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# Short Form Return of Organization Exempt From Income Tax

# 2013

**Open to Public Inspection**

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-EZ and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

Department of the Treasury  
Internal Revenue Service

<b>A</b> For the 2013 calendar year, or tax year beginning _____, and ending _____	
<b>B</b> Check if applicable	<b>C</b> Name of organization
<input type="checkbox"/> Address change	UNITED STEELWORKERS LOCAL 13-970L
<input type="checkbox"/> Name change	Number and street (or P O box, if mail is not delivered to street address) Room/suite
<input type="checkbox"/> Initial return	110 LITTLE RIVER 248
<input type="checkbox"/> Terminated	City or town State ZIP code
<input type="checkbox"/> Amended return	OGDEN AR 71853
<input type="checkbox"/> Application pending	Foreign country name Foreign province/state/county Foreign postal code
	<b>D</b> Employer identification number
	71-0450027
	<b>E</b> Telephone number
	870-648-9285
	<b>F</b> Group Exemption Number ▶ 0260
<b>G</b> Accounting Method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ▶ _____	<b>H</b> Check <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).
<b>I</b> Website: ▶ N/A	
<b>J</b> Tax-exempt status (check only one) — <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) ( 5 ) ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
<b>K</b> Form of organization <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input checked="" type="checkbox"/> Other LOCAL UNION	
<b>L</b> Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 58,309	

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)  
Check if the organization used Schedule O to respond to any question in this Part I

	Description		Amount
<b>Revenue</b>	1 Contributions, gifts, grants, and similar amounts received	1	
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	58,254
	4 Investment income	4	
	5a Gross amount from sale of assets other than inventory	5a	
	b Less cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
c Less: direct expenses from gaming and fundraising events	6c		
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	0	
7a Gross sales of inventory, less returns and allowances	7a		
b Less cost of goods sold	7b		
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0	
8 Other revenue (describe in Schedule O)	8	55	
9 <b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	58,309	
<b>Expenses</b>	10 Grants and similar amounts paid (list in Schedule O)	10	1,463
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	9,350
	13 Professional fees and other payments to independent contractors	13	210
	14 Occupancy, rent, utilities, and maintenance	14	700
	15 Printing, publications, postage, and shipping	15	59
	16 Other expenses (describe in Schedule O)	16	14,162
	17 <b>Total expenses.</b> Add lines 10 through 16	17	25,944
<b>Net Assets</b>	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	32,365
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	163,726
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	1,113
	21 <b>Net assets or fund balances at end of year.</b> Combine lines 18 through 20	21	197,204

For Paperwork Reduction Act Notice, see the separate instructions.

SCANNED MAY 13 2014

RECEIVED  
MAY 17 2014

21

**Part II Balance Sheets.** (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	163,726	22 196,091
23 Land and buildings		23
24 Other assets (describe in Schedule O)		24 1,113
25 Total assets	163,726	25 197,204
26 Total liabilities (describe in Schedule O)		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	163,726	27 197,204

**Part III Statement of Program Service Accomplishments** (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

**Expenses**

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

What is the organization's primary exempt purpose? COLLECTIVE BARGAINING

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28 LOCAL UNION ENFORCED COLLECTIVE BARGAINING AGREEMENT TO BETTER THE WORKING CONDITIONS OF THE LOCAL UNION AND PROVIDE REPRESENTATION TO ITS MEMBERS		
(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	
29		
(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30		
(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31 Other program services (describe in Schedule O)		
(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses. (add lines 28a through 31a)	32	0

**Part IV List of Officers, Directors, Trustees, and Key Employees** (list each one even if not compensated - see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
JAMES BLAKE PRESIDENT	Hr/WK 5.00	2,388		
RICKY MATTISON VICE PRSIDENT	Hr/WK 1 00	76		
DEBRA GEORGE RECORDING SECY	Hr/WK 1 00	579		
KATHY HILL TREASURER	Hr/WK 2.00	2,803		
GLORIA WESTON FINANCIAL SECY	Hr/WK 2.00	2,979		
FREDERICK MULDEW TRUSTEE	Hr/WK 1 00	133		
MARY MATTHEWS TRUSTEE	Hr/WK 1.00	130		
BOBBY GENTRY STEWARD	Hr/WK 1 00	131		
FREDERICK SMITH STEWARD	Hr/WK 1 00	133		
	Hr/WK			
	Hr/WK			
	Hr/WK			

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V.

- 33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O
- 34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions).
- 35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?
  - b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O.
  - c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III
- 36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N.
- 37 a Enter amount of political expenditures, direct or indirect, as described in the instructions  37a
  - b Did the organization file Form 1120-POL for this year?
- 38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
  - b If "Yes," complete Schedule L, Part II and enter the total amount involved  38b
- 39 Section 501(c)(7) organizations. Enter
  - a Initiation fees and capital contributions included on line 9  39a
  - b Gross receipts, included on line 9, for public use of club facilities  39b
- 40 a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 , section 4912 , section 4955 
  - b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I
  - c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
  - d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization
  - e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T

	Yes	No
33		X
34		X
35a		X
35b		
35c		X
36		X
37b		X
38a		X
38b		
39a		
39b		
40b		
40c		
40d		
40e		X

41 List the states with which a copy of this return is filed

42 a The organization's books are in care of  GLORIA WESTON Telephone no  870-648-9285  
 Located at  110 LITTLE RIVER 3248 City  OGDEN ST  AR ZIP + 4  71853

- b 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)? If "Yes," enter the name of the foreign country:   
 See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.
- c At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country:

	Yes	No
42b		X
42c		X

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here  and enter the amount of tax-exempt interest received or accrued during the tax year  43

- 44 a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
- b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
- c Did the organization receive any payments for indoor tanning services during the year?
- d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O
- 45 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
- 45 b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)

	Yes	No
44a		X
44b		X
44c		X
44d		
45a		X
45b		X

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I. Yes No 46 X

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 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. Yes No 47

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. Yes No 48

49 a Did the organization make any transfers to an exempt non-charitable related organization? Yes No 49a

b If "Yes," was the related organization a section 527 organization? Yes No 49b

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 5 columns: (a) Name and title of each employee, (b) Average hours per week devoted to position, (c) Reportable compensation (Forms W-2/1099-MISC), (d) Health benefits, contributions to employee benefit plans, and deferred compensation, (e) Estimated amount of other compensation. All entries are 'None'.

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

Table with 3 columns: (a) Name and business address of each independent contractor, (b) Type of service, (c) Compensation. All entries are 'None'.

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? Note. All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A. Yes No X

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here Signature of officer: James Blake, JAMES BLAKE, PRESIDENT, Date: APRIL 9, 2014

Paid Preparer Use Only Pnnt/Type preparer's name, Preparer's signature, Date, Check self-employed, PTIN, Firm's name, Firm's address, Firm's EIN, Phone no.

May the IRS discuss this return with the preparer shown above? See instructions Yes No X

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

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

**2013**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization

UNITED STEELWORKERS LOCAL 13-970L

Employer identification number

71-0450027

Form 990-EZ, Part I, Line 8, Other Revenue Re-Entered Voided Check: 55

Form 990-EZ, Part I, Line 16, Other Expenses: Conferences, conventions, and meetings: 9,449

Form 990-EZ, Part I, Line 16, Other Expenses: Equipment rental and maintenance: 1,113

Form 990-EZ, Part I, Line 16, Other Expenses: Reimbursed Expenses: 898

Form 990-EZ, Part I, Line 16, Other Expenses: Fees and Dues Remitted to International: 24

Form 990-EZ, Part I, Line 16, Other Expenses: Direct Taxes: 2,678

Form 990-EZ, Part I, Line 20, Net Assets: PURCHASED COMPUTER: 1,113

Form 990-EZ, Part II, Line 24, Other Assets: Purchased Computer: Beginning of year: 0, End of

year: 1,113