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DLN: 93493149003395

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public

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

OMB No 1545-0047

Open to Public Inspection

A Fo	r the 2014 ca	lendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014	4			
B Che	eck if applicable	C Name of organization INTERNATIONAL UNION OF PAINTERS AND		D Emplo	yer iden	tification number
☐ Add	Iress change	ALLIED TRADES DISTRICT COUNCIL 53		02-05	33725	;
	me change	Doing business as				
•	ıal return	Number and street (or P O box if mail is not delivered to street address) Room/su	ıte	E Telepho	one numb	per
reti	al urn/terminated	1010 LEWIS STREET	ite	(304)	343-8	250
	ended return olication pending	City or town, state or province, country, and ZIP or foreign postal code CHARLESTON, WV 25301		G Gross r	eceıpts \$	2,783,881
		F Name and address of principal officer	H(a) I	s this a group	return	for
		DANIEL POLING 1010 LEWIS STREET		ubordinates?		ΓYes Γ No
		CHARLESTON, WV 25301		re all subordi ncluded?	nates	Γ Y es Γ N o
I Ta	x-exempt status	5	It	f "No," attach	a list ((see instructions)
j W	ebsite: 🕨 W	WW PAINTERSUNIONDISTRICT53 ORG	H(c) (Group exempt	ion num	nber ►
K Forr	n of organizatio	n Corporation Trust 🗸 Association Other 🕨	L Year	of formation 20		State of legal domicile
Pa	rt I Sun	nmary			WV	
Activities & Governance	MAINT ORGAN	describe the organization's mission or most significant activities AIN AND IMPROVE THE WORKING AND LIVING STANDARDS OF IT IIZATIONS, SECURE FAVORABLE LEGISLATION, ADVANCE AND M RS AND THEIR EMPLOYERS, AND RELATED				
ģ	2 Check t	this box 🔭 if the organization discontinued its operations or disposed o	of more th	an 25% of its	net as	sets
නර රෝ	3 Number	of voting members of the governing body (Part VI, line 1a)			з	29
Ħ H		of independent voting members of the governing body (Part VI, line 1b)			4	18
Ę	5 Total nu	umber of individuals employed in calendar year 2014 (Part V, line 2a)			5	22
đ.	6 Total nu	umber of volunteers (estimate if necessary)			6	_
		nrelated business revenue from Part VIII, column (C), line 12			7a	0
	b Net unr	elated business taxable income from Form 990-T, line 34		· · ·	7b	
	8 Conti	ributions and grants (Part VIII, line 1h)		Prior Year 92,	715	Current Year 43,836
흨		Tam service revenue (Part VIII, line 2g)		2,486,		2,736,210
Revenue	_	stment income (Part VIII, column (A), lines 3, 4, and 7d)			210	-5
æ		r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			146	3,840
		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	9	2,579,	119	2,783,881
		s and similar amounts paid (Part IX, column (A), lines 1–3)		13,		10,713
		fits paid to or for members (Part IX, column (A), line 4)		<u> </u>		0
so.	15 Salar 5–10	ries, other compensation, employee benefits (Part IX, column (A), lines		1,499,	519	1,547,150
Expenses		ssional fundraising fees (Part IX, column (A), line 11e)				0
<u>\$</u>	b Total f	undraising expenses (Part IX, column (D), line 25) \blacktriangleright				
ш	17 Othe	r expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,138,	042	1,139,797
		expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		2,651,		2,697,660
	19 Reve	nue less expenses Subtract line 18 from line 12		-72,	418	86,221
Not Assets or Fund Bafances			Begin	nning of Curre Year	nt	End of Year
55.01 8.88	20 Total	assets (Part X, line 16)		3,030,	191	3,117,712
정말	21 Total	liabilities (Part X, line 26)		;	110	1,410
		ssets or fund balances Subtract line 21 from line 20		3,030,	081	3,116,302
Unde my ki	r penalties of	nature Block perjury, I declare that I have examined this return, including accompan belief, it is true, correct, and complete Declaration of preparer (other the knowledge				
	***			2015-05-28		
Sign	ı ' '	nature of officer		Date		
Here	DAI.	HEL POLING BUSINES MGR - SECRETARY TREAS e or print name and title				
			ate	Check If	PTIN	
Paid	,	JOHN D BLAIR JR JOHN D BLAIR JR 2	015-05-29	self-employed	P00429	
	parer	Firm's name BLAIR & COMPANY AC		Firm's EIN 🕨 5	5-072004	19
	Only	Fırm's address ► PO BOX 1991		Phone no (304) 343-46	03
	,	CHARLESTON, WV 25327				

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," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
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		No
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? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule C, Part III</i>	5	Yes	
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^{\bullet}	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
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		No
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		No
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, Part VI	11a	Yes	
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		No
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		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
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		No
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		No
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		No
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		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νo
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? <i>If "Yes," complete Schedule J.</i>	23		No
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		No
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), 501(c)(4), and 501(c)(29) 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 prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Νo
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note, All Form 990 filers are required to complete Schedule O	38	Yes	

Enter the number reported in Box 3 of Form 1996 Enter-0 - find applicable 1a 2 2 2 2 5 1b 1c 2 5 5 5 5 5 5 5 5 5	Pal				_
16		Check if Schedule O contains a response or note to any line in this Part V	<u> </u>		. No
Be Enter the name of Form W-26 included in line 1a Enter-0-1 float applicable 1	1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 2		162	140
the company to the craps author commity with backing well-handing rules for reportable payments to versions and reportable gamma (gammang) amongs to make without an expense of the property o					
gammay (gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Stetements, field for the calendar year ending with or within the year covered by this return. If I seed the seed on a serie proted on Ine 2.a, did the organization nils all required federal employment lax returns? Note: If the sum of lines is and 2.5 is greater than 250, you may be required to e-file (see instruction). B if I seed on a received and a serie with the 2.5 is greater than 2.5 is greater than 2.5 in your and when the seed of the calendar year, did the organization have an interest in, or a significant on schedule 0. At any time during the calendar year, did the organization have an interest in, or a significant or other authority over, a handle account in a freeign country (such as a bank account, securities account, or other financial accounts of the fine form of the fine group country (such as a bank account, securities account, or other financial accounts (FBAR) If "Yes," either the name of this fireign country is the series of the fine fine fine group country is the series of the fine fine fine group country is the series of the fine fine fine group country is the series of the fine fine group country is the group country is the fine group country is the group country is the group country is the group country is the group country in the group country is group country in the group country in the group country is group country in the group country in the group country is group country in the group country in the group country in the group country in the			1		
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b If "Yes," that it field a Farm 900-T for this year? If "Not to fine 3b, provide an explanation in Schedule 0 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority account?) 4b If "Yes," enter the name of the foreign country. ▶ 5c instructions for filling requirements for FinicEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 6b Did any texable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6c Did she 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 chantable contributions or girts were not tax deductible as chantable contributions or girts were not tax deductible as chantable contributions or girts were not tax deductible as chantable contributions or girts were not tax deductible as chantable contributions or girts were not tax deductible as chantable contributions or girts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization include with every solicitation an express statement that such contributions or girts were not tax deductible? 9 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7 Organizations that may receive deductible contributions under section 170(c). 9 If the organization include with every of the value of the goods or services provided? 7 Organization receive a primate dispose of tangible personal property for which it was required to the payor? 9 If the organization include the number of forms 828.2 filed during the year. 9 If the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 9 If the organization include of the properties of the properties of the		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	_ ZD	res	
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over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts of the foreign country. If 'Yes', enter the name of the foreign country. See instructions for filing requirements for Finc Bill Form 114, Report of Foreign Bank and Financial Accounts (FBAR) By the organization a party to a prohibited tax shelter transaction at any time during the tax year? Solid any taxable party notify the organization file form 8886-T? By Us the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any continuous gross receipts that are normally greater than \$100,000, and did the organization solicit any continuous gross receipts that are normally greater than \$100,000, and did the organization solicit any continuous gross receipts that are normally greater than \$100,000, and did the organization solicit any continuous gross receipts that are normally greater than \$100,000, and did the organization solicit any continuous gross receipts that are normally greater than \$100,000, and did the organization solicit any continuous gross are served to the payor? If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). If 'Yes,' did the organization notify the donor of the value of the goods or services provided to the payor? If 'Yes,' indicate the number of forms 8282 filed during the year. Journal of the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 9282; which the organization received a contribution of qualified intellectual property, did the organization file a form 1925 or the organization file organization file and the organization make any taxable distribution under section 4966? Did the organizations maintaining donor advised funds. Did done organizations from maintaining	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		
secount)? 5 If "Yes," enter the name of the foreign country. 5 Se instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 No Was the organization a party to a prohibited tax shelter transaction? 5 If "Yes," to line 5 a or 5b, did the organization file Form 8886-T7 5 Companization solicit any contributions that were not tax deductible as charitable contributions? 5 If "Yes," to line 5 a or 5b, did the organization in Form 8886-T7 6 Does the organization solicit any contributions that were not tax deductible as charitable contributions? 5 If "Yes," to line 5 a or 5b, did the organization include with every solicitation an express statement that such contributions or gifted where not tax deductible? 6 Did the organization stat may receive deductible contributions under section 170(c). a Did the organization that may receive deductible contributions under section 170(c). b If "Yes," indicate the payor? b If "Yes," indicate the number of Forms 8282 filed during the year. c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year. 7 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization received a contribution of cars, boats, airplanes, or other whickes, did the organization file a Form 1998-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Did the sponsoring organizations Enter in Intuition fees and capital contributions included on Part VIII, line 12 b Gross recent from members or shareholders in the form 1904(C) (2) organizations. Enter if Gross income from memb	4a				
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b If "Yes" has it filed a Form 720 to report these payments? <i>If "No" provide an explanation in Schedule O</i> 14b			-		Νo

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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														<u>.</u> [~
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Se	ection 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			
	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			
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		No
3		3		Νo
4		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	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	9		No
	organization's maining address? If Tes, provide the names and addresses in Schedule O			140
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	_	ıe Cod	
Se		_	ue Cod Yes	
		_		e.)
10a	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	Yes	e.)
10a b	Did the organization have local chapters, branches, or affiliates?	evenu 10a	Yes Yes	e.)
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a	Yes Yes	e.) No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a	Yes Yes	e.) No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes	e.) No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes	e.) No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a	Yes Yes	e.) No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c	Yes Yes	No No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes	No No No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	10a 10b 11a 12a 12b 12c 13	Yes Yes	No No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes	No No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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 If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10a 10b 11a 12a 12b 12c 13 14 15a	Yes Yes Yes	No No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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 If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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 If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10a 10b 11a 12a 12b 12c 13 14 15a	Yes Yes Yes	No No No No

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available. Check all that apply
 - Own website Another's website V 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, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►DANIEL POLING

1010 LEWIS STREET

CHARLESTON, WV 25301 (304)343-8250

Form 990 (2014)	
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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, or 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) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or chiector	2/1099-MISC)	2/1099-MISC)	organization and related organizations

Form **990** (2014)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	han o n is	ne l both	box, an d	heck unless officer stee)	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	•		
c	Total from continuation sheets to Part VII, Section A	►		
d	Total (add lines 1b and 1c)	-	703,618	399,229

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		
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule I for such individual					
	on the lar it res, complete schedule from such marvidual	3		No		
4	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					
	ındıvıdual	4		No		
5	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	5		No		

Section	R	Inda	na	nden	t Co	ntractor	-

1 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

(B) Description of services	(C) Compensation
	(B) Description of services

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

Part V		Check if Schedu	ile O contains a respon	se or note to any lir	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s ts	1a	Federated camp	paigns 1a					
ons, Gifts, Grants Similar Amounts	b	Membership du	es 1b					
, Gr	С	Fundraising eve	ents 1c					
iffs, ar ⊅	d	Related organiz	ations 1d					
r, G mil	е	Government grants	s (contributions) 1e					
ons Sii	f	All other contribution	ons, gifts, grants, and 1f	43,836		ł		
outi her	-	sımılar amounts no	t included above					
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contribution 1a-1f \$	ons included in lines					
Cor	h	Total. Add lines	s 1a-1f	🛌	43,836			
9				Business Code				
enn	2a	MEMBERSHIP DUES	S & ASSESSMENTS		2,547,323	2,547,323		
Rev	b	RENTS FROM TRAI	NING AFFILIATE		110,000	110,000		
ЛСе	С	REIMBURSED SALA	RIES & WAGES		32,603	32,603		
Seri	d	ORGANIZATIONAL I			32,010	32,010		
Program Serwce Revenue	e	REIMB EXPENSE FR			13,964	13,964		
ißo,	f	All other progra	m service revenue		310	310		
<u>~</u>	g	Total. Add lines		•	2,736,210			
	3		ome (including dividend ar amounts)		-5			-5
	4		tment of tax-exempt bond p	F				
	5	Royalties		▶				
	6 -	C	(ı) Real	(II) Personal				
	6a b	Gross rents Less rental						
	c	expenses Rental income						
	_	or (loss)	me or (loss)					
	d	Net Tental Incol	(i) Securities	(II) Other				
	7a	Gross amount	(i) became	(II) o circi				
		from sales of assets other						
	b	than inventory Less cost or						
		other basis and sales expenses						
	С.	Gain or (loss)	,					
	d 8a	Gross income fi	s)	· · · · •				
a e	0	events (not incl	_					
Other Revenue		\$ of contributions	reported on line 1c)					
Rev		See Part IV, lin	e 18					
ē	L		a					
o t			penses b loss) from fundraising e	events .				
		Gross income fr	rom gaming activities	-				
		See Part IV, lin	e 19 a					
	b	Less direct exi	penses b					
			loss) from gaming activ	/ities				
	10a	Gross sales of i	• • •					
		recumb and ano	a					
	b	Less cost of go	oods sold b					
	С		loss) from sales of inve					
	11a	Miscellaneous REFUNDS	s kevenue	Business Code	3,697			3,697
	b	MISCELLANEO			143			143
	c	JGELLANEO						
	d	All other revenu	ıe					
	e			🕨	3,840			
	12	Total revenue.	See Instructions	🕨		2 726 246		2.025
		_		<u> </u>	2,783,881	2,736,210		3,835 Form 990 (2014)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete col	umn (A)
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Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All				
	Check if Schedule O contains a response or note to any line in this	Part IX			<u> </u>
	ot include amounts reported on lines 6b, o, 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 domestic organizations and domestic governments See Part IV, line 21	10,713	10,713		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,102,847	1,102,847		
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	202,316	202,316		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	44,353	44,353		
9	Other employee benefits	119,300	119,300		
10	Payroll taxes	78,334	78,334		
11	Fees for services (non-employees)				
а	Management				
ь	Legal	14,306	14,306		
c	Accounting	32,410	32,410		
d	Lobbying	,	,		
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	1,110	1,110		
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)		2,220		
12	Advertising and promotion	436	436		
13	Office expenses	81,428	81,428		
14	Information technology	,	,		
15	Royalties				
16	Occupancy	93,999	93,999		
17	Travel	142,614	142,614	1	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	112,011	112,011		
19	Conferences, conventions, and meetings	3,488	3,488		
20	Interest	,	,		
21	Payments to affiliates	525,864	525,864		
22	Depreciation, depletion, and amortization	134,372	134,372		
23	Insurance	39,354	39,354		
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	PROPERTY TAXES	27,898	27,898		
b	ORGANIZING EXPENSES	13,138	13,138		
c	RESALE PURCHASES	13,000	13,000		
d	BANK SERVICE CHARGES	9,549	9,549		
e	All other expenses	6,831	6,831		
25	Total functional expenses. Add lines 1 through 24e	2,697,660	2,697,660	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 ► ☐ if following SOP 98-2 (ASC 958-720)	2,237,030	2,237,630		<u> </u>

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X .	<u> </u>		• •	<u>····</u>
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		994,976	1	1,171,105
	2	Savings and temporary cash investments		22,799	2	22,755
	3	Pledges and grants receivable, net			3	_
	4	Accounts receivable, net		26,183	4	13,561
ङ	5	Loans and other receivables from current and former officers, directors, trusted employees, and highest compensated employees. Complete Part II of Schedule L	es, key		5	
	6	Loans and other receivables from other disqualified persons (as defined under $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing empand sponsoring organizations of section $501(c)(9)$ voluntary employees' beneforganizations (see instructions) Complete Part II of Schedule L	oloyers		6	
4ssets	7	Notes and loans receivable, net			7	
⋖	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D				
	ь	Less accumulated depreciation 10b	523,059	1,224,104	10c	1,149,278
	11	Investments—publicly traded securities		762,129	11	761,013
	12	Investments—other securities See Part IV, line 11		12		
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	-
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		3,030,191	16	3,117,712
	17	Accounts payable and accrued expenses		110	17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
ي ور	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
lities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified				
Liabili		persons Complete Part II of Schedule L			22	
\exists	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties and other liabilities not included on lines 17-24) Complete Part X of Schedule				
		D			25	1,410
	26	Total liabilities. Add lines 17 through 25		110	26	1,410
S e S		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 27 through 29, and lines 33 and 34.	1			
<u>a</u>	27	Unrestricted net assets		2,823,911	27	2,844,388
ත ක	28	Temporarily restricted net assets		206,170	28	271,914
2	29	Permanently restricted net assets			29	
Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.				
S.	30	Capital stock or trust principal, or current funds			30	
Ř	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
₹	33	Total net assets or fund balances		3,030,081	33	3,116,302
_	34	Total liabilities and net assets/fund balances		3,030,191	34	3,117,712

Par	t XI	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total	revenue (must equal Part VIII, column (A), line 12)	1		2,7	783,881
2	Total	expenses (must equal Part IX, column (A), line 25)	2		2,6	597,660
3	Revei	nue less expenses Subtract line 2 from line 1	3			86,221
4	Neta	ssets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3,0	30,081
5	Netu	nrealized gains (losses) on investments	5			
6	Dona	ted services and use of facilities	6			
7	Inves	tment expenses	7			
8	Prior	period adjustments	8			
9	Other	changes in net assets or fund balances (explain in Schedule O)	9			
10		ssets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, and (B))	10		3,:	116,302
Par	t XII					
		Check if Schedule O contains a response or note to any line in this Part XII				
					Yes	No
		MODIFIED				
1	Ifthe	unting method used to prepare the Form 990				
2a	Were	the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
		s,' check a box below to indicate whether the financial statements for the year were compiled or revie arate basis, consolidated basis, or both	wed on			
	Γs	eparate basis				
b	Were	the organization's financial statements audited by an independent accountant?		2b	Yes	
		s,' check a box below to indicate whether the financial statements for the year were audited on a sepa , consolidated basis, or both	arate			
	Γs	eparate basis				
c		es," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig review, or compilation of its financial statements and selection of an independent accountant?	ht of the	2c	Yes	
		organization changed either its oversight process or selection process during the tax year, explain idule O	n			
За		result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	ne	3a		No
b		es," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

Software ID: Software Version:

EIN: 02-0533725

Name: INTERNATIONAL UNION OF PAINTERS AND

ALLIED TRADES DISTRICT COUNCIL 53

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th person and a	ion (nan o n is b	ne b oth ctor/	ox, u an of trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1033***********************************	2/1033-11136/	related organizations
(1) DANIEL J POLING BUS MGR/ SEC	60 00	х		х				95,708	0	49,325
(1) CECIL FERGUSON	45 00	х		х				62,444	0	35,863
PRESIDENT (2) DAVID W MORRIS VICE PRESIDE	40 00	х		х				55,408	0	31,694
(3) RICHARD L PATRICK WARDEN	40 00	х		х				51,679	0	32,600
(4) BRAD SHAFER TRUSTEE	1 00	х		х				400	0	0
(5) MATT KETTLEWELL TRUSTEE	1 00	х		х				600	0	0
(6) KEVIN JETT TRUSTEE	1 00	х		х				400	0	0
(7) GLENN D MCENDREE DELEGATE	40 00	х						55,469	0	31,878
(8) GLEN M JACKSON DELEGATE	40 00	х						55,453	0	31,878
(9) JERRY W SCARBRO DELEGATE	45 00	х						62,463	0	35,863
(10) HAROLD KELLER DELEGATE	40 00	х						17,427	0	7,892
(11) BRIAN K STANLEY DELEGATE	40 00	х						62,343	0	35,834
(12) DAVID S BLAND DELEGATE	40 00	х						55,954	0	31,852
(13) MICHAEL S LIVELY DELEGATE	40 00	х						55,302	0	31,852
(14) ANDREW P WALTERS DELEGATE	40 00	х						53,424	0	30,951
(15) JOHN STAPLETON DELEGATE	40 00	х						9,768	0	7,049
(16) DAVID E SHAVER DELEGATE	40 00	х						5,351	0	3,376
(17) JEFF STANTON DELEGATE	2 00	х						1,150	0	665
(18) RODNEY SKAGGS DELEGATE	2 00	х						1,000	0	657
(19) JOHN WEEKLY DELEGATE	0 50	х						250	0	0
(20) RICHARD FORD DELEGATE	0 50	х						150	0	0
(21) DAVE COFFMAN DELEGATE	0 50	х						25	0	0
(22) JAMES BARNHART DELEGATE	0 50	х						225	0	0
(23) GENE M CLEGG DELEGATE	0 50	х						150	0	0
(24) ROBERT HUGHES DELEGATE	0 50	х						250	0	0
	_ I					1		I	<u> </u>	<u> </u>

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours per week (list any hours for related	verage Position (do not check more than one box, unless ek (list person is both an officer and a director/trustee)					_	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Former Highest compensated employee Key employee		Former			related organizations
(26) MARK MULLINS DELEGATE	0 50	×						100	0	О
(1) RICHARD YOCUM DELEGATE	0 50	х						25	0	0
(2) REX FLEMING DELEGATE	0 50	х						25	0	0
(3) DANNY BLANKENSHIP DELEGATE	0 50	х						25	0	0
(4) DAVE BARKER	0 50	х						50	0	0
DELEGATE-ALT (5) DAVE KITTLE	0 50	Х						250	0	0
DELEGATE (6) DON EDDY	0 50	х						50	0	0
DELEGATE (7) HAROLD PARKER	0 50	х						75	0	0
DELEGATE (8) NEWTON FERGUSON	0 50									
DELEGATE (9) SKYLAR BLAND	0 50	X						75	0	0
DELEGATE (10) JOEY BLANKENSHIP	0 50	X						75	0	0
DELEGATE (11) MARTIN SKAGGS	0 10	Х						75	0	0
DELEGATE		х						0	0	0
(12) EDWARD SCARBRO DELEGATE	0 10	х						0	0	0
(13) DON GUNDRUM DELEGATE	0 10	x						0	0	0
(14) JARED SCARBRO DELEGATE	0 10	х						0	0	0
(15) JAMES FERGUSON DELEGATE	0 10	х						0	0	0
(16) STEVE LEWIS	0 10	х						0	0	0
DELEGATE (17) LARRY ARNOLD	0 10	х						0	0	0
DELEGATE (18) KEITH HATFIELD	0 10	х						0	0	0
DELEGATE										

DLN: 93493149003395

OMB No 1545-0047

Open to Public Inspection

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

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

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

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

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

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V,

	35c (Proxy Tax) (see separate Section 501(c)(4), (5), or (6) orga	•			
	me of the organization ERNATIONAL UNION OF PAINTERS AND			Employer iden	tification number
ALL	IED TRADES DISTRICT COUNCIL 53			02-0533725	
Par	t I-A Complete if the or	ganization is exempt unde	r section 501(c) or is a section 527	organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect polı	tıcal campaıgn act	tivities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	tJ-B Complete if the or	ganization is exempt unde	r section 501(c)(3).	
1	•	e tax incurred by the organization u	_		\$
2	·	e tax incurred by organization mana			\$
3		ection 4955 tax, did it file Form 4			☐ Yes ☐ No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt unde	r section 501(c), except section 50	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for	section 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	rganization's funds contributed to	other organization	s for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter her	e and on Form 112	20-POL, line 17b ►	\$
4	Did the filing organization file F	Form 1120-POL for this year?			⊤ Yes
5	organization made payments famount of political contribution	nd employer identification number in For each organization listed, enter and received that were promptly and political action committee (PAC)	the amount paid fro directly delivered	om the filing organization's f to a separate political orga	funds Also enter the nization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

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

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2014					Page 2
P	cart II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and fi	led Form 5768	
	Check ► If the filing organization belongs to a		list in Part IV ea	ich affiliated gr	oup member's nam	e, address, EIN,
В	expenses, and share of excess lobb		ol" provisions apr	olv		
	Limits on Lobbying E (The term "expenditures" means an	Expenditures		,	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	obying)			
b	Total lobbying expenditures to influence a legisl	atıve body (dırect lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount to	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of th	e excess over \$500,0			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of th	e excess over \$1,000	0,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	000		
	Over \$17,000,000					
	Grassroots nontaxable amount (enter 25% of lir	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ent	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	er -0-				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 rep	oorting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t		ection do not uctions for li	have to co nes 2a thro	ugh 2f.)	he five
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					

Pa	rt II-B Complete if the organization is e filed Form 5768 (election under	exempt under section 501(c)(3) and has I section 501(h)).	ТОИ				
For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying				1)	(b)		
activ		m rune iv a decaned description of the lobbying	Yes	No	Am	ount	
1 a	During the year, did the filing organization attempt to legislation, including any attempt to influence public through the use of Volunteers?		ĺ				
b c	Paid staff or management (include compensation in Media advertisements?	expenses reported on lines 1c through 1i)?					
d	Mailings to members, legislators, or the public?						_
e	Publications, or published or broadcast statements?	,					
f	Grants to other organizations for lobbying purposes?						
g	Direct contact with legislators, their staffs, governm	ent officials, or a legislative body?					
h i	Rallies, demonstrations, seminars, conventions, spe Other activities?	eches, lectures, or any similar means?					_
j	Total Add lines 1c through 1i		_				
2a b	Did the activities in line 1 cause the organization to If "Yes," enter the amount of any tax incurred under	<u>L</u>					
c	If "Yes," enter the amount of any tax incurred by org	janization managers under section 4912					_
d	If the filing organization incurred a section 4912 tax	, did it file Form 4720 for this year?					
Par	rt III-A Complete if the organization is e 501(c)(6).	exempt under section 501(c)(4), section 5	501(c))(5), c	r sec	tion	
					Y	es N	ю
1	Were substantially all (90% or more) dues received			L	1 Y	es	
2	Did the organization make only in-house lobbying ex				2		Ιo
3	Did the organization agree to carry over lobbying an				3		Ю
Par		exempt under section 501(c)(4), section 5 Part III-A, lines 1 and 2, are answered "					,
1	Dues, assessments and similar amounts from memb	pers	1				
2	Section 162(e) nondeductible lobbying and political expenses for which the section 527(f) tax was paid						
a	,		2a				_
D	Carryover from last year		2b				
c	Total) nations of nandadisability continue 162(a) disc	2c				_
3	Aggregate amount reported in section 6033(e)(1)(A		3				_
4	If notices were sent and the amount on line 2c exce does the organization agree to carryover to the reas political expenditure next year?		4				
5	Taxable amount of lobbying and political expenditure	es (see instructions)	5				_
Pa	art IV Supplemental Information						
	ovide the descriptions required for Part I-A, line 1, Pai (see instructions), and Part II-B, line 1 Also, complete		ıp lıst),	Part II	-A , line	s 1 an	d
	Return Reference	Explanation					

Part IV Supplemental Inf	ormation (continued)				
Return Reference	Explanation				
·	_				

Schedule C (Form 990 or 990EZ) 2014

DLN: 93493149003395

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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.

Open to Public

mal Revenue Service	Information about Schedule D (Form	990) and its instructions is at <u>www.ir</u> s	s.gov/i	inspection
Name of the organ			Empl	loyer identification number
NTERNATIONAL UNION ALLIED TRADES DISTRI			02-0	0533725
	izations Maintaining Donor Adv		unds (or Accounts. Complete if th
organi	zation answered "Yes" to Form 990	•		(1) =
Tatal www.hawa		(a) Donor advised funds	+ '	(b) Funds and other accounts
Total number a	·			
	ue of contributions to (during year) ue of grants from (during year)			
	ue at end of year			
	·		<u> </u>	
funds are the o	zation inform all donors and donor adviso organization's property, subject to the or	ganızatıon's exclusıve legal control?		☐ Yes ☐ No
used only for c	zation inform all grantees, donors, and do charitable purposes and not for the benef			
	ermissible private benefit? ervation Easements. Complete if	the organization answered "Ves" t	o Form	<u> </u>
	conservation easements held by the orga		0 10111	11 330, 1 drt 1 v , inic 7.
	on of land for public use (e g , recreation	* * * * * * * * * * * * * * * * * * * *	ı hıstorı	ically important land area
	of natural habitat			d historic structure
☐ Preservati	on of open space			
	s 2a through 2d if the organization held a the last day of the tax year	qualified conservation contribution in t	the form	n of a conservation
casement on c	ine last day of the tax year			Held at the End of the Year
a Total number	of conservation easements		2a	
b Total acreage	restricted by conservation easements		2b	
Number of con	servation easements on a certified histo	rıc structure ıncluded ın (a)	2c	
	servation easements included in (c) acq ure listed in the National Register	uired after 8/17/06, and not on a	2d	
	servation easements modified, transferr	' ed. released. extinguished. or terminate	ed by th	ne organization during
the tax year 🕨		,	,	
Number of sta	tes where property subject to conservati	on easement is located ►		
	nization have a written policy regarding t f the conservation easements it holds?	he periodic monitoring, inspection, hand	dling of	violations, and Yes No
Staff and volur	nteer hours devoted to monitoring, inspe	cting, and enforcing conservation easer	ments d	luring the year
-				
	enses incurred in monitoring, inspecting	, and enforcing conservation easements	s during	g the year
► \$				
	nservation easement reported on line 2(o 70(h)(4)(B)(ii)?	I) above satisfy the requirements of sec	tion 17	$\Gamma^{(h)(4)(B)(1)}$ Γ Yes Γ No
balance sheet	lescribe how the organization reports cor , and include, if applicable, the text of the	e footnote to the organization's financial		
art IIII Organ	on's accounting for conservation easeme vizations Maintaining Collection ete if the organization answered "Y	s of Art, Historical Treasures,	or Oth	her Similar Assets.
a If the organiza	tion elected, as permitted under SFAS 1	16 (ASC 958), not to report in its revei		
service, provid	istorical treasures, or other similar asse de, in Part XIII, the text of the footnote t	o its financial statements that describe	s these	e items
works of art, h	tion elected, as permitted under SFAS 1 istorical treasures, or other similar asse de the following amounts relating to these	ts held for public exhibition, education,		
(i) Revenue in	cluded in Form 990, Part VIII, line 1			- \$
(ii) Assets inc	luded in Form 990, Part X			▶ \$
If the organiza	tion received or held works of art, histori ints required to be reported under SFAS	•		cial gain, provide the
_	ded in Form 990, Part VIII, line 1			- \$

b Assets included in Form 990, Part X

 Using the organization's acquisition, accession, and other record collection items (check all that apply) Public exhibition Scholarly research 	ds, ch d	neck	•	the foll	owing that ar	re a	significant use of	fits	
<u> </u>	d								
b Scholarly research		ı	Loan	orexc	hange progra	ms			
	e	Γ	Othe	r					
c Preservation for future generations									
4 Provide a description of the organization's collections and explain Part XIII	ın hov	w the	y furth	er the d	organization's	s ex	empt purpose in		
5 During the year, did the organization solicit or receive donations assets to be sold to raise funds rather than to be maintained as								Yes	□ No
Part IV Escrow and Custodial Arrangements. Comple									1 140
Part IV, line 9, or reported an amount on Form 99									
Is the organization an agent, trustee, custodian or other interme included on Form 990, Part X?				utions (or other asse	ts n	ot	Yes	┌ No
b If "Yes," explain the arrangement in Part XIII and complete the	TOIIOV	ving t	abie				Amo	unt	
C Beginning balance					Ι,	lc	Allo	4111	
d Additions during the year						Ld			
e Distributions during the year						le			
f Ending balance					_	Lf			
2a Did the organization include an amount on Form 990, Part X, line	21.	for e	scrow	orcust	<u> </u>		bility?	Yes	┌ No
b If "Yes," explain the arrangement in Part XIII Check here if the	-						•		_
Part V Endowment Funds. Complete if the organization								• •	<u> </u>
(a)Current year)Prior						Four y	ears back
1a Beginning of year balance									
b Contributions									
c Net investment earnings, gains, and losses									
d Grants or scholarships									
e Other expenditures for facilities and programs									
f Administrative expenses									
g End of year balance									
2 Provide the estimated percentage of the current year end balance	e (lın	ie 1g	, colum	nn (a))	held as				
a Board designated or quasi-endowment ▶									
b Permanent endowment ▶									
c Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should equal 100%									
3a Are there endowment funds not in the possession of the organiza	ation	that	are hel	d and a	idministered	for t	the		
organization by (i) unrelated organizations							3a(i)	Yes	No
(ii) related organizations		•				•	3a(ii)		
b If "Yes" to 3a(II), are the related organizations listed as required	• d on S	Sched	· · Iule R?	٠		٠	3b		
4 Describe in Part XIII the intended uses of the organization's end	dowm	ent f	unds						
Part VI Land, Buildings, and Equipment. Complete if t 11a. See Form 990, Part X, line 10.	he o	rgan	ızatıo	n ansv	vered 'Yes'	to I	Form 990, Part	IV, lı	ne
Description of property) Cost o		(b)Cost or otl basis (other		(c) Accumulated depreciation	(d) Bo	ook value
1a Land					84,0	000			84,000
b Buildings					1,148,0	-	223,448		924,568
c Leasehold improvements					. ,	\neg			
d Equipment					274,6	614	161,261		113,353
	_				165,	707	138,350		27,357
e Other	-				100,				

Part VII Investments—Other Securities. Con	nplete if the organization	answered 'Yes' to Form	990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valu	
(including name of security)		Cost or end-of-year ma	arket value
(1)Financial derivatives (2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	*		
Part VIII Investments—Program Related. Co	mplete if the organizatio	n answered 'Yes' to Forn	m 990, Part IV, line 11c.
See Form 990, Part X, line 13.	1 (1) 5 1 1	1 (24)	
(a) Description of investment	(b) Book value	(c) Method of valu Cost or end-of-year ma	
		·	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	*		
Part IX Other Assets. Complete if the organization (a) Descri), Part IV, line 11d See For	(b) Book value
			•
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1			0 110 cm 115 Cc -
Part X Other Liabilities. Complete if the organization Form 990, Part X, line 25.	mization answered 'Yes' t	o romii 990, Part IV, line	e 11e or 11f. 5ee
1 (a) Description of liability	(b) Book value		
Federal income taxes			
PAYROLL TAXES AND WITHHOLDINGS	1,337		
CONTRACTOR PENSION AND H&W PAYABLES	73		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	1,410		
3 Liability for uncertain toy positions. In Dort VIII provid			

Par	rt XI Reconciliation of Revenue per Audited Financial Statements the organization answered 'Yes' to Form 990, Part IV, line 12a.	With Revenue p	er Retur	n Complete if
1	Total revenue, gains, and other support per audited financial statements		1	2,783,881
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments 2a			
b	Donated services and use of facilities			
c	Recoveries of prior year grants			
d	Other (Describe in Part XIII) 2d			
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	2,783,881
4	Amounts included on Form 990, Part VIII, line 12, but not on line $oldsymbol{1}$			
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a			
b	Other (Describe in Part XIII) 4b			
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines ${f 3}$ and ${f 4c.}$ (This must equal Form 990, Part I, line 12) .		5	2,783,881
Part	rt XII Reconciliation of Expenses per Audited Financial Statement if the organization answered 'Yes' to Form 990, Part IV, line 12a.	s With Expenses	s per Ret	urn. Complete
1	Total expenses and losses per audited financial statements		1	2,697,660
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		1	
c	Other losses		1	
d	Other (Describe in Part XIII)		1	
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	2,697,660
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)			
C	Add lines 4a and 4b		4c	
5	Total expenses Add lines ${f 3}$ and ${f 4c.}$ (This must equal Form 990, Part I, line ${f 18}$) .		5	2,697,660
Part	rt XIII Supplemental Information			
Part	ovide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also cormation			y addıtıonal
	Return Reference Explanation			

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2014

DLN: 93493149003395

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Transactions with Interested Persons

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

www.irs.gov/form990.

► Attach to Form 990 or Form 990-EZ. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at Open to Public Inspection

Employer identification number

	NATIONAL UNION OF PAINTERS AND				
ALLIE	TRADES DISTRICT COUNCIL 53		02-0533725		
art		ctions (section 501(c)(3), section 501(d Inswered "Yes" on Form 990, Part IV, line			
1			(c) Description of transaction	(d) Corrected?	
		person and organization		Yes	No
2	Enter the amount of tay incurred by	v organization managers or disqualified pe	reone during the year under section		
	4958	· · · · · · · · · · · · · · · · · · ·			

Part II

Loans to and/or From Interested Persons.

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of Interested person	(b) Relationship with organization	(d) Loan or from th organization	ie	(e)Original principal amount	(f) Balance due	default?		(h) Approved by board or committee?		(i)Written agreement?	
		То	From			Yes	No	Yes	No	Yes	No

Total	▶ \$						
Part IIII Grants or A	ssistance Benefiting Ir	nterested Persons.					
Complete ıf t	Complete if the organization answered "Yes" on Form 990, Part IV, line 27.						
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of assistance	(d) Type	of assistanc	e (e) Purpos	e of assistance	
						_	

(1) IUPAT DISTRICT COUNCIL 53 JATC PROGRAM SVC

TRADES

(e) Sharing of organization's

revenues? Yes

No

Νo

Part IV Business Transactions I	nvolving Interested	l Persons.				
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.						
(a) Name of interested person	(b) Relationship	(c) Amount of	(d) Description of transaction			
	between interested	transaction				
	person and the					
	organization					

Provide additional information provide additional information for responses to questions on Schedule L (see instructions)							
Return Reference	Explanation						
SCHEDULE L, PART V	DISTRICT COUNCIL 53 RENTS A MAJORITY OF THE SPACE IN ITS OWNED WAREHOUSE LOCATED IN WESTON, WV TO THE IUPAT DISTRICT COUNCIL 53 JOINT APPRENTICESHIP AND TRAINING COMMITTEE (JATC) TRUST, WHOSE BOARD IS COMPRISED 50% BY MEMBERS APPOINTED BY THE DISTRICT COUNCIL AND 50% BY DISTRICT EMPLOYERS PARTICIPATING IN COLLECTIVE BARGAINING AGREEMENTS ALL SIX (6) MEMBERS APPOINTED BY THE DISTRICT COUNCIL'S GOVERNING BODY OF DELEGATES THE JATC TRUST IS A NONPROFIT ORGANIZATION ORGANIZED UNDER SECTION 501(C) (3) OF THE INTERNAL REVENUE CODE WITH THE PURPOSE OF TRAINING AND ADJUSTING CRAFTSMEN WITHIN VARIOUS INDUSTRIES OF THE PAINTING AND ALLIED.						

Schedule L (Form 990 or 990-EZ) 2014

110,000 INDUSTR SPACE RENTAL

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493149003395

OMB No 1545-0047

Open to Public Inspection

SCHEDULE 0 Supplemental Information to Form 990 or 990-EZ

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

Name of the organization INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES DISTRICT COUNCIL 53 **Employer identification number** 02-0533725

990 Schedule O, Supplemental Information	
Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 6	
FORM 990, PAGE 6, PART VI, LINE 7A	ALL NOMINATIONS, ELECTIONS AND REFERENDA ARE CONDUCTED BY THE ORGANIZATION'S ELECTION COMM
	ITTEE. THE ORGANIZATION'S MEMBERS ELECT THE BUSINESS MANAGER AND BUSINESS REPRESENTATIVES
	TO SERVE A CONCURRENT FOUR (4) YEAR TERM WITH THE COUNCIL OF DELEGATES DELEGATES TO THE C
	OUNCIL ARE ELECTED BY AND FROM EACH OF THE DISTRICT'S AFFILIATED LOCAL UNIONS MEMBERS IN
	GOOD STANDING FOR THE TWENTY-FOUR (24) CONSECUTIVE MONTHS PRIOR TO NOMINATION ARE ELIGIBLE
	TO HOLD OFFICE. EVERY MEMBER WHOSE DUES ARE PAID THROUGH THE MONTH PRIOR TO THE NOMINATIO
	N MEETING SHALL HAVE THE RIGHT TO NOMINATE, SECOND OR OTHERWISE SUPPORT THE CANDIDATE OF H
	IS CHOICE. EVERY MEMBER WHOSE DUES ARE PAID THROUGH THE MONTH PRIOR TO THE ELECTION SHALL
	HAVE THE RIGHT TO VOTE OR OTHERWISE SUPPORT THE CANDIDATE OF HIS CHOICE
FORM 990, PAGE 6, PART VI, LINE 7B	THE ORGANIZATION'S BUSINESS MANAGER AND THE COUNCIL OF DELEGATES HAVE THE AUTHORITY TO CON
	DUCT THE AFFAIRS OF THE DISTRICT COUNCIL SUBJECT TO THE ORGANIZATION'S BY-LAWS, THE INTERN
	ATIONAL'S CONSTITUTION, AND APPLICABLE LAWS AND STATUTES ALL AMENDMENTS TO THE ORGANIZATI
	ON'S BY-LAWS MUST BE APPROVED BY A MAJORITY VOTE OF THE MEMBERS AT A MEETING OF THE DISTRI
	CT COUNCIL CALLED FOR THAT PURPOSE
FORM 990, PAGE 6, PART VI, LINE 11B	THE BUSINESS MANAGER/ SECRETARY-TREASURER REVIEWS THE RETURN WITH THE ORGANIZATION'S INDEP
	ENDENT ACCOUNTANT WHEN IT IS PRESENTED FOR SIGNATURE. THE COUNCIL OF DELEGATES ARE INFORME
	D AT ITS NEXT MEETING THAT THE RETURN HAS BEEN FILED, A PUBLIC INSPECTION COPY HAS BEEN MA
	DE AVAILABLE IN THE MAIN OFFICE, AND A COMPLETE COPY IS AVAILABLE FOR INSPECTION BY ANY DE
	LEGATE IN THE OFFICE THE OFFICERS WILL ALSO TYPICALLY DISCUSS WITH THE COUNCIL ANY SIGNIF
	ICANT CHANGES OR OBSERVATIONS THAT COME FROM THE RETURN PREPARATION
FORM 990, PAGE 6, PART VI, LINE 15A	THE DISTRICT COUNCIL BY LAWS SPECIFY THE ELECTED BUSINESS MANAGER/ SECRETARY- TREASURER SHAL
	L RECEIVE WAGES AND FRINGE BENEFITS NO GREATER THAN THE HIGHEST NEGOTIATED WAGE AND BENEFI
	T PACKAGE IN ANY DISTRICT COUNCIL COLLECTIVE BARGAINING AGREEMENT ADJUSTED TO A SIXTY (60)
	HOUR WORK WEEK
FORM 990, PAGE 6, PART VI, LINE 15B	THE DISTRICT COUNCIL BY LAWS SPECIFY THE ELECTED BUSINESS REPRESENTATIVES AND THE DIRECTOR
	OF ORGANIZING SHALL RECEIVE WAGES AND FRINGE BENEFITS NO GREATER THAN THE HIGHEST NEGOTIAT
	ED WAGE PAID TO A JOURNEY MAN WITHIN THE DISTRICT OFFICERS AND DELEGATES WHOM ARE NOT FULL
	TIME EMPLOYEES OF THE ORGANIZATION RECEIVE A NOMINAL STIPEND FOR ATTENDING DISTRICT COUNC
	IL MEETINGS
FORM 990, PAGE 6, PART VI, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS AND FORM 990 ARE AVAILABLE FOR INSPECTION IN THE DI
	STRICT COUNCIL'S MAIN OFFICE DURING NORMAL BUSINESS HOURS ADVANCE NOTICE IS REQUESTED
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