part VIII, column (C), line 12	ŀ	7a	0
		Net unrelated	d business taxable income from Form 990-T, line 34		7b	0
		Cambushaas	a and results (Death)(III Leadth)	Prior Year		Current Year
Revenue	8		s and grants (Part VIII, line 1h)	417,	165	493,119
	9		vice revenue (Part VIII, line 2g)			0
ě	10		ncome (Part VIII, column (A), lines 3, 4, and 7d)	· ·	329	4,736
Œ	11		ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	119,		135,882
	12		e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	543,	179	633,737
	13		similar amounts paid (Part IX, column (A), lines 1-3)			0
<u> </u>	14		to or for members (Part IX, column (A), line 4)		325	39,022
Expenses	15		er compensation, employee benefits (Par X Column (A), lines 5-10)	478,	809	430,073
ŽŽ.	16		fundraising fees (Part IX, column (A), line-14e)			0
ă	1	Total fundra	sing expenses (Part IX, column (P) Ine 25)			
	17	Other expens	ses (Part IX, column (A), lines 11 d, 11 24e)	103,	123	109,745
-	18	Total expens	ses Add lines 13-17 (must equal Fart IX, column-(A), line 25/7	616,		578,840
	19	Revenue les	s expenses Subtract line 18 from line 12 GDEN.	(73,	078)	54,897
Net Assets or				inning of Current	Year	End of Year
SS6 Rate	20		(Part X, line 16)	299,	058	323,144
Zet A	21		es (Part X, line 26)	65,	428	34,617
	122		r fund balances Subtract line 21 from line 20	233,	630	288,527
4	rt II		re Block			
unae. true, d	r penaiti correct, a	es of perjury, I deci and complete Deci	lare that I have examined this retum, including accompanying schedules and statements, and to the best of my know laration of preparer (other than officer) is based on all information of which preparer has any knowledge	vledge and belief, it	IS	
		T	18U 1		Τ.	
Sig	-	I	T MIRSKY		/	2-24-14
_		Signatur	re of officer		Date	·
Hei	e		T MIRSKY, BUSINESS MANAGER (
		Type or	print name and title			
		Pnnt/Type pre	eparer's name Preparer's signature?	Check 🗌	ıf PTII	N
Pai			Batten CPA Market L. Latter GH 10-23-2014	self-employe	d	P01208116
	pare		► BMJ CPA PLC Fir	rm's EIN 🕨		
Use	e Onl	y Firm's address	· · · · · · · · · · · · · · · · · · ·	none no		
			Daytona Beach FL 32114	38	<u>6-25</u> 3	-6851
May	the IR	S discuss this	return with the preparer shown above? (see instructions)			🛚 Yes 🗌 No

Form 990 (2013)

Forn	n 990 (2013) UNITED ASSOCIATION OF JOURNEYMEN & 295 PPF	59-0488966	Page 2
Pa	Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>	🗆
1	Briefly describe the organization's mission		
	TO PROMOTE EMPLOYMENT AND JOB SECURITY OF LOCAL UNION MEMBERS		
2	Did the organization undertake any significant program services during the year which were not listed on the	,	_
	prior Form 990 or 990-EZ?	📙 Yes	X No
_	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		_
	services?	∐ Yes	X No
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure	-	
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to of the total expenses, and revenue, if any, for each program service reported	ners,	
	the total expenses, and revenue, if any, for each program service reported		
	(Code) (Expenses \$ 578,840 including grants of \$) (Revenue		
74	DURING THE YEAR LOCAL UNION 295 ASSISTED MEMBERS OBTAIN EMPLOYMENT, COORDINA		· · · ·
	PROGRAMS FOR APPRENTICES AND JOURNEYMEN, SOUGHT NEW MEMBERS TO MAINTAIN VITA		
	UNION, REPRESENTED MEMBERS IN DISPUTES WITH EMPLOYER CONTRACTORS, LIAISED WI		
	PRIVATE CONCERNS TO PROMOTE EMPLOYMENT OPPORTUNITIES AND SECURITY.		
		-	
		-	
4b	(Code) (Expenses \$ including grants of \$) (Revenue	\$)
			
			
			
4c	(Code) (Expenses \$ including grants of \$) (Revenue	\$	
		·	
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$		
40	Total program service expenses ► 578,840		
EEA		Forn	n 990 (2013)

Form 990 (2013) UNITED ASSOCIATION [Part IV] Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			v
_	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		
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		X
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 98-197 If "Yes," complete Schedule C,			
	Part III	5		<u>X</u>
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		X
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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	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,"		İ	
	complete Schedule D, Part VI	11a	Χ	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		_X
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
ь	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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any 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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	_17		_X
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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	·			

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Part IV

Checklist of Required Schedules (continued)

Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 Х 22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States 22 X 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 X 23 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 Х 24a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? b 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? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a with a disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 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 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 Х 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions). X A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Х 28b An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Х X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 X 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. 31 Х 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 X 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, X Х 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a Х controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and X 38

Form 990 (2013) UNITED ASSOCIATION OF JOURNEYMEN & 295 PPF 59-0488966 Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance No Yes o Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and Х reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return Х If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? X If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial Χ **b** If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? Χ C If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the Χ organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or Organizations that may receive deductible contributions under section 170(c). 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 If "Yes," did the organization notify the donor of the value of the goods or services provided? b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f 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 Sponsoring organizations maintaining donor advised funds. ь Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 а Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter b Gross income from other sources (Do not net amounts due or paid to other sources 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Section 501(c)(29) qualified nonprofit health insurance issuers.

Is the organization licensed to issue qualified health plans in more than one state?

Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which

13

Form 990 (2013) UNITED ASSOCIATION OF JOURNEYMEN & 295 PPF 59-0488966 Page 6 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 the Part VI Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year 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. Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint Х one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, Χ stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? X Х **b** Each committee with authority to act on behalf of the governing body? 86 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) 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 Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a 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 Χ 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement Х with a taxable entity during the year? **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

▶BRETT MIRSKY (386)252-7171, 743 N BEACH STREET, Daytona Beach, FL 32114

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Form	aan	(2013)	

UNITED ASSOCIATION OF JOURNEYMEN & 295 PPF

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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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (A) (C) (E) (F) Name and Title Average Position Reportable Reportable Estimated hours per compensation compensation from amount of (do not check more than one veek (list any from related other box, unless person is both an hours for the organizations compensation (W-2/1099-MISC) related organization from the officer and a director/trustee) (W-2/1099-MISC) organizations organization Individual Institutional employee Highest compensated below dotted and related employee organizations (1) JAMES E HILDEBRAND 5.00 X PRESIDENT 0 0 0 (2) LARRY KNAPP 5.00 X VICE PRESIDENT ٥ n 0 (3) BRETT MIRSKY 40.00 BUS MGR FIN SEC TREAS X 0 0 0 (4) DAVID FITZGERALD 40.00 RECORDING SECRETARY X 0 0 0 (5) AUGUSTINE D'ARCO 1.00 INSIDE GUARD X 0 (6) (7) (8) (10) (11)(12) (13) (14)

	411 Jection A. Officers, officers, frustees,	Tay Employ	, 503, 6		91	.331	Joint	,3113	atea Linpioyees (Conditional Condit			
	(A)	(B)			(C				(D)	(E) Reportable		(F)	
	Name and title		Average Position hours per (do not check more than one					Reportable compensation	1	timated rount of			
	•	week (list any	I		-		both an		from	compensation from related	"	other	
	•	hours for				tor/tn	ustee)		the	organizations		pensati	
		related organizations	or di	Insti	Officer	₹ •	emp	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	1	rom the anizatio	
		below dotted	necto	uto	<u> </u>	eg e	loye	ĘĘ	(=,		an	d relate	d
		line)	Individual trustee or director	Institutional trus		Key employee	Highest compensatemployee				orga	anizatioi	ns
			stee	uste		e	ens						
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(24)													
(05)							 	ļ					
(25)													
-45	Sub-total	J	L	L	l	L	<u> </u>	L					
1b	Total from continuation sheets to Part VII, Secti							>					
c d								>	,				0
<u>u</u>	Total (add lines 1b and 1c) Total number of individuals (including but not limited							▶	than \$100,000 of	<u> </u>	J	-	0
2	reportable compensation from the organization	i to triose list	eu abu	ve)	WIIO	rece	eivea n	nore	than \$ 100,000 of	0			
	reportable compensation from the organization	 										Yes	No
3	Did the organization list any former officer, director	or trustee k	ev em	nlov	ee (se bu	aheet	com	nensated			162	140
J	employee on line 1a? If "Yes," complete Schedule						-				3		Х
4	For any individual listed on line 1a, is the sum of rej										-		
•	organization and related organizations greater than												
	ındıvıdual				•						4		Х
5	Did any person listed on line 1a receive or accrue of										<u> </u>		
•	for services rendered to the organization? If "Yes,"	•		-			-				5		Х
Secti	on B. Independent Contractors					- -				<u></u>	1 -		
1	Complete this table for your five highest compensal	ted independe	ent cor	ntrac	tors	that	receiv	/ed i	more than \$100.00	 0 of			
	compensation from the organization. Report compe	-											
	year				•				J				
	(A)			•			•		(B)			(C)	
	Name and business address								Description of			ensatio	ภ
											•		
2	Total number of independent contractors (including	but not limite	d to th	ose	liste	d ab	ove) w	/ho			***********		
	received more than \$100,000 of compensation from			•			,						

Part VIII Statement of Revenue

Total tension Received Rece			Check if Schedule O contains a response or	note to any line in th	4			<u> </u>
1a Federated campaigns 1a Federated campaigns 1b 1a Federated campaigns 1c Federated campai					(A) Total revenue	exempt function	business	excluded from tax under sections
Page Page	s s	1a	Federated campaigns	.		,	· · · · · · · · · · · · · · · · · · ·	7 11 7 1 1 1
Page Page	aut curi	b			1			
Page Page	ည် ဋိ		·	<u> </u>	[]			
Page Page	fts, r A	_			1			
Page Page	흔			-	- 1			
Page Page	Sin			;	-			
Page Page	utio 1er	Т			}			
Page Page	€Ş				1			
Page 200 Page 200	nd n				1			
1	Ç a	n	I otal. Add lines 1a-1f		493,119			
1		_		Business Code	1			
1	en.							ļ
1	Re	b						
1	AIC6	С						
1	ıram Ser	d						
1		_	Secretar Secretaria (Secretaria)					
3 Investment income (including dividends, interest, and other similar amounts)	Prog		. •				······································	
A		g	Total. Add lines 2a-2f					
1		3						
10 10 10 10 10 10 10 10			•		4,736	4,736		
10 10 10 10 10 10 10 10								
Company Comp		5	Royalties	<u> ▶</u>				ļ,
Description Description		_		(II) Personal		ŀ		
C Rental income or (loss)								
Talina Training Coord Retmb Sequence Total Add lines Tot			• • • • • • • • • • • • • • • • • • • •					
Ta Gross amount from sales of assets other than inventory D Less cost or other basis and sales expenses								
Business Code See Part IV, line 19		d	Net rental income or (loss)	<u> ▶</u>			·····	
and sales expenses		7a	eroes amount nom sales or	(II) Other				
C Gain or (loss)		b						
d Net gain or (loss)		С			1			
8a Gross income from fundraising events (not including \$		d	Net gain or (loss)					[
8	e ne						······································	
8	en (_		1			
c Net income or (loss) from fundraising events ▶ 9a Gross income from gaming activities ▶ See Part IV, line 19			of contributions reported on line 1c).					
c Net income or (loss) from fundraising events ▶ 9a Gross income from gaming activities ▶ See Part IV, line 19	Ē		•	,				
c Net income or (loss) from fundraising events ▶ 9a Gross income from gaming activities ▶ See Part IV, line 19	ö	ь			}			
9a Gross income from gaming activities See Part IV, line 19			•	·	1			
See Part IV, line 19								
b Less direct expenses				,	1			
c Net income or (loss) from gaming activities		ь			1			
10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold			•		1			ĺ
b Less cost of goods sold b 3,996 c Net income or (loss) from sales of inventory ▶ 714 714 Miscellaneous Revenue Business Code 11a TRAINING COORD REIMB 541900 77,224 77,224 b ORGANIZER SALARY REIMB 541900 12,199 12,199 c SHARED SERVICES REIMB 541900 42,069 42,069 d All other revenue 900099 3,676 3,676 e Total. Add lines 11a-11d ▶ 135,168			Gross sales of inventory, less					
c Net income or (loss) from sales of inventory Note income or (loss) from sales of inventory 714 714 Miscellaneous Revenue Business Code 77,224 77,224 11a TRAINING COORD REIMB 541900 12,199 12,199 c SHARED SERVICES REIMB 541900 42,069 42,069 d All other revenue 900099 3,676 3,676 e Total. Add lines 11a-11d 135,168 135,168		ь			1 {	[
Miscellaneous Revenue Business Code 11a TRAINING COORD REIMB 541900 77,224 77,224 b ORGANIZER SALARY REIMB 541900 12,199 12,199 c SHARED SERVICES REIMB 541900 42,069 42,069 d All other revenue 900099 3,676 3,676 e Total. Add lines 11a-11d 135,168 135,168			•		1 1	714		
11a TRAINING COORD REIMB 541900 77,224 77,224 b ORGANIZER SALARY REIMB 541900 12,199 12,199 c SHARED SERVICES REIMB 541900 42,069 42,069 d All other revenue 900099 3,676 3,676 e Total. Add lines 11a-11d 135,168 135,168	Ì				1	, , , ,		
b ORGANIZER SALARY REIMB 541900 12,199 12,199 c SHARED SERVICES REIMB 541900 42,069 d All other revenue		11a			77,224	77,224]
c SHARED SERVICES REIMB 541900 42,069 42,069 d All other revenue 900099 3,676 3,676 e Total. Add lines 11a-11d 135,168 135,168								
d All other revenue		С	SHARED SERVICES REIMB					
		d	All other revenue	900099		<u> </u>		
12 Total revenue. See instructions					135,168			
		12	Total revenue. See instructions		633,737	140,618	0	0

Form 990 (2013) UNITED ASSOCIATION OF JOURNEYMEN & 295 PPF Part IX Statement of Functional Expenses

	Check if Schedule O contains a response or note to ar	-		 	
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		,	g	
•	organizations in the United States. See Part IV, line 21.				
2	Grants and other assistance to individuals in				:
_	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
-	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members	39,022	39,022		
5	Compensation of current officers, directors,				
	trustees, and key employees	80,659	80,659		
6	Compensation not included above, to disqualified				· · · · · · · · · · · · · · · · · · ·
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	143,281	143,281		
8	Pension plan accruals and contributions (include	· · · · · · · · · · · · · · · · · · ·			
	section 401(k) and 403(b) employer contributions)	120,532	120,532		
9	Other employee benefits	66,731	66,731		······································
10	Payroll taxes	18,870	18,870		•
11	Fees for services (non-employees)				
а	Management				
b	Legal	1,372	1,372		
С	Accounting	4,078	4,078		
d	Lobbying				
е	Professional fundraising services See Part IV, line 17 .		. "		·
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	8,057	8,057		
12	Advertising and promotion				
13	Office expenses	16,666	16,666		
14	Information technology				
15	Royalties				
16	Occupancy	12,260	12,260		
17	Travel	28,218	28,218		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,037	2,037		
20	Interest	33	33		
21	Payments to affiliates	. "			
22	Depreciation, depletion, and amortization	949	949		
23	Insurance	16,255	16,255		***************************************
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	RECOGNITION AWARDS	1,514	1,514		
þ	PER CAPITA DUES	1,837	1,837		·
C	FLORIDA PIPETRADES	16,468	16,468		
d	rounding	1	1		· · · · · · · · · · · · · · · · · · ·
8	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	578,840	578,840	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation Check here III				
	following SOP 98-2 (ASC 958-720)				

Form 990 (2013)

Balance Sheet

Part X

Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 108,407 1 51,637 1 10,824 2 10,824 2 3 3 4 4 65,349 50,743 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 7 7 8 837 9 972 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 149,645 Less accumulated depreciation 10b 2,819 10c 1,870 b 147,775 11 11 167,490 12 150,226 12 13 13 14 14 15 102 15 102 16 Total assets. Add lines 1 through 15 (must equal line 34) 299,058 16 323,144 64,781 17 34,617 17 18 18 19 19 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and 22 647 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 26 26 65,428 34,617 Organizations that follow SFAS 117 (ASC 958), check here > X and complete lines 27 through 29, and lines 33 and 34. Net Assets of Fund Balances 27 233,630 288,527 27 28 28 29 Organizations that do not follow SFAS 117 (ASC 958), check here

I and complete lines 30 through 34. 30 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 33 288,527 233,630 33 299,058 34 323,144

Form	990 (2013) UNITED ASSOCIATION OF JOURNEYMEN & 295 PPF	9-0488	966	Р	age 12
Pa	rt XI Reconciliation of Net Assets		•		
	Check if Schedule O contains a response or note to any line in this Part XI	<u>.</u>			. 🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1	(533,	737
2	Total expenses (must equal Part IX, column (A), line 25)	2		578,	840
3	Revenue less expenses Subtract line 2 from line 1	3		54,	897
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		233,	630
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		288,	527
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 🗆
				Yes	No
1	Accounting method used to prepare the Form 990. Cash Cash Other MODIFIED CASH				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b	X	<u>L</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		. 3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		. 3b		
EEA			Form	990 (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.

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

2013

Open to Public Inspection

Name	of the organization	Employer identification number
UNI	TTED ASSOCIATION OF JOURNEYMEN & 295 PPF	59-0488966
Pai	Organizations Maintaining Donor Advised Funds or Other Similar Funds or Account	nts.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised	
	funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose	
	conferring impermissible private benefit?	
Pai	t II Conservation Easements	
ننتستنا	Complete if the organization answered "Yes" to Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
-	Preservation of land for public use (e.g., recreation or education) Preservation of an historically	important land area
	Protection of natural habitat Preservation of a certified history	
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation	ervation
_	easement on the last day of the tax year	Held at the End of the Tax Year
а	Total number of conservation easements	2a
ь	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	
-	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organiza	· · · ·
•	tax year >	ation during the
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the y	
•	b	, 50.1
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	
•	► \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)	
•	(i) and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense stateme	
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that d	
	organization's accounting for conservation easements	
Pai	Organizations Maintaining Collections of Art, Historical Treasures, or Oth	er 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 (ASC 958), not to report in its revenue statement and	balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furth	
	public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and bala	
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furth	
	public 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 treasures, or other similar assets for financial gain, pro-	
_	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
а	Revenues included in Form 990, Part VIII, line 1	▶ \$
b	Assets included in Form 990, Part X	
		· · · · · · · · · · · · · · · · · · ·

Sched	ule D (Form 990) 2013 UNITED ASSOCIAT						59-048			Page 2
Pa	rt III Organizations Maintaining C	ollections of A	rt, Hist	orical Ti	reasures,	or Otl	ner Similar A	ssets (contir	nued)
3	Using the organization's acquisition, accession, a	and other records, c	heck any o	of the follow	ving that are a	a signific	ant use of its			
	collection items (check all that apply)									
а	Public exhibition	d 🗌 Loa	n or excha	nge progra	ıms					
b	Scholarly research	e 🗌 Oth	er							
C	Preservation for future generations									
4	Provide a description of the organization's collect	tions and explain ho	w they furt	her the org	janization's e	xempt p	urpose in Part			
	XIII									
5	During the year, did the organization solicit or rec	eive donations of a	rt, historica	l treasures	, or other sim	nılar				
	assets to be sold to raise funds rather than to be		of the orga	nızatıon's (collection?		<u> </u>	<u>[</u>	Yes	No
Pa	t IV Escrow and Custodial Arrang									
	Complete if the organization ans	swered "Yes" to	Form 9	90, Part	IV, line 9,	or rep	orted an amo	unt on	Form	
	990, Part X, line 21.									-
1a	Is the organization an agent, trustee, custodian o	•								
	ıncluded on Form 990, Part X?							[Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII and	complete the follow	ıng table							
							Α	mount		
С	Beginning balance						:			
d	Additions during the year					10	·			
е	Distributions during the year					-	·			
f	Ending balance									
2a	Did the organization include an amount on Form									
	If "Yes," explain the arrangement in Part XIII Che	eck here if the expla	nation has	been prov	ided in Part >	KIII				<u>. 🛛</u>
Pa	Endowment Funds.									
	Complete if the organization ans	swered "Yes" to	Form 9	<u>90, Part</u>	IV, line 10	<u>).</u>				
	`	(a) Current year	(b) Pn	or year	(c) Two years	back	(d) Three years bac	k (e) i	Four year	s back
1a	Beginning of year balance	· - ·								
b	Contributions									
С	Net investment earnings, gains, and									
	losses									
d	Grants or scholarships									
е	Other expenditures for facilities and									
	programs									
f	Administrative expenses									
9	End of year balance	 -								
2	Provide the estimated percentage of the current y		ne 1g, colu	mn (a)) he	ld as					
a	Board designated or quasi-endowment	%								
b	Permanent endowment > %	•								
С	Temporarily restricted endowment	%								
•	The percentages in lines 2a, 2b, and 2c should e									
3a	Are there endowment funds not in the possession	n of the organization	that are h	eld and ad	ministered for	r the				
	organization by							_	Yes	s No
	``							3a		
	(.,,							<u> 3a</u>	-	-
ь	If "Yes" to 3a(ii), are the related organizations list	•		?				<u>[_3</u>	b	
4	Describe in Part XIII the intended uses of the org		ent funds							
Pa	t VI Land, Buildings, and Equipm			00 D-4	15.7 June 4.4	- 0-	. F		4.0	
	Complete if the organization ans						7			
	Description of property	(a) Cost or oth			r other basis		Accumulated	(d)	Book valu	ie
	Lond	(mvestme		(0	other)	a	epreciation			
1a	Land	• •			-					
b	Buildings	• •			56 700					-
C	Leasehold improvements	• •		-	56,329		56,329			
d	Equipment	• •			93,316		91,446		1	,870
Total	Other		l /=	\ lm = 601						
ı otal	. Add lines 1a through 1e (Column (d) must equa	ıı Form 990, Part X,	column (B), iine 10(c))		<i>.</i> >		1	,870

Page 2

Part VII	Investments - Other Securities Complete if the organization answer	ered "Yes" to Form 990, Part	: IV, line 11b. See Form 990, Pa	ert X, line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1) Financial d	envatives			
(2) Closely-he	ld equity interests			
(3) Other				
(A) ANNUI	TIES	150,226	Cost	
(B)				
(C)				_
(D)				
(E)				
(F)				
(G)				
(H)				
Total (Column (b)	must equal Form 990, Part X, col (B) line 12)	▶ 150,226		
Part VIII	Investments - Program Related.			
	Complete if the organization answ	ered "Yes" to Form 990, Part	IV, line 11c. See Form 990, Pa	rt X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value	,
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total (Column (b)	must equal Form 990, Part X, col (B) line 13) Other Assets.	>		
التستنششا	Complete if the organization answ	ered "Yes" to Form 990, Part	t IV, line 11d See Form 990, Pa	art X, line 15.
- ,		(a) Description		(b) Book value
(1) UTILI	TY DEPOSITS			10:
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				· ·
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line	:15)		10
Part X	Other Liabilities.			
	Complete if the organization answ line 25.	ered "Yes" to Form 990, Part	t IV, line 11e or 11f. See Form 9	990, Part X,
1.	(a) Description of liability	(b) Book value		· · · · · · · · · · · · · · · · · · ·
(1) Federal	income taxes			
(2)				
(3)			1	
(4)			1	
(5)			1	
(6)			1	
(7)			1	
(8)	-		1	
(9)			7	
) must equal Form 990, Part X, col. (B) line 25.)	>]	
	uncertain tax positions. In Part XIII, provide th	e text of the footnote to the organizati	ion's financial statements that reports the)

Sched	ulle D (Form 990) 2013 UNITED ASSOCIATION OF JOURNEYMEN & 295 PPF	59-0488966	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue	per Return.	
	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	637,733
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII)	96	
е	Add lines 2a through 2d	. 2е	3,996
3	Subtract line 2e from line 1	. 3	633,737
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
C	Add lines 4a and 4b	. 4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	. 5	633,737
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expens		
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	•	
1	Total expenses and losses per audited financial statements	. 1	582,836
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII)	96	
e	Add lines 2a through 2d		3,996
3	Subtract line 2e from line 1		578,840
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 4a		
b	Other (Describe in Part XIII)	-	
С	Add lines 4a and 4b	. 4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		578,840
Pa	rt XIII Supplemental Information		
Prov	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	Part X. line	
2, Pa	art XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information		
01	Other revenues not included on Form 990 (Part XI, line	2d)	
cos	T OF SALES DEDUCTED FROM TOTAL REVENUE ON 990 NOT ON FINANCIAL STATEMENTS	\$2,649	
-			
		<u></u> -	
EEA		Schedule (D (Form 990) 2013

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 UNITED ASSOCIATION OF JOURNEYMEN & 295 PPF	59-0488966	Page 5
Part XIII Supplemental Information (continued)		
•		
02. Other expenses not included on Form 990 (Part XII, line	2d)	
COST OF SALES DEDUCTED IN FINANCIAL STATEMENT EXPENSES, NOT ON 990 \$2,649		
ROUNDING \$1		
		
		
	· · · · · · · · · · · · · · · · · · ·	
		
	-	

Schedule D (Form 990) 2013

EEA

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, of Form 990-EZ, Part V, line 38a or 40b.

2013

OMB No 1545-0047

Open to Public

Department of the Treasury Internat Revenue Service Name of the organization

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions. ▶ Information about Schedule L (Form 990 or 990EZ) and its instructions is at www.irs.gov/form990.

Inspection Employer identification number

JNITED _	ASSOCIATION O	F JOURNEYME	N & 295 PPI	F				59-0	14889	66				
Part I		it Transactions												
	Complete if the	organization a	nswered "Yes	on Fo	rm 990,	Part IV, I	line 25a	or 25b, or For	m 990	-EZ, I	Part V	/, line	40b.	
1 (a) Name of disqualified per	rson.	(b) Relationship bet			on and	(c) Description of transaction			ction			(d) Corr	ected?
		-	o	rganization	<u> </u>		(c) Description of trans						Yes	No
			-											
(1)														
(0)														
(2)		- 												
(3)														
	r the amount of tax in	curred by the orga	anization manag	ers or di	squalified	persons d	luring the	e year						
	er section 4958									▶ \$;			
3 Ente	r the amount of tax, if	f any, on line 2, ab	ove, reimbursed	by the	organizatı	on				▶ \$				
Part II		or From Intere			·	•								
		organization a						38a or Form 99	0, Par	t IV, I	ine 26	3, or i	f the	
	organization re	ported an amo	unt on Form 9	90, Par	τ X, line	5, 6, or 2	<u></u>		1				1	
(a) Nam	e of interested person	(b) Relationship	(c) Purpose of		an to or	(e) Ong	- 1		1.7.			1		
		with organization	h organization loan from the principal amou organization?		amount	ount		by board o						
				То	From				Yes	No	Yes	No	Yes	No
				10	FIOIII				163	110	165	140	163	110
(1)									Ì					
-7.7		 							1					
(2)														
(3)				<u> </u>					ļ					
(4)			ļ	ļ					<u> </u>					
·] 					 			
(5)					<u> </u>	<u> </u>				L		L		
Part III		sistance Bene				· · · · · ·	. ▶ \$	•	<u> </u>		<u> </u>		L	
Fattilli	<u></u>	e organization	_			Part IV	line 27	,						
							I				\ D			
		`'	itionship between interested (c) Amount of assistance son and the organization		assistance	(d) Type of assistance			(e) Purpose of assistance					
		·	<u> </u>									•		
(1)														
(2)						_								
(3)														
		1												
(4)							ĺ		1					

Schedule L (Form 990 or 990-EZ) 2013

Schedule L (Form 990 or 990-EZ) 2013 UNITED ASSOCI	ving Interested Persons	S.	59-048896	6	Page 2
Complete if the organization ar	nswered "Yes" on Form 9	90, Part IV, line 28a	a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between	(c) Amount of	(d) Description of transaction		anng of
•	interested person and the	transaction			zation's
	organization			-	nues?
PENSION AND HEALTH & WELFARE	DEGENERA			Yes	No
(1) FUND		40.070	SHARED SERVICES		\ _V
(I) FUND	MANAGER/TRUSTEE	42,070	AGREEMENT		X
(2)					
(0)					
		<u> </u>			
(4)					
(5)					
(5) Part V Supplemental Information					1
Provide additional information for	or responses to questions	s on Schedule L (se	e instructions).		
717					
T-007					
	•				
					
	,				
EEA	· · · · · · · · · · · · · · · · · · ·		Schedule L (Form	990 or 990-E	Z) 2013

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

90-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

2013

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection
Employer identification number

UNITED ASSOCIATION OF JOURNEYMEN & 295 PPF	59-0488966
01. Members or stockholder classes and rights (Part VI,	line 6)
THIS IS A LOCAL LABOR UNION.	
LOCAL LABOR UNIONS ARE COMPOSED OF UNION MEMBERS.	
THIS LOCAL LABOR UNION HAS UNION MEMBERS THAT MAKE UP THE MEMBERSHIP OF T	HIS LOCAL LABOR
UNION.	
02. Member election for additional members (Part VI, lin	e 7a)
MEMBERS ELECT OFFICERS	
03. Form 990 governing body review (Part VI, line 11)	
THE CPA PREPARES IT, THE BOARD LOOKS AT IT, THE BUSINESS MANAGER SIGNS IT	, THE CPA FILES
IT	
04. Governing documents, etc, available to public (Part	VI, line 19)
THE ORGANIZATION WAS CREATED IN 1913 AND BECAME TAX EXEMPT IN 1941 AS A S	UBORDINATE LOCAL
LABOR UNION OF THE INTERNATIONAL ASSOCIATION OF JOURNEYMEN AND APPRENTICE	S OF THE PLUMBING
AND PIPEFITTING INDUSTRY OF THE UNITED STATES AND CANADA. AS DISCLOSED EL	SEWHERE IN THIS
RETURN THIS LOCAL LABOR UNION IS EXEMPT PURSUANT TO A GROUP EXEMPTION NUM	BER. SINCE THIS
ORGANIZATION HAS NOT FILED FOR INDEPENDENT RECOGNITION OF EXEMPTION FROM	INCOME TAXES IT
DOES NOT HAVE THE ORIGINAL APPLICATION FOR RECOGNITION OF TAX EXEMPTION.	
THE ORGANIZATIONS POLICY IS TO PROVIDE A COPY OF THE GROUP EXEMPTION LETT	ER TO THOSE
INQUIRING ABOUT THE ORGANIZATIONS TAX EXEMPT STATUS SINCE IT BECAME EXEMP	T PRIOR TO
ENACTMENT OF THE DISCLOSURE LAW REQUIRING DISCLOSURE.	