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DLN: 93493225027455

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 foundations)

 $\blacktriangleright$  Do not enter social security numbers on this form as it may be made public

► Information about Form 990 and its instructions is at <a href="https://www.IRS.gov/form990">www.IRS.gov/form990</a>

OMB No 1545-0047

Open to Public Inspection

A Fo	or the	2014 ca	lendar year, or tax year beginning	01-01-2014 , and ending 12-31-20	14			
		applicable	UNITED ASSOCIATION OF JOURNEYM			D Emplo	yer iden	itification number
	dress cl	_	PLUMBING & PIPEFITTING INDUSTRY	1.562		43-0	560620	)
	me cha	_	Doing business as					
•	tial retu	ım	Number and street (or P O box if ma	all is not delivered to street address) Room/	suite	E Teleph	one numl	per
Firet		mınated	12385 LARIMORE RD	,		(314)	355-1	000
┌ An	nended	return	City or town, state or province, coun	try, and ZIP or foreign postal code				
Гар	plicatio	n pending	ST LOUIS, MO 631383806			<b>G</b> Gross	receipts \$	10,257,086
			F Name and address of prin	cıpal officer	H(a) ]	s this a group	return	
			JOHN J O'MARA 12385 LARIMORE RD		\$	subordinates?		┌ Yes 🗸 No
			ST LOUIS, MO 631383806		Н(b)	Are all subord	ınates	┌ Yes ┌ No
		nnt status			_	ncluded?		/\
			5	nsert no )   4947(a)(1) or   527	- '	ir "No," attacr	i a list	(see instructions)
J W	/ebsite	e:► W\	WW LOCAL562 ORG		H(c)	Group exemp	tion nun	nber 🟲
<b>K</b> For	m of or	rganızatıor	n Corporation Trust 🗸 Association	Other ►	<b>L</b> Year	of formation 19	912 <b>M</b>	State of legal domicile
Pa	rt I	Sun	nmary				inc	,
			describe the organization's missio	n or most significant activities				
		TO ACH	HIEVE BY ORGANIZATION THE	IMPROVEMENT OF THE SOCIAL A	ND ECON	OMIC COND	ITIONS	OFEMPLOYEES
3		IDENTI	FIED WITH THE PLUMBERS AND	D PIPEFIII ERS INDUSTRIES				
Governance								
¥ell	,	Check t	this how How if the organization dis	continued its operations or disposed	of more th	nan 25% of its	net ac	eate
ŝ	-	CHECK	ins box Fig. II the organization dis	continued its operations of disposee	or more cr	1411 25 70 01 165	, nec as.	3003
26 47	3	Number	of voting members of the governi	ng body (Part VI, line 1a)			3	5
Ħ.	1			f the governing body (Part VI, line 1			4	0
Activities &	1			alendar year 2014 (Part V, line 2a)			5	214
∢				ecessary)			6 7a	913
				ort VIII, column (C), line 12 om Form 990-T, line 34			7a 7b	0
	+ -					Prior Year	1,7	Current Year
	8	Contr	ributions and grants (Part VIII, lin	ne 1h)		6,579,	126	6,634,519
Rayenue	9	Progr	Program service revenue (Part VIII, line 2g)					0
e Aet	10		tment income (Part VIII, column	1,072,	776	2,269,750		
_	11 Other revenue (Part VIII, column				207,	358	96,088	
	12		revenue—add lines 8 through 11	(must equal Part VIII, column (A), lı	ne	7,859,	260	9,000,357
	13			IX, column (A), lines 1–3)			0	0
	14			X, column (A), line 4)		439,	423	389,011
ø	15	Saları 5–10		e benefits (Part IX, column (A), lines		4,446,	588	4,225,574
Expenses	16a		,	column (A), line 11e)			0	0
×De	Ь	Total fo	undraising expenses (Part IX, column (D)	, line 25) <b>▶</b> -0				
Ш	17			nes 11a-11d, 11f-24e)	. —	3,328,	388	3,418,454
	18			t equal Part IX, column (A), line 25)		8,214,		8,033,039
	19	Rever	nue less expenses Subtract line 1	l 8 from line 12		-355,	139	967,318
Net Assets or Fund Balances					Begi	nning of Curre Year	nt	End of Year
Seta	20	Total	assets (Part X, line 16)			33,777,	296	34,728,291
4.48. 8.48.	21					219,		339,707
žŽ	22							34,388,584
Pa	rt II	Sigr	nature Block		•		•	
				mined this return, including accompa plete Declaration of preparer (other				
			knowledge					
		***	***			2015-07-10		
Sigi	n	1 .	nature of officer			Date		
Her			N J O'MARA BUSINESS MGR/SECR-TREAS	;				
		<u> </u>	e or print name and title	Draparode consture	Data	T —	DTTN	
Pai	Ч		Print/Type preparer's name JAMES D HUBER	Preparer's signature JAMES D HUBER	Date	Check   If self-employed	PTIN P00177	536
	u ·pare		Firm's name FANDERS MINKLER HUBI	ER & HELM LLP		Firm's EIN 🕨 4	3-083150	)7
	On	I .	Firm's address 🟲 800 MARKET STREET SU	JITE 500		Phone no (314	1) 655-55	500

ST LOUIS, MO 631012501

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

✓ Yes ☐ No

# 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		No
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	<b>Section 501(c)(3) organizations.</b> 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? If "Yes," complete Schedule C, Part III	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	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," complete Schedule D, Part III</i> 2	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 $IV^{\bullet}$	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			
a	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		No
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? <i>If</i> " <i>Yes," complete Schedule F, Parts III and IV</i>	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? <i>If "Yes," complete Schedule G, Part II</i>	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		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
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		No
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? <i>If "Yes," complete Schedule M</i>	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? <i>If "Yes," complete Schedule N, Part II</i>	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	Yes	
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	<b>Section 501(c)(3) organizations.</b> 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		Νo
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>		
4-	Estantla number respected in Bou 2 of Forms 1000 Faton 0 of motornal college.		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 20  Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? $\cdot$ .	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	F -		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	5c 6a	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7</b> f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI 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.

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	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	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	
	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,	7b	163	No
8	or persons other than the governing body?			
а	year by the following  The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	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
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	<u>evenu</u>		
10-	Did the consensation have been been been been been been as of the total of	10-	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters			
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
		10b 11a	Yes	
11a	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		Yes	
11a b	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?		Yes Yes	
11a b 12a	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?	11a		
11a b 12a b	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?	11a	Yes	
11a b 12a b	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?	11a 12a 12b	Yes Yes	No
11a b 12a b	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	11a 12a 12b	Yes Yes	No
11a b 12a b c 13	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?	11a 12a 12b 12c 13	Yes Yes Yes	No
11a b 12a b c 13 14	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?	11a 12a 12b 12c 13	Yes Yes Yes	No
11a b 12a b c 13 14 15	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?	11a 12a 12b 12c 13 14	Yes Yes Yes	No
11a b 12a b c 13 14 15	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?	11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No
11a b 12a b c 13 14 15 a b	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	11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No
11a b 12a b c 13 14 15 a b	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	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b	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?	11a  12a  12b  12c  13  14  15a  15b	Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b	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?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	11a  12a  12b  12c  13  14  15a  15b	Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b 16a b	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?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	11a  12a  12b  12c  13  14  15a  15b	Yes Yes Yes Yes	

State the name, address, and telephone number of the person who possesses the organization's books and records

►THE ORGANIZATION

20

Form 990 (2014)	
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)	a	g	e	7
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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)	( <b>D)</b> 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)

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

(A) Name and Title	(B) Average hours per week (list any hours	more t perso	han d n is l	ne l both	oox, an d	heck unless officer stee)	i	( <b>D)</b> Reportable compensation from the organization (W-	<b>(E)</b> Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) 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)	►	1,602,130	0	1,210,491

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization►13

			Yes	No		
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	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 individual					
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 I for such person	5	Yes	No		

Section	R Ind	anandant	Contractors

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

(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation

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 ►0

Part V			ule O contains a respoi		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts Ets	1a	Federated cam						
ran	b	Membership du	ies 1b	6,634,519				
tributions, Gifts, Grants Other Similar Amounts	С	Fundraising eve	ents <b>1c</b>					
iffs ar /	d	Related organiz	zations 1d					
s, G mil	е	Government grant	s (contributions) <b>1e</b>					
on: Si	f	All other contribution	ons, gifts, grants, and <b>1f</b>					
outi her		sımılar amounts no	ot included above					
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contribution 1a-1f \$	ons included in lines					
Cont and	h	Total. Add lines	s 1 a - 1 f	▶	6,634,519			
				Business Code				
Program Serwce Revenue	2a							
Re√	Ь							
JC 6	С							
Ser.	d							
ını (	е							
ogra	f	All other progra	am service revenue					
査	g	Total. Add lines	s 2a-2f					
	3		ome (including dividen ar amounts)		610,207			610,207
	4		stment of tax-exempt bond	F				
	5	Royalties		▶				
			(ı) Real	(11) Personal				
	6a	Gross rents						
	Ь	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental inco	me or (loss)					
	_	Gross amount	(ı) Securities	(II) Other				
	7a	from sales of assets other than inventory	2,892,772	23,500				
	Ь	Less cost or other basis and	1,221,242	35,487				
	С	sales expenses Gain or (loss)	1,671,530	-11,987				
	d	Net gain or (los	ss)		1,659,543	1,659,543		
ıne	8a	Gross income fevents (not inc	rom fundraising luding					
Other Revenue			s reported on line 1c) ne 18					
the	b	Less direct ex	penses b					
0	c		(loss) from fundraising	events				
	9a		rom gaming activities ne 19 a					
			penses <b>b</b>					
		Net income or of Gross sales of returns and allo		vities▶-				
			a					
		_	oods sold <b>b</b>					
	С		(loss) from sales of inv	· · · · · · · · · · · · · · · · · · ·				
	11a	Miscellaneous		Business Code 900099	96,088			96,088
	11a b	MISCELLANEC	005	300033	30,000			
	c							
	d	All other reven	ue	+				
	e	Total. Add lines			05.005			
	12	Total revenue	See Instructions .		96,088			
					9,000,357	1,659,543	0	706,295

	Page 10					
	Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizat	ons must comr	olete column (A )		
	Check if Schedule O contains a response or note to any line in this		·			
	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	( <b>D</b> ) Fundraising expenses	
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21					
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	389,011				
5	Compensation of current officers, directors, trustees, and key employees	1,602,130				
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	738,810				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,691,503				
9	Other employee benefits					
10	Payroll taxes	193,131				
11	Fees for services (non-employees)					
а	Management					
b	Legal	114,974				
c	Accounting	59,325				
d	Lobbying					
e	Professional fundraising services See Part IV, line 17					
f	Investment management fees	20,981				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)					
12	Advertising and promotion	85,302				
13	Office expenses	288,754				
14	Information technology	15,070				
15	Royalties					
16	Occupancy	460,850				
17	Travel	81,278				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials					
19	Conferences, conventions, and meetings	432,088				
20	Interest	384				
21	Payments to affiliates	132,153				
22	Depreciation, depletion, and amortization					
23	Insurance	76,684				
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	PER CAPITA TAX	1,145,178				
b	GIFTS & CONTRIBUTIONS	426,352				
c	LITIGATION SETTLEMENTS	59,835				
d	TAXES, LICENSES & FEES	19,246				
е	All other expenses					
25	Total functional expenses. Add lines 1 through 24e	8,033,039				
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)					

Form 990 (2014)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X $$ . $$ .			
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing		1	
	2	Savings and temporary cash investments	10,798,616	2	10,664,345
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	4,581	4	4,094
4ssets	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
Š.	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 2,081,383			
	ь	Less accumulated depreciation 10b	2,116,870	10c	2,081,383
	11	Investments—publicly traded securities	20,845,229	11	21,961,469
	12	Investments—other securities See Part IV, line 11	12,000	12	12,000
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	0	15	5,000
	16	Total assets. Add lines 1 through 15 (must equal line 34)	33,777,296	16	34,728,291
	17	Accounts payable and accrued expenses	202,461	17	338,945
	18	Grants payable	,	18	<u>, , , , , , , , , , , , , , , , , , , </u>
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	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		21	
Liabili		persons Complete Part II of Schedule L		22	
ï	23	Secured mortgages and notes payable to unrelated third parties	9,905	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	7,179		762
	26	Total liabilities. Add lines 17 through 25	219,545	26	339,707
s e		Organizations that follow SFAS 117 (ASC 958), check here ► and complete lines 27 through 29, and lines 33 and 34.			<u> </u>
an	27	Unrestricted net assets		27	
	28	Temporarily restricted net assets		28	
_	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.			
O .0	30	Capital stock or trust principal, or current funds	О	30	0
φ	31	Paid-in or capital surplus, or land, building or equipment fund	0	31	0
Š	32	Retained earnings, endowment, accumulated income, or other funds	33,557,751	32	34,388,584
Set Set	33	Total net assets or fund balances	33,557,751	33	34,388,584
Ż	34	Total liabilities and net assets/fund balances	33,777,296	34	34,728,291
			1,,250		Form <b>990</b> (2014)

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				. [
	Total manager (manager) Boot WIVI and have 420				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		9,0	00,357
2	Total expenses (must equal Part IX, column (A), line 25)	2		8.0	33,039
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3		9	67,318
7	Let assets of fully balances at beginning of year (must equal r are x, fine 33, column (x))	4		33,5	57,751
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities				
-	T	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)				
		9		- 1	36,485
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		34,3	888,584
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. F
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ved o	n		
	▼ Separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separ basis, consolidated basis, or both	rate			
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	ne <b>2c</b>		No
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				_
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	!	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

Software ID: **Software Version:** 

**EIN:** 43-0560620

Name: UNITED ASSOCIATION OF JOURNEYMEN OF THE

PLUMBING & PIPEFITTING INDUSTRY L562

Name and Titls	Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
Comparison		A verage hours per week (list any hours	more the person and a	Position (do not of more than one box person is both an and a director/tru			inless fficer tee)		Reportable compensation from the organization (W-	Reportable compensation from related organizations (W-	Estimated amount of other compensation from the
Company   Comp		organizations below	Individual trustee or director	Institutional Trustee	Officei	Ke, emplojee	Highest compensated employee	Former	2/1099-14130)	2/1099-1413C)	related
The Performance   200			×		х				3,072	0	0
DESCRIPTION PARKED   SS 00	(1) FRED J CREAMER		\ \ \ \		×				3 608	0	0
SUBSISTER AGENT/PERCUTIVE DOADO   S   S   S   S   S   S   S   S   S	EXECUTIVE BOARD (2) RICHARD M KELLETT	55 00							·		85,995
VACE PRESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESIDENT/RESI	BUSINESS AGENT/EXECUTIVE BOARD										
X	VICE PRESIDENT/BUSINESS AGENT/EXECUTIVE BOARD		X		Х				108,513	0	85,740
CO   MARS ARKEMER IR			x		х				3,608	0	0
Finance Committee	(5) JAMES ABKEMEIER JR				х				1,622	0	0
C) LARY BAKER IR	(6) RON ARBUTHNOT				х				2,847	0	0
(6) CHESTOPHER READN CHUMLEY (6) 00 ASSISTANT TO THE BUSINESS MANAGER (7) MARK I COLOM (7) MARK I COLOM (7) MARK I COLOM (8) MARK I COLOM (10) WILLIAM I DOHERTY IR (11) MARK A FOREY (12) PAULE CALLAGABER (12) PAULE CALLAGABER (13) SEPPER P CARAIRE (14) MARK A FOREY (13) SEPPER P CARAIRE (14) MARK A FOREY (14) MARK A FOREY (15) FOR ADD (15) F	(7) LARRY BAKER JR				х				3,942	0	0
CO   MARK   COLLOM   COLLOM   COLLOM   COLLOW	(8) CHRISTOPHER BRIAN CHUMLEY				х				126,549	0	93,040
DIRECTOR OF TRAINING/EXAMINING BOADD	(9) MARK J COLLOM				v				2 500	0	0
INSIDE GUARD	DIRECTOR OF TRAINING/EXAMINING BOARD (10) WILLIAM J DOHERTY JR	2 00							·		0
BUSINESS AGENT	INSIDE GUARD (11) MARK A FOHEY	55 00									
EXAMINING BOARD	BUSINESS AGENT (12) PAUL E GALLAGHER								·		·
Name	EXAMINING BOARD				×				100	0	0
X					Х				106,450	0	85,050
X					x				107,691	0	85,410
Comparison   Com					х				100	0	0
Column   C	(16) DAVID HOLMES JR	1			х				79,064	0	69,091
The image of the	(17) PHILLIP L JONES				х				2,858	0	0
Column   C	(18) CHRISTOPHER KNIGHT				Х				3,108	0	0
EXAMINING BOARD	(19) JOHN F KNOTT	1			X				200	0	0
BUSINESS AGENT	EXAMINING BOARD (20) JAMES J LANE	55 00								0	84.060
INSIDE GUARD	BUSINESS AGENT (21) MICHAEL LARRIGAN										
X   3,772   0	INSIDE GUARD				×				2,858	0	0
X   106,154   0   85,00	RECORDING SECRETARY				х				3,772	0	0
	BUSINESS AGENT				х				106,154	0	85,005
X					х				2,350	0	0

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

compensated Employees, and inde	P	i					ı	1	
(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-	<b>(E)</b> Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individual trustae or director	Former Highest compensated employee Key employee Officer Institutional Trustee		Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations	
(26) BRIAN J NICHOLS BUSINESS AGENT/FINANCE COMMITTEE	55 00			х			108,646	0	85,837
(1) MICHAEL O'LAUGHLIN	65 00								
ASSISTANT BUSINESS MANAGER	1 00			Х			126,930	0	93,197
(2) JOHN J O'MARA BUSINESS MANAGER/SECRETARY-TREASURER	75 00 1 00			х			147,645	0	101,266
(3) KEVIN O'MARA FINANCE COMMITTEE	2 00			х			4,803	0	0
(4) SCOTT E RAMSHAW GOVERNMENT RELATIONS & BUSINESS DEVELOPMENT	55 00			х			108,740	0	85,800
(5) MARK E REESE EXAMINING BOARD	2 00			х			2,308	0	0
(6) JOHN R REITER JR BUSINESS AGENT	55 00			х			105,939	0	84,990
(7) DONALD SUMMERS JR ASSISTANT DIRECTOR OF TRAINING JATC	50 00			х			2,508	0	0

DLN: 93493225027455

Cat No 50084S Schedule C (Form 990 or 990-EZ) 2014

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, line 35c (Proxy Tax) (see separate instructions), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

	me of the organization	- THE			Employer iden	ntification numbe	r
	TED ASSOCIATION OF JOURNEYMEN OF MBING & PIPEFITTING INDUSTRY L562				43-0560620	ı	
Par	t I-A Complete if the or	ganization is exempt under	section 501(				1.
1	Provide a description of the ord	ganızatıon's dırect and ındırect politic	cal campaign act	ivities in Par	t IV		
2	Political expenditures	-	. 5		<b>.</b>	\$	
3	Volunteer hours						
		ganization is exempt under					
1	·	e tax incurred by the organization und			•	\$	
2	·	e tax incurred by organization manag		n 4955	▶-	\$	
3	_	ection 4955 tax, did it file Form 472	0 for this year?			☐ Yes	No
4a	Was a correction made?					☐ Yes	No
b	If "Yes," describe in Part IV		costion FO4/	-\		\4 (-\(2\)	
		ganization is exempt under				)1(c)(3).	
1		ended by the filing organization for se				\$	
2	Enter the amount of the filing o exempt function activities	rganization's funds contributed to ot	her organizations	s for section	527 <b>►</b>	\$	132,153
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line	17b ►	\$	132,153
4	Did the filing organization file <b>F</b>	Form 1120-POL for this year?				☐ Yes	✓ No
5	organization made payments f amount of political contribution	nd employer identification number (E: For each organization listed, enter the ns received that were promptly and d political action committee (PAC) If	e amount paid fro irectly delivered	om the filing o to a separate	organization's e political orga	funds Also enter anızatıon, such as	the
	(a) Name	(b) Address	(c) EIN	filing or	unt paid from ganization's one, enter -0-	(e) A mount of contributions in and promptly directly delived separate porganization enter -0	received y and red to a litical If none,
For F	Paperwork Reduction Act Notice, se	e the instructions for Form 990 or 990	- <b>EZ.</b> (	Cat No 500849	Schedule C (		F7\2014

5 c	hedule C (Form 990 or 990-EZ) 2014					Page <b>2</b>
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	00		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	ır - 0 -				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	<b>(c)</b> 2013	( <b>d)</b> 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

Grassroots lobbying expenditures

	rt II-B Complete if the organization filed Form 5768 (election un	is exempt under section 501(c)(3) and has lader section 501(h)).	-			
For e	each "Yes" response to lines 1a through 1i below, pr	ovide in Part IV a detailed description of the lobbying	(a	a) 	(b	)
activ	rity.		Yes	No	Amo	unt
1 a	legislation, including any attempt to influence performs the use of Volunteers?	mpt to influence foreign, national, state or local public opinion on a legislative matter or referendum,				
b C	Paid staff or management (include compensation Media advertisements?	on in expenses reported on lines 1c through 1i)?				
d	Mailings to members, legislators, or the public	7				
е	Publications, or published or broadcast statem	ents?				
f	Grants to other organizations for lobbying purp	oses?				
g	Direct contact with legislators, their staffs, gov	vernment officials, or a legislative body?				
h i	Rallies, demonstrations, seminars, conventions Other activities?	s, speeches, lectures, or any sımılar means?				
j	Total Add lines 1c through 1i		_			
2a	Did the activities in line 1 cause the organizati					
b	If "Yes," enter the amount of any tax incurred t			ļ		
C	If "Yes," enter the amount of any tax incurred b		_			
d	If the filing organization incurred a section 491					
Par	t III-A Complete if the organization 501(c)(6).	is exempt under section 501(c)(4), section	<b>501(c</b> )	)(5), o	r secti	ion
	301(0)(0).				Ye	s No
1	Were substantially all (90% or more) dues rec	eived nondeductible by members?			1	No
2	Did the organization make only in-house lobby				2 Yes	s
3	Did the organization agree to carry over lobbying	ng and political expenditures from the prior year?			3	No
Par		is exempt under section 501(c)(4), section ! OTH Part III-A, lines 1 and 2, are answered "				
1	Dues, assessments and similar amounts from	members	1			
2	Section 162(e) nondeductible lobbying and polexpenses for which the section 527(f) tax was	itical expenditures (do not include amounts of political spaid).				
а	Current year		2a			
b	Carryover from last year		2b			
C	Total		2c			
3		)(1)(A) notices of nondeductible section 162(e) dues	3			
4		exceeds the amount on line 3, what portion of the excess reasonable estimate of nondeductible lobbying and	4			
5	Taxable amount of lobbying and political expen	nditures (see instructions)	5			
Pa	art IV Supplemental Information					
	ovide the descriptions required for Part I-A, line 1 (see instructions), and Part II-B, line 1 Also, con	1 , Part I-B, line 4 , Part I-C , line 5 , Part II-A (affiliated groun nplete this part for any additional information	up list),	Part II-	A , lines	1 and
	Return Reference	Explanation				

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

#### DLN: 93493225027455

OMB No 1545-0047

Open to Public

# **SCHEDULE D**

(Form 990)

► 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.

**Supplemental Financial Statements** 

Inspection

► Attach to Form 990. Department of the Treasury Information about Schedule D (Form 990) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>. Internal Revenue Service

	t <b>he organization</b> SOCIATION OF JOURNEYMEN OF THE			Employer identificat	ion numbe	er
	& PIPEFITTING INDUSTRY L562			43-0560620		
art I	Organizations Maintaining Donor Advorganization answered "Yes" to Form 990,	Part IV, line 6.			•	
		(a) Donor advised fu	inds	(b) Funds and o	theraccou	ınts
	number at end of year					
	egate value of contributions to (during year)					
	egate value of grants from (during year)					
A ggre	egate value at end of year					
	he organization inform all donors and donor adviso are the organization's property, subject to the org			advised	┌ Yes	┌ No
used	he organization inform all grantees, donors, and do only for charitable purposes and not for the benefi erring impermissible private benefit?				┌ Yes	┌ No
rt II	Conservation Easements. Complete if	the organization answere	ed "Yes" to I	Form 990, Part IV	, lıne 7.	_
☐ PI ☐ PI ☐ Comp	ose(s) of conservation easements held by the organic reservation of land for public use (e.g., recreation rotection of natural habitat reservation of open space plete lines 2a through 2d if the organization held a	or education)	vation of an hi vation of a cer	storically important tified historic struct form of a conservat	ure	
easer	ment on the last day of the tax year					
Tatal	number of concernation operator		<u> </u>	Held at the	End of the	Year
	number of conservation easements			2a		
	acreage restricted by conservation easements			2b		
	per of conservation easements on a certified histo	, ,	<u></u> ⊢	2c		
	per of conservation easements included in (c) acq ric structure listed in the National Register	aired after 8/1//06, and not		2d		
Numb	ber of conservation easements modified, transferre	ed, released, extinguished, o	r terminated l	by the organization o	luring	
the ta	ax year 🛌					
Numb	ber of states where property subject to conservati	on easement is located 🛌		_		
	the organization have a written policy regarding t cement of the conservation easements it holds?	ne periodic monitoring, inspe	ection, handlir	ng of violations, and	┌ Yes	┌ No
Staff <b>►</b>	and volunteer hours devoted to monitoring, inspec	ting, and enforcing conserva	ation easemei	nts during the year		
A moi	 unt of expenses incurred in monitoring, inspecting	and enforcing conservation	easements d	uring the year		
		and omeromy conservation		g , c		
Does	each conservation easement reported on line 2(d section 170(h)(4)(B)(ii)?	) above satisfy the requirem	ents of sectio	on 170(h)(4)(B)(ı)	┌ Yes	┌ No
balan	irt XIII, describe how the organization reports con ice sheet, and include, if applicable, the text of the rganization's accounting for conservation easeme	footnote to the organization				
rt III	Organizations Maintaining Collections Complete if the organization answered "Ye			Other Similar A	\ssets.	
works	e organization elected, as permitted under SFAS 1 s of art, historical treasures, or other similar asset ce, provide, in Part XIII, the text of the footnote to	s held for public exhibition, e	education, or	research in furtherai		
works	e organization elected, as permitted under SFAS 1 s of art, historical treasures, or other similar asset ce, provide the following amounts relating to these	s held for public exhibition, e				lıc
(i) <sub>Re</sub>	evenue included in Form 990, Part VIII, line 1			<b>►</b> \$		
(ii) ∆	ssets included in Form 990, Part X			<b>►</b> \$		
Ifthe	e organization received or held works of art, histori ving amounts required to be reported under SFAS :			- 1	e the	
	nue included in Form 990. Part VIII. line 1			<b>b</b> - ¢		

**b** Assets included in Form 990, Part X

Part IV. Ine 9, or reported an amount on Form 990, Part X, line 21.  I set her organization an agent, fustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  If "Yes," explain the arrangement in Part XIII and complete the following table	Part	Organizations Maintaining Co	llections of Art,	<u>, His</u>	tori	cal T	<u>reasu</u>	ires, or O	the	r Simila	ar As	sets (c	<u>ontınued)</u>
b   Scholarly research   e   Other	3		on, and other record	ds, ch	neck	any of	the foll	owing that a	are a	significa	nt use	of its	
Preservation for future generations  4 Provide a description of the organizations collections and explain how they further the organization's exempt purpose in Part XIII  5 During the year, did the organization solicit or receive donations of art, histonical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part XIII assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part XIII to the organization and part XIII and complete the following table  1 Is the organization and agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XIII and complete the following table  1 If "Yes," explain the arrangement in Part XIII and complete the following table  2 Beginning balance  3 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes If Ending balance  2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes If Ending balance  3 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes If Ending balance  4 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes If Ending balance  5 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes If Ending balance  6 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes If If Ending balance If Endowment Funds. Complete if the organization has been provided in Part XIII If the organization answered "Yes" to Form 990, Part X, line 10.  1 Description of focilities and programs  2 Did the organization of the current year end balance (line 1g, column (a)) held as  3 Board designated or quasis-endowment Funds not in the	а	Public exhibition		d	Γ	Loan	orexc	hange progr	rams	5			
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII  5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?    Yes   Part IV   Intel 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.    Is the organization an angent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?    If Yes   Part IV   Intel 9, or reported an amount on Form 990, Part X, line 21.   If Yes, explain the arrangement in Part XIII and complete the following table    C	b	Scholarly research		е	Γ	Othe	r						
Part XII  Source the sold to raise funds rather than to be maintained as part of the organization's collection?  Part XIV Excrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part XI, line 9, or reported an amount on Form 990, Part X, line 21.  Is It he organization an assent, trustee, custodian or other intermediary for contributions or other assets not include on Form 990, Part X?  If 'Yes,' explain the arrangement in Part XIII and complete the following table  Complete if the organization during the year and different part XIII and complete the following table  Complete if the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Complete if the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Complete if the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  Contributions  Contribution	С	Preservation for future generations											
assets to be sold to raise funds rether than to be maintained as part of the organization?	4		llections and explai	ın hov	w the	y furth	er the d	organization	ı's ex	xempt pur	poseı	n	
Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIII and complete the following table  C Beginning balance  d Additions during the year  1e		assets to be sold to raise funds rather than t	o be maintained as i	part o	of the	organ	ızatıon	's collection	۱?				┌ No
included on Form 990, Part X?    Fives, "explain the arrangement in Part XIII and complete the following table	Par							n answere	d "Y	es" to Fo	orm 9	90,	
c Beginning balance  d Additions during the year  e Distributions during the year  f Ending balance  2a Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?  7 Yes	1a		ıan or other ınterme	dıary	forc	ontribi	utions	or other ass	ets	not	ſ	_ Yes	┌ No
d Additions during the year    Distributions during the year   Distributions during the year   Distributions during the year   Distributions during the year   Distributions during the year   Distributions during the year   Distributions during the year   Distributions during the year   Distributions during the year   Distributions during the year   Distributions	b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	ving 1	able							
Additions during the year   Ending balance   Ending bal											Am	ount	
Distributions during the year   16   17   18   19   19   19   19   19   19   19	С	Beginning balance						L	<b>1</b> c				
Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	d	Additions during the year							1d				
Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?    Type	е	Distributions during the year							1e				
b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII	f	Ending balance							1f				
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Contributions   Complete   Co	_										·		┌ No
a) Current year (b) Print years back (d) Three years back (e) Four years back (e) Fou													<u>'</u>
b Contributions	Fe	complete i										<b>(e)</b> Four y	ears back
d Grants or scholarships	1a	Beginning of year balance											
d Grants or scholarships	b	Contributions											
e Other expenditures for facilities and programs	С	Net investment earnings, gains, and losses											
and programs	d	Grants or scholarships							+				
provide the estimated percentage of the current year end balance (line 1g, column (a)) held as  a Board designated or quasi-endowment ▶  b Permanent endowment ▶  The percentages in lines 2a, 2b, and 2c should equal 100%  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations	e	'											
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as  Board designated or quasi-endowment ▶  Permanent endowment ▶  The percentages in lines 2a, 2b, and 2c should equal 100%  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations	f	Administrative expenses											
Board designated or quasi-endowment ►  Permanent endowment ►  Temporarily restricted endowment ►  The percentages in lines 2a, 2b, and 2c should equal 100%  Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations	g	End of year balance											
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 organization that are held and administered for the organization by  (i) unrelated organizations	2	Provide the estimated percentage of the curr	ent year end balanc	e (lın	ie 1g	, colun	nn (a))	held as					
Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c should equal 100%  Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations	а	Board designated or quasi-endowment 🕨											
The percentages in lines 2a, 2b, and 2c should equal 100%  Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations	b	Permanent endowment ►											
organization by (i) unrelated organizations	c	• •	ıld equal 100%										
(i) unrelated organizations	За	Are there endowment funds not in the posses	ssion of the organiza	ation	that	are hel	d and a	administere	d for	the			
(ii) related organizations													No
b If "Yes" to 3a(II), are the related organizations listed as required on Schedule R? 3b   4 Describe in Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book variation (d) Book va					•				•				<del>                                     </del>
Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  Description of property  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value of the basis (other)  Description of property  (d) Book value of the basis (other)  Description of property  (e) Accumulated depreciation  (f) Book value of the basis (other)  Description of property  (g) Accumulated depreciation  (h) Book value of the basis (other)  Description of property  (h) Book value of the basis (other)  Description of property  (h) Book value of the basis (other)  Description of property  Description of property  (h) Book value of the basis (other)  Description of property  Des	h	• •							•		-		<del>                                     </del>
Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book va  42,698  42,698  452,211  452  c Leasehold improvements  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book va  42,698  452,211  452  682,218  682			•				•		•			<u> </u>	
Description of property   (a) Cost or other basis (investment)   (b)Cost or other basis (other)   (c) Accumulated depreciation   (d) Book value	Par	t VI Land, Buildings, and Equipme	<b>nt.</b> Complete if t				n ansv	wered 'Yes	' to	Form 99	0, Pa	rt IV, lı	ne
b Buildings       452,211       452         c Leasehold improvements       682,218       682         d Equipment       904,256       904			<u></u>									( <b>d</b> ) Bo	ook value
b Buildings	1a	_and						42,	,698				42,698
<b>d</b> Equipment	b I	Buildings						452,	,211				452,211
	c I	_easehold improvements						682,	,218				682,218
- Other	d I	Equipment						904,	,256				904,256
<b>e</b> Other	_e	Other	<u> </u>	<u>.                                      </u>									
					ımn (	B), line	10(c).)	)			<b> -</b>		2,081,383

Part VII Investments—Other Securities. Co	mplete 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 valuation
(including name of security)		Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
		+
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>F</b>	
Part VIII Investments—Program Related. C	omplete if the organizatio	on answered 'Yes' to Form 990, Part IV, line 11
See Form 990, Part X, line 13.	(h) Daale value	(a) Mathadas valuation
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		,
		+
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<b>*</b>	
	on answered 'Yes' to Form 99	0, Part IV, line 11d See Form 990, Part X, line 15
(a) Desc	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line		
Part X Other Liabilities. Complete if the org Form 990, Part X, line 25.	anization answered 'Yes' t	to Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes	-	1
UAPEC PAYABLE	425	
PAYROLL TAXES PAYABLE	337	
		1
		1
		1
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	762	
2 Liability for uncertain tay positions. In Part VIII provide	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	1

Par		<b>evenue per Audited Financial Stat</b> vered 'Yes' to Form 990, Part IV, line 1		is with Revenue	рег к	<b>eturn</b> Complete i
L		er support per audited financial statements			1	
	Amounts included on line 1 bu	it not on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses)	on investments	2a			
b	Donated services and use of f	acılıtıes	2b			
С	Recoveries of prior year grant	s	2c			
t	Other (Describe in Part XIII )		2d			
•	Add lines <b>2a</b> through <b>2d</b> .				2e	
	Subtract line ${f 2e}$ from line ${f 1}$ .				3	
	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1				
3	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII )		4b			
2	Add lines <b>4a</b> and <b>4b</b>				4c	
	Total revenue Add lines <b>3</b> and	d <b>4c.</b> (This must equal Form 990, Part I, line	12).		5	
art		xpenses per Audited Financial Sta		nts With Expense	s per	Return. Comple
		swered 'Yes' to Form 990, Part IV, line			<del> </del>	T
	·	raudited financial statements			1	
		it not on Form 990, Part IX, line 25	1 -	I		
1		acılıtıes	2a			
)	· -		2b			
0			2c			
d	Other (Describe in Part XIII)		2d			
9	<u>-</u>				2e	
					3	
		0, Part IX, line 25, but not on line 1:		ı		
3	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	4a			
)	Other (Describe in Part XIII)		4b			
2					4c	
		nd <b>4c.</b> (This must equal Form 990, Part I, lin	e 18 )		5	
	Supplemental Inf					
art		Part II, lines 3, 5, and 9, Part III, lines 1a , lines 2d and 4b, and Part XII, lines 2d and				de any addıtıonal
	Return Reference	Explanation				

•	<u> </u>							
Part XIII Supplemental Information (continued)								
Ret	turn Reference	Explanation						

Schedule D (Form 990) 2014

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DLN: 93493225027455

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990.

**Compensation Information** 

Open to Public Inspection

Internal Revenue Service Name of the organization UNITED ASSOCIATION OF JOURNEYMEN OF THE

PLUMBING & PIPEFITTING INDUSTRY L562

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

**Employer identification number** 

43-0560620

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel  Housing allowance or residence for personal use			
	Tax idemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-based compensation arrangement?	<b>4</b> c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		
b	Any related organization?	5b		
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

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

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	<b>(B)</b> Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of	<b>(F)</b> Compensation in
	(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	column(B) reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2014

#### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Return Reference Explanation

Schedule J (Form 990) 2014

Software ID:

**Software Version:** 

**EIN:** 43-0560620

Name: UNITED ASSOCIATION OF JOURNEYMEN OF THE

PLUMBING & PIPEFITTING INDUSTRY L562

### Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Breakdown of (i) Base Compensation	f W-2 and/or 1099-MISC compensation  (ii) Bonus & (iii) Other  Incentive reportable  compensation compensation		(C) Retirement and other deferred compensation	( <b>D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990	
1 RICHARD M KELLETT, BUSINESS AGENT/EXECUTIVE BOARD	(I) (II)	109,274 0	0 0	0	85,995 0	0	195,269 0	0 0
MICHAEL J O'CONNELL III,     VICE PRESIDENT/BUSINESS     AGENT/EXECUT	(I) (II)	108,513 0	0 0	0 0	85,740 0	0	194,253 0	0 0
2 CHRISTOPHER BRIAN CHUMLEY, ASSISTANT TO THE BUSINESS MANAGER	(I) (II)	126,549 0	0 0	0 0	93,040 0	0	219,589 0	0 0
3 MARK A FOHEY, BUSINESS AGENT	(I) (II)	106,602 0	0 0	0	85,110 0	0	191,712 0	0 0
4 STEPHEN P GARNER, BUSINESS AGENT	(I) (II)	106,450 0	0	0 0	85,050 0	0 0	191,500 0	0 0
5 MICHAEL P GRADY, BUSINESS AGENT	(ı) (ıı)	107,691 0	0 0	0 0	85,410 0	0	193,101 0	0 0
<b>6</b> JAMES J LANE, BUSINESS AGENT	(I) (II)	106,011 0	0	0 0	84,960 0	0	190,971 0	0
7 MARK V MORGAN, BUSINESS AGENT	(I) (II)	106,154 0	0	0 0	85,005 0	0	191,159 0	0
8 BRIAN J NICHOLS, BUSINESS AGENT/FINANCE COMMITTEE	(I) (II)	108,646 0	0 0	0 0	85,837 0	0	194,483 0	0 0
<b>9</b> MICHAEL O'LAUGHLIN, ASSISTANT BUSINESS MANAGER	(I) (II)	126,930 0	0 0	0	93,197 0	0	220,127 0	0 0
10 JOHN J O'MARA, BUSINESS MANAGER/SECRETARY- TREASURER	(I) (II)	147,645 0	0 0	0	101,266 0	0	248,911 0	0 0
11 SCOTT E RAMSHAW, GOVERNMENT RELATIONS & BUSINESS DEVE	(I) (II)	108,740 0	0	0	85,800 0	0	194,540 0	0
12 JOHN R REITER JR, BUSINESS AGENT	(I) (II)	105,939 0	0	0	84,990 0	0	190,929	o 0

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DLN: 93493225027455

OMB No 1545-0047

#### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **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. ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the or		VMEN OF THE	:					E	Employ	er ident	ificatio	n numbe	er	
PLUMBING & PIPE									13-05	60620				
Part I Exc	ess Benefi	t Transa	ctions	(section	501(c)(3),	section 501(c	)(4), and 501				only)			
						, Part IV, line					V, line			
<b>1 (a)</b> Nan	ne of disqualifi	ed person	(b) F		•	disqualified	<b>(c)</b> Desc	ription	of tra	nsaction	L	(d) Correc		
				person	and organiz	ation						Yes	No	
4958 . 3 Enter the  Part III  Loans to a	amount of tax  nd/or From ne organization	, if any, on  n Interes	sted P	ersons	mbursed by  90-EZ, Par	lisqualified per • • • • the organizati t V, line 38a, c	on	. <u>.</u>	· ·	<b>▶</b> \$		anızatıo		
(a) Name of interested person	( <b>b)</b> Relation with organiz	ation Purp	(c) oose of oan	(d) Loai or from organizat	the	(e)Original principal amount	<b>(f)</b> Balance due	(g) defa		(h) Approv by boar commit	ved d or	(i)Wr agreen		
				То	From			Yes	No	Yes	No	Yes	No	
	nterested		<b>Benet</b> ation a anship b	nswered between	"Yes" on	<b>Persons.</b> Form 990, Pa			istanc	e ( <b>e</b> )	) Purpos	se of ass	sistance	
	, ii		inizatio											

Part IV	<b>Business Transactions Involving Interested Person</b>	ons.
	Complete of the augustical angus and IIVaall on Farms Of	<b>ΛΛ</b> Γ

Complete if the organization	on answered "Yes" on F	Form 990, Part IV, lin	e 28a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	<b>(c)</b> A mount of transaction	(d) Description of transaction	of organiza revenu	
				Yes	No
(1) JAMES E O'MARA II	JAMES O'MARA II HAS A FAMILY RELATIONSHIP WITH JOHN O'MARA, AN OFFICER	52,255	COMPENSATION		No

Part V	Supplemental Info	rmation

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2014

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DLN: 93493225027455

OMB No 1545-0047

2014

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

# 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.

Name of the organization UNITED ASSOCIATION OF JOURNEYMEN OF THE PLUMBING & PIPEFITTING INDUSTRY L562

Employer identification number

43-0560620

#### 990 Schedule O, Supplemental Information

Return Reference Explanation						
FORM 990, PART VI, SECTION A, LINE 2	THERE IS A FAMILY RELATIONSHIP BETWEEN JOHN O'MARA AND KEVIN O'MARA					
FORM 990, PART VI, SECTION A, LINE 6	THERE ARE 3,899 MEMBERS					
FORM 990, PART VI, SECTION A, LINE 7A	THE MEMBERS ARE ELIGIBLE TO VOTE					
FORM 990, PART VI, SECTION B, LINE 11	A COPY OF THE FINAL VERSION OF THE FORM IS PROVIDED TO THE ORGANIZATION'S GOVERNING BODY FOR THEIR REVIEW PRIOR TO FILING					
FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION'S CONFLICT OF INTEREST POLICY COVERS THE BUSINESS MANAGER AND BUSINESS AG ENTS FOR EACH INTEREST DISCLOSED TO THE BUSINESS MANAGER, HE WILL DETERMINE WHETHER TO A ) TAKE NO ACTION B) ASSURE FULL DISCLOSURE TO THE EXECUTIVE BOARD AND OTHER INDIVIDUALS C OVERED BY THIS POLICY C) ASK THE PERSON TO RECUSE FROM PARTICIPATION IN RELATED DISCUSSIO NS OR DECISIONS WITHIN THE UNION D) ASK THE PERSON TO RESIGN FROM HIS OR HER POSITION IN THE UNION THE UNION'S BUSINESS MANAGER WILL MONITOR PROPOSED OR ONGOING TRANSACTIONS FOR CONFLICTS OF INTEREST AND DISCLOSE THEM TO THE EXECUTIVE BOARD IN ORDER TO DEAL WITH POTEN TIAL OR ACTUAL CONFLICTS, WHETHER DISCOVERED BEFORE OR AFTER THE TRANSACTION HAS OCCURRED					
FORM 990, PART VI, SECTION 6.	SINCE THE UNION IS SUBJECT TO AN INTERNATIONAL CONSTITUTION AND ITS BY-LAWS, COMPENSATION  OF OFFICERS AND BUSINESS AGENTS IS SET BY THOSE DOCUMENTS AND PROCEDURES EMPLOYEE COMPENS ATION IS REVIEWED AND APPROVED BY THE BUSINESS MANAGER, PROVIDED THAT PERSONS WITH CONFLIC TS OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT AT ISSUE ARE NOT INVOLVED IN T HIS REVIEW AND APPROVAL THE BUSINESS MANAGER WILL REPORT HIS DECISION TO THE EXECUTIVE BO ARD THERE IS CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING WITH RESPECT TO THE DELIBERA TIONS AND DECISIONS REGARDING THE COMPENSATION ARRANGEMENT					
FORM 990, PART VI, SECTION C, LINE 19	NO DOCUMENTS AVAILABLE TO THE PUBLIC					
FORM 990, PART XI, LINE 9	INCREASE IN ACCOUNTS PAYABLE, NOT IN EXPENSES -136,485					

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DLN: 93493225027455

2014

OMB No 1545-0047

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**SCHEDULE R** (Form 990)

**Related Organizations and Unrelated Partnerships** 

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

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

Department of the Treasury Internal Revenue Service

Name of the organization UNITED ASSOCIATION OF JOURNEYMEN OF THE PLUMBING & PIPEFITTING INDUSTRY L562

**Employer identification number** 

43-0560620

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

(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	( <b>d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one Part II or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	<b>(f)</b> Direct controlling entity	(g) Section 512(b) (13) controlled entity?	
						Yes	No
	POLITICAL ACTION COMMITTEE	МО	=		N/A		No

Yes No

Yes

No

Part III	Identification of Related Organizations Taxable a because it had one or more related organizations treated.				atıon ansv	vered "Yes	s" on Form	990, Part I	V, line 34	4
	(a) Name, address, and EIN of related organization	(c) Legal domicile (state or foreign country)	,	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		allocations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	I	<b>(k)</b> Percentage ownership
				,						

Part IV	Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV,
	line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512	
related organization		domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	
		(state or foreign		corp,		assets		controlled	
		country)		or trust)				entity?	
								Yes	No

Part V Transactions With Related Organizations Complete if the organization answer	red "Yes" on Form	n 990, Part IV, lin	e 34, 35b, or 36.		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more re-	ated organizations li	sted in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)			1b		No
<b>c</b> Gift, grant, or capital contribution from related organization(s)			1c		No
<b>d</b> Loans or loan guarantees to or for related organization(s)			1d		No
e Loans or loan guarantees by related organization(s)			1e		No
f Dividends from related organization(s)			1f		No
g Sale of assets to related organization(s)			<b>1</b> g		No
h Purchase of assets from related organization(s)			1h		No
i Exchange of assets with related organization(s)			1i		No
j Lease of facilities, equipment, or other assets to related organization(s)			<u>1j</u>		No
k Lease of facilities, equipment, or other assets from related organization(s)			1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)			11		No
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)			1m	1	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1n	ı	No
• Sharing of paid employees with related organization(s)			10		No
P Reimbursement paid to related organization(s) for expenses			1p		No
<b>q</b> Reimbursement paid by related organization(s) for expenses			1q		No
r Other transfer of cash or property to related organization(s)			1r	Yes	
s Other transfer of cash or property from related organization(s)			1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	overed relationships	and transaction thresholds		
(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	<b>(d)</b> Method of determining amount	involve	d
	1	1			

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

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

1 <u> </u>													
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	so 50 organ	(e) all partners section 01(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionat allocations?	7	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
	<u> </u>	<u> </u>	514)	Yes	No	1	<u> </u>	Yes	No		Yes	No	
								<u>,                                    </u>	$\Box$	1			

Schedule R (Form 990) 2014

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2014

Page **5** 

# Form **3115**

(Rev December 2009)
Department of the Treasury
Internal Revenue Service

# **Application for Change in Accounting Method**

OMB No 1545-0152

Internal Rev	renue Service							
Name of f	ller (name of parent corporation if a consolic	dated group) (see instructions)		Identification number (see	e instructions)			
	D ASSOCIATION OF JOURNEYN	IEN OF THE PLUMBING	&		43-0560620			
PIPEFI	TTING INDUSTRY L562			Principal business activity	•	structions)		
			<del></del>		900099			
	street, and room or suite no If a P O box, si	ee the instructions		Tax year of change begins		01/01/		
	LARIMORE RD.			Tax year of change ends (N	· · · · · · · · · · · · · · · · · · ·	12/31/2	<u> 2014</u>	
•	vn, state, and ZIP code			Name of contact person (se	e instructions)			
	UIS, MO 63138-3806			JAMES D. HUBER				
Name of a	ipplicant(s) (if different than filer) and identifi	cation number(s) (see instruction	ns)		Contact person's	•		ber
		<del></del>				<u>55-5500</u>		
	oplicant is a member of a consolid	<u> </u>						
	2848, Power of Attorney and Dec	•		•		818	_	
	l), check this box the box to indicate the type of a					<u> P L</u>		
	·	· ·	1	Check the appropriate			-	
_	vidual	Cooperative (Sec. 1:		of accounting method see instructions)	change being	request	ea.	
	oration	Partnership	'	•	ertiration.			
	trolled foreign corporation : 957)	S corporation	916(a)) L	Depreciation or Amo		A ativitua		
	·	☐ Insurance co. (Sec.	-	☐ Financial Products a Financial Institutions		Activitie	SOI	
	60 corporation (Sec. 904(d)(2)(E))	<ul><li>☐ Insurance co. (Sec.</li><li>☐ Other (specify) ►</li></ul>	·   -		•			
	lified personal service poration (Sec. 448(d)(2))	☐ Other (specify) ►		☐ Other (specify) ►				
-	mpt organization. Enter Code sect	tion <b>&gt;</b> 501(a)(5)						
			ounting the te	avnavor muot aravida all inf	armation that is rai	lovant to t	ho tay	novor
	. To be eligible for approval of the reque taxpayer's requested change in method of							
	axpayer's requested change in method to any other information that is not spec		i iiiiviiiiauvii i	equested on this Form ST	o (including its ii	istraction	noj, a	3
	expayer must attach all applicable		ts requested	d throughout this form.				
Part I	Information For Automatic	Change Request						
	Inter the applicable designated auto		change num	ber for the requested au	tomatic change.	Enter	Yes	No
	only one designated automatic acco						150 T	15.3
	RS. If the requested change has no						智慧	
k	ooth a description of the change and	l citation of the IRS guidant	ce providing	the automatic change. S	ee instructions	1	<b>张德</b> 等	經過
1	(a) Change No. 184,186,192	(b) Other Descript	tion ▶			Į.	983	基础
	Do any of the scope limitations d			oc. 2008-52 cause auto	matic consent	to be		
	unavailable for the applicant's requ						Partition of	1
Note.	Complete Part II below and then P	art IV, and also Schedule:	s A through	E of this form (if applic	able).		清電	常門
Part II	Information For All Reques	sts					Yes	No
3 [	Did or will the applicant cease to	o engage in the trade o	r business	to which the requeste	d change relate	es, or		
t	erminate its existence, in the tax y	ear of change (see instru	ctions)? .			[		1
I	f "Yes," the applicant is not eligibl	e to make the change un	der automa	tic change request pro-	cedures.	[	1.50	
4a [	Does the applicant (or any presen	t or former consolidated	group in wh	ich the applicant was a	a member durin	g the		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	applicable tax year(s)) have any Fe	ederal income tax return(s	) under exa	mination (see instructio	ons)?	· . [		<b>✓</b>
	If "No," go to line 5."					,		
	s the method of accounting the a							13. 24
	any present or former consolidate				pplicable tax y	ear(s))	بنكدت	, ,
	either (i) under consideration or (ii)					<u> </u>		<u> </u>
		Signature (s		•				
Under per the applic	nalties of perjury, I declare that I have examation contains all the relevant facts relating	imed this application, including a to the application, and it is true	accompanying e, correct, and	schedules and statements, a complete. Declaration of pre	nd to the best of my parer (other than ar	/ knowledg pplicant) is	ge and basec	belief, on all
informatio	n of which preparer has any knowledge.	,						
	Filer			Preparer (other	man tiler/applic	cant)		
	Company and date			Clanatura of Individual	noring the armiter t	ion and de		
10111	Signature and date	OD TOP A DUSTE	1445	Signature of Individual pre	занну спе аррисат	on and da	166	
JOHN .	J. O'MARA, BUSINESS MGR/SE		JAMES	D. HUBER  Name of individual preparir	a the application (	nrint or to	nel	
	Name and title (print or ty	ihei	ANDER	RS MINKLER HUBER		print of typ	,,,,	
			ANDER		paring the applicati	ion		
				ranic or min pre	and applicati			

Part	Information For All Rec	<b>luests</b> (continue	ed)		Yes	No
					心體	绕
4c		ner consolidated (	group in which the applic	sue pending (with respect to either the ant was a member during the applicable		
d		ethod of account	ing being filed under the	procedures requiring that the operating		This
	If "Yes," attach the consent sta	tement from the di	irector.		7.02	的學生
е	If "Yes," check the box for the		period and attach the re	O-day or 120-day window period? quired statement (see instructions).		1224
f				the examining agent and the tax		
	Name ▶		elephone number 🕨	Tax year(s) ▶	粉数	整門
g	Has a copy of this Form 3115 b					<u> </u>
5a	Does the applicant (or any presapplicable tax year(s)) have any If "Yes," enter the name of the	Federal income to			海海	<b>/</b>
	telephone number, and the tax		eals and/or a Federal co	urt.		製物
	Name ► N/A	Te	elephone number 🕨	Tax year(s) ▶	3. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	<b>建建</b>
b	Has a copy of this Form 3115 on line 5a?	been provided to	the Appeals officer and/	or counsel for the government identified		<b>/</b>
С	a Federal court (for either the a member for the tax year(s) the a	pplicant or any pr	esent or former consolida	e under consideration by Appeals and/or ated group in which the applicant was a		<b>V</b>
6	attach a statement that provide	es each parent co	rporation's (a) name,	present or former consolidated group, (b) identification number, (c) address, or examination, before an Appeals office,		
7	a partnership or an S corporat	ion, is it requestin n, before Appeals	g a change from a meth , or before a Federal cou	ng a limited liability company) treated as od of accounting that is an issue under it, with respect to a Federal income tax		
	If "Yes," the applicant is not e	ligible to make the	change.			新灣
8a	Does the applicable revenue preceive audit protection for the			onsent) state that the applicant does not		きかく
b	If "Yes," attach an explanation.					A STATE
9a		ıırıng advance cor		ade (under either an automatic change of of accounting within the past 5 years		
b	If "Yes," for each trade or bu (including the tax year of change			ested change in method of accounting consent.		<b>1</b>
С				nt Agreement granting a change was not in the requested year of change, attach		
10a				re pending any request (including any ccounting, or technical advice?	10 TA A	22.1
b	type of request (private letter ruin the request(s).	iling, change in me	ethod of accounting, or to	te taxpayer, identification number(s), the echnical advice), and the specific issue(s)		
11	Is the applicant requesting to c If "Yes," check the appropria accounting. Also, complete Sci	te boxes below	to indicate the applicar	nt's present and proposed methods of		\ 
	Present method:	☐ Cash	☐ Accrual	☐ Hybrid (attach description)		43.45 C
	Proposed method:	☐ Cash	☐ Accrual	☐ Hybrid (attach description)	15 (2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	16.5

Form 3	115 (Rev. 12-2009)	Page	. :
Par	Information For All Requests (continued)	Yes N	-
12	If the applicant is either (i) <b>not</b> changing its overall method of accounting, or (ii) is changing its overall method of accounting and also changing to a special method of accounting for one or more items, attach a detailed and complete description for each of the following:		三世界に変
a	The item(s) being changed.		是
b	The applicant's present method for the item(s) being changed.		
d	The applicant's proposed method for the item(s) being changed.  The applicant's present overall method of accounting (cash, accrual, or hybrid).		
13	Attach a detailed and complete description of the applicant's trade(s) or business(es), and the principal business activity code for each. If the applicant has more than one trade or business as defined in Regulations section 1.446-1(d), describe: whether each trade or business is accounted for separately; the goods and services provided by each trade or business and any other types of activities engaged in that generate gross income; the overall method of accounting for each trade or business; and which trade or business is requesting to change its accounting method as part of this application or a separate application.		ではなるない
14	Will the proposed method of accounting be used for the applicant's books and records and financial statements? For insurance companies, see the instructions	7 3 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	7 (See
15a	Has the applicant engaged, or will it engage, in a transaction to which section 381(a) applies (e.g., a reorganization, merger, or liquidation) during the proposed tax year of change determined without regard to any potential closing of the year under section 381(b)(1)?		/ 经经验
b 16	If "Yes," for the items of income and expense that are the subject of this application, attach a statement identifying the methods of accounting used by the parties to the section 381(a) transaction immediately before the date of distribution or transfer and the method(s) that would be required by section 381(c)(4) or (c)(5) absent consent to the change(s) requested in this application.  Does the applicant request a conference with the IRS National Office if the IRS proposes an adverse response?		言語に関係が続き
17	If the applicant is changing to either the overall cash method, an overall accrual method, or is changing its method of accounting for any property subject to section 263A, any long-term contract subject to section 460, or inventories subject to section 474, enter the applicant's gross receipts for the 3 tax years preceding the tax year of change.		同い言語が高
	1st preceding year ended. mo  N/A yr  2nd preceding year ended mo  N/A yr  3rd preceding year ended mo  yr  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$		ではいい
Part	<u> </u>	Von N	
18	Is the applicant's requested change described in any revenue procedure, revenue ruling, notice, regulation, or other published guidance as an automatic change request?	Yes N	學.
	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures.		
19	Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. Also, include either a discussion of the contrary authorities or a statement that no contrary authority exists.		では、一般の一般の一般の一般の一般の一般の一般の一般の一般の一般の一般の一般の一般の一
20	Attach a copy of all documents related to the proposed change (see instructions).		
21	Attach a statement of the applicant's reasons for the proposed change.		¥.
22	If the applicant is a member of a consolidated group for the year of change, do all other members of the consolidated group use the proposed method of accounting for the item being changed?		er.
23a	Enter the amount of <b>user fee</b> attached to this application (see instructions).   \$	5. 3	A.
b	If the applicant qualifies for a reduced user fee, attach the required information or certification (see instructions).	聖禮	245° 3-72
Part		Yes N	Ю
24	Does the applicable revenue procedure, revenue ruling, notice, regulation, or other published guidance require the applicant to implement the requested change in method of accounting on a cut-off basis rather than a section 481(a) adjustment?	<b>共動物</b>	<u>蒙</u> (
	If "Yes," do not complete lines 25, 26, and 27 below.	138 TO	3.5

Enter the section 481(a) adjustment. Indicate whether the adjustment is an increase (+) or a decrease (-) in

used to determine the section 481(a) adjustment. If it is based on more than one component, show the

the amount of the section 481(a) adjustment attributable to each applicant.

zero Attach a summary of the computation and an explanation of the methodology

25

income. ► \$\_

computation for each component. If more than one applicant is applying for the method change on the same application, attach a list of the name, identification number, principal business activity code (see instructions), and

	115 (Rev 12-2009)		Page 4
Par	Section 481(a) Adjustment (continued)		Yes No
26	If the section 481(a) adjustment is an increase to income of less than \$25,000, does the applicant elect to tentire amount of the adjustment into account in the year of change?		で
27	Is any part of the section 481(a) adjustment attributable to transactions between members of an affiliated group, a controlled group, or other related parties?	roup, a	
Sche	dule A-Change in Overall Method of Accounting (If Schedule A applies, Part I below must be	complet	ed.)
Pai	Change in Overall Method (see instructions)		<del></del>
1	Enter the following amounts as of the close of the tax year preceding the year of change. If none, state "No statement providing a breakdown of the amounts entered on lines 1a through 1g.	ne." Also	o, attach a
		Ar	nount
а	Income accrued but not received (such as accounts receivable)	\$	
b	Income received or reported before it was earned (such as advanced payments). Attach a description of the income and the legal basis for the proposed method		
C	Expenses accrued but not paid (such as accounts payable)		
d	Prepaid expenses previously deducted		
e f	Inventory on hand previously deducted and/or not previously reported. Complete Schedule D, Part II		
g	Other amounts (specify). Attach a description of the item and the legal basis for its inclusion in the calculation of the section 481(a) adjustment.		
h	Net section 481(a) adjustment (Combine lines 1a–1g.) Indicate whether the adjustment is an increase (+) or decrease (-) in Income. Also enter the net amount of this section 481(a) adjustment amount on Part IV, line 25	\$	
2	Is the applicant also requesting the recurring item exception under section 461(h)(3)?	☐ Yes	□ No
3	Attach copies of the profit and loss statement (Schedule F (Form 1040) for farmers) and the balance sheet the close of the tax year preceding the year of change. Also attach a statement specifying the accounting preparing the balance sheet. If books of account are not kept, attach a copy of the business schedules Federal income tax return or other return (e.g., tax-exempt organization returns) for that period. If the amount of the profit and loss statement and the balance sheet explaining the differences.	method submitt ounts in F	used when ed with the Part I, lines
Par			
Applic	cants requesting a change to the cash method must attach the following information:		
1	A description of inventory items (items whose production, purchase, or sale is an income-producing factor supplies used in carrying out the business.		
2 Sobo	An explanation as to whether the applicant is required to use the accrual method under any section of the Course B—Change to the Deferral Method for Advance Payments (see instructions)	Joue of r	eguiations.
1	If the applicant is requesting to change to the Deferral Method for advance payments described in section	n 5.02 of	Rev. Proc.

- 2004-34, 2004-1 C.B. 991, attach the following information:
- a A statement explaining how the advance payments meet the definition in section 4.01 of Rev. Proc. 2004-34.
- b If the applicant is filing under the automatic change procedures of Rev. Proc. 2008-52, the information required by section 8.02(3)(a)-(c) of Rev. Proc. 2004-34.
- c If the applicant is filing under the advance consent provisions of Rev. Proc. 97-27, the information required by section 8.03(2)(a)-(f) of Rev. Proc. 2004-34.
- 2 If the applicant is requesting to change to the deferral method for advance payments described in Regulations section 1.451-5(b)(1)(ii), attach the following.
- a A statement explaining how the advance payments meet the definition in Regulations section 1.451-5(a)(1).
- b A statement explaining what portions of the advance payments, if any, are attributable to services, whether such services are integral to the provisions of goods or items, and whether any portions of the advance payments that are attributable to non-integral services are less than five percent of the total contract prices. See Regulations sections 1.451-5(a)(2)(i) and (3).
- c A statement explaining that the advance payments will be included in income no later than when included in gross receipts for purposes of the applicant's financial reports. See Regulations section 1.451-5(b)(1)(ii).
- d A statement explaining whether the inventoriable goods exception of Regulations section 1,451-5(c) applies and if so, when substantial advance payments will be received under the contracts, and how the exception will limit the deferral of income.

## Schedule C-Changes Within the LIFO Inventory Method (see instructions)

#### Part I General LIFO Information

Complete this section if the requested change involves changes within the LIFO inventory method. Also, attach a copy of all **Forms 970**, Application To Use LIFO Inventory Method, filed to adopt or expand the use of the LIFO method.

- 1 Attach a description of the applicant's present and proposed LIFO methods and submethods for each of the following items:
- a Valuing inventory (e.g., unit method or dollar-value method).
- **b** Pooling (e.g., by line or type or class of goods, natural business unit, multiple pools, raw material content, simplified dollar-value method, inventory price index computation (IPIC) pools, vehicle-pool method, etc.).
- c Pricing dollar-value pools (e.g., double-extension, index, link-chain, link-chain index, IPIC method, etc.).
- **d** Determining the current-year cost of goods in the ending inventory (i.e., most recent acquisitions, earliest acquisitions during the current year, average cost of current-year acquisitions, or other permitted method).
- 2 If any present method or submethod used by the applicant is not the same as indicated on Form(s) 970 filed to adopt or expand the use of the method, attach an explanation.
- 3 If the proposed change is not requested for all the LIFO inventory, attach a statement specifying the inventory to which the change is and is not applicable.
- 4 If the proposed change is not requested for all of the LIFO pools, attach a statement specifying the LIFO pool(s) to which the change is applicable.
- 5 Attach a statement addressing whether the applicant values any of its LIFO inventory on a method other than cost. For example, if the applicant values some of its LIFO inventory at retail and the remainder at cost, identify which inventory items are valued under each method.
- 6 If changing to the IPIC method, attach a completed Form 970.

#### Part II Change in Pooling Inventories

- 1 If the applicant is proposing to change its pooling method or the number of pools, attach a description of the contents of, and state the base year for, each dollar-value pool the applicant presently uses and proposes to use.
- 2 If the applicant is proposing to use natural business unit (NBU) pools or requesting to change the number of NBU pools, attach the following information (to the extent not already provided) in sufficient detail to show that each proposed NBU was determined under Regulations section 1.472-8(b)(1) and (2):
- a A description of the types of products produced by the applicant. If possible, attach a brochure.
- b A description of the types of processes and raw materials used to produce the products in each proposed pool.
- c If all of the products to be included in the proposed NBU pool(s) are not produced at one facility, state the reasons for the separate facilities, the location of each facility, and a description of the products each facility produces.
- **d** A description of the natural business divisions adopted by the taxpayer. State whether separate cost centers are maintained and if separate profit and loss statements are prepared.
- e A statement addressing whether the applicant has inventories of items purchased and held for resale that are not further processed by the applicant, including whether such items, if any, will be included in any proposed NBU pool.
- **f** A statement addressing whether all items including raw materials, goods-in-process, and finished goods entering into the entire inventory investment for each proposed NBU pool are presently valued under the LIFO method. Describe any items that are not presently valued under the LIFO method that are to be included in each proposed pool.
- **g** A statement addressing whether, within the proposed NBU pool(s), there are items both sold to unrelated parties and transferred to a different unit of the applicant to be used as a component part of another product prior to final processing.
- If the applicant is engaged in manufacturing and is proposing to use the multiple pooling method or raw material content pools, attach information to show that each proposed pool will consist of a group of items that are substantially similar. See Regulations section 1.472-8(b)(3).
- 4 If the applicant is engaged in the wholesaling or retailing of goods and is requesting to change the number of pools used, attach information to show that each of the proposed pools is based on customary business classifications of the applicant's trade or business. See Regulations section 1.472-8(c).

Form **3115** (Rev 12-2009)

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Form	211	15	(Ray	12-2009)

Page 6

	dule D—Change in the Treatment of Long-Term Contracts Unde on 263A Assets (see instructions)	er Section 460,	Inventories, or	Other	- uge 0
Par	Change in Reporting Income From Long-Term Contracts	(Also complete	Part III on page	s 7 and	8.)
1	To the extent not already provided, attach a description of the applicant's and expenses from long-term contracts. Also, attach a representative act change. If the applicant is a construction contractor, attach a detailed description contractor attach a detailed description.	present and prop	oosed methods for nout any deletion)	r reportin for the r	g income
2a b	Are the applicant's contracts long-term contracts as defined in section 460 lf "Yes," do all the contracts qualify for the exception under section 460(e)	O(f)(1) (see instruc	tions)? [	☐ Yes ☐ Yes	□ No □ No
c	If line 2b is "No," attach an explanation.  If line 2b is "Yes," is the applicant requesting to use the percentage-of-cord cost under Regulations section 1.460-4(b)?		[	⊒ Yes	□ No
d	If line 2c is "No," is the applicant requesting to use the exempt-cont method under Regulations section 1.460-4(c)(2)?		[	□ Yes	□No
	If line 2d is "Yes," attach an explanation of what cost comparison the ap- contract's completion factor.  If line 2d is "No," attach an explanation of what method the applicant is use	ing and the autho	ority for its use.		
3a b	Does the applicant have long-term manufacturing contracts as defined in s If "Yes," attach an explanation of the applicant's present and proposed me term manufacturing contracts.			□ Yes	□ No
с 4	Attach a description of the applicant's manufacturing activities, including an To determine a contract's completion factor using the percentage-of-comp		ition of manufactu	red good	3.
a b	Will the applicant use the cost-to-cost method in Regulations section 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method in Regulations section 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method in Regulations section 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method in Regulations section 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method in Regulations section 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method in Regulations section 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method in Regulations section 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method in Regulations section 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method in Regulations section 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method in Regulations section 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method in Regulations section 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method in Regulation 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method in Regulation 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method in Regulation 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method in Regulation 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method in Regulation 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method in Regulation 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method in Regulation 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method in Regulation 1.46 If line 4a is "No," is the applicant electing the simplified cost-to-cost method	0-4(b)?		☐ Yes	□ No
5	Regulations section 1.460-5(c))?			☐ Yes	□No
Part	contracts or Federal long-term contracts.	·		200 7 0	-d 0 \
1	Attach a description of the inventory goods being changed.	iges (Also comp	nete i ait iii oii pi	ages r ai	10 0.)
2 3a	Attach a description of the inventory goods (if any) NOT being changed.			☐ Yes	□No
b	Is the applicant's present inventory valuation method in compliance with s If "No," attach a detailed explanation			☐ Yes	□ No
4a	Check the appropriate boxes below.		eing Changed	Being (	ory Not Changed
	Identification methods:	Present method	Proposed method	Presen	method
	Specific identification				
	LIFO			<del> </del>	
	Other (attach explanation)				
	Valuation methods:  Cost				
	Cost or market, whichever is lower				
	Retail, lower of cost or market				
b	Enter the value at the end of the tax year preceding the year of change	***		250 50	
5	If the applicant is changing from the LIFO inventory method to a non-instructions).	LIFO method, at	tach the following		
а	Copies of Form(s) 970 filed to adopt or expand the use of the method.				
b	Only for applicants requesting advance consent. A statement describ required by Regulations section 1.472-6(a) or (b), or whether the applicant			jing to th	e method
C	Only for applicants requesting an automatic change. The statement in Proc. 2008-52 (or its successor).			Append	x of Rev.

Part III

Page 7

**Method of Cost Allocation** (Complete this part if the requested change involves either property subject to section 263A or long-term contracts as described in section 460 (see instructions)).

#### Section A-Allocation and Capitalization Methods

Attach a description (including sample computations) of the present and proposed method(s) the applicant uses to capitalize direct and indirect costs properly allocable to real or tangible personal property produced and property acquired for resale, or to allocate and, where appropriate, capitalize direct and indirect costs properly allocable to long-term contracts. Include a description of the method(s) used for allocating indirect costs to intermediate cost objectives such as departments or activities prior to the allocation of such costs to long-term contracts, real or tangible personal property produced, and property acquired for resale. The description must include the following:

- 1 The method of allocating direct and indirect costs (i.e., specific identification, burden rate, standard cost, or other reasonable allocation method).
- 2 The method of allocating mixed service costs (i.e., direct reallocation, step-allocation, simplified service cost using the labor-based allocation ratio, simplified service cost using the production cost allocation ratio, or other reasonable allocation method).
- 3 The method of capitalizing additional section 263A costs (i.e., simplified production with or without the historic absorption ratio election, simplified resale with or without the historic absorption ratio election including permissible variations, the U.S. ratio, or other reasonable allocation method).

#### Section B-Direct and Indirect Costs Required To Be Allocated

Check the appropriate boxes showing the costs that are or will be fully included, to the extent required, in the cost of real or tangible personal property produced or property acquired for resale under section 263A or allocated to long-term contracts under section 460. Mark "N/A" in a box if those costs are not incurred by the applicant. If a box is not checked, it is assumed that those costs are not fully included to the extent required. Attach an explanation for boxes that are not checked.

		Present method	Proposed method
1	Direct material		
2	Direct labor		
3	Indirect labor		
4	Officers' compensation (not including selling activities)		
5	Pension and other related costs		
6	Employee benefits		
7	Indirect materials and supplies		-
8	Purchasing costs		
9	Handling, processing, assembly, and repackaging costs		
10	Offsite storage and warehousing costs		
11	Depreciation, amortization, and cost recovery allowance for equipment and facilities		
	placed in service and not temporarily idle		
12	Depletion		
13	Rent		
14	Taxes other than state, local, and foreign income taxes		
15	Insurance		
16	Utilities		
17	Maintenance and repairs that relate to a production, resale, or long-term contract activity		
18	Engineering and design costs (not including section 174 research and experimental		
	expenses)		
19	Rework labor, scrap, and spoilage		
20	Tools and equipment		
21	Quality control and inspection		
22	Bidding expenses incurred in the solicitation of contracts awarded to the applicant		
23	Licensing and franchise costs		
24	Capitalizable service costs (including mixed service costs)		
25	Administrative costs (not including any costs of selling or any return on capital)		
26	Research and experimental expenses attributable to long-term contracts		
27	Interest		
28	Other costs (Attach a list of these costs.)		

Part III	Method of	f Cost A	llocation	(see instructions) (co	ontinued)

Section C-Other Costs Not Required To Be Allocated (Complete Section C only if the applicant is requesting to change its method for these costs.)

		Present method	Proposed method
1	Marketing, selling, advertising, and distribution expenses		
2	Research and experimental expenses not included in Section B, line 26		
3	Bidding expenses not included in Section B, line 22		
4	General and administrative costs not included in Section B		
5	Income taxes		
6	Cost of strikes		
7	Warranty and product liability costs		
8	Section 179 costs		
9	On-site storage		
10	Depreciation, amortization, and cost recovery allowance not included in Section B, line 11		
11			

# Schedule E—Change in Depreciation or Amortization (see instructions)

Applicants requesting approval to change their method of accounting for depreciation or amortization complete this section. Applicants *must* provide this information for each item or class of property for which a change is requested.

Note. See the List of Automatic Accounting Method Changes in the instructions for information regarding automatic changes under sections 56, 167, 168, 197, 1400I, 1400L, or former section 168. Do not file Form 3115 with respect to certain late elections and election revocations (see instructions).

1	Is depreciation for the property determined under Regulations section 1.167(a)-11 (CLADR)? If "Yes," the only changes permitted are under Regulations section 1.167(a)-11(c)(1)(iii).	☐ Yes	□ No
2	Is any of the depreciation or amortization required to be capitalized under any Code section (e.g., section 263A)?	☐ Yes	□ No
3	If "Yes," enter the applicable section ►  Has a depreciation, amortization, or expense election been made for the property (e.g., the election under sections 168(f)(1), 179, or 179C)?	☐ Yes	□ No

- 4a To the extent not already provided, attach a statement describing the property being changed. Include in the description the type of property, the year the property was placed in service, and the property's use in the applicant's trade or business or income-producing activity.
- ☐ No **b** If the property is residential rental property, did the applicant live in the property before renting it? . . . ☐ Yes Yes □ No
- To the extent not already provided in the applicant's description of its present method, attach a statement explaining how the property is treated under the applicant's present method (e.g., depreciable property, inventory property, supplies under Regulations section 1.162-3, nondepreciable section 263(a) property, property deductible as a current expense, etc.).
- If the property is not currently treated as depreciable or amortizable property, attach a statement of the facts supporting the proposed change to depreciate or amortize the property.
- If the property is currently treated and/or will be treated as depreciable or amortizable property, provide the following information for both the present (if applicable) and proposed methods:
- a The Code section under which the property is or will be depreciated or amortized (e.g., section 168(g)).
- The applicable asset class from Rev. Proc. 87-56, 1987-2 C.B. 674, for each asset depreciated under section 168 (MACRS) or under section 1400L; the applicable asset class from Rev. Proc. 83-35, 1983-1 C.B. 745, for each asset depreciated under former section 168 (ACRS); an explanation why no asset class is identified for each asset for which an asset class has not been identified by the applicant.
- **c** The facts to support the asset class for the proposed method.
- d The depreciation or amortization method of the property, including the applicable Code section (e.g., 200% declining balance method under section 168(b)(1)).
- e The useful life, recovery period, or amortization period of the property.
- The applicable convention of the property.
- g A statement of whether or not the additional first-year special depreciation allowance (for example, as provided by section 168(k), 168(l), 168(m), 168(n), 1400L(b), or 1400N(d)) was or will be claimed for the property. If not, also provide an explanation as to why no special depreciation allowance was or will be claimed.

COMPANY OR ENTITY NAME: UNITED ASSOCIATION OF JOURNEYMEN OF THE PLUMBING & PIPEFITTING INDUSTRY L562

FEDERAL EIN: 43-0560620, TAX YEAR: 2014

FORM 3115, APPLICATION FOR CHANGE IN ACCOUNTING METHOD, AUTOMATIC METHODS # 184, 186, and 192.

#184: DEDUCTING REPAIRS AND MAINTENANCE COSTS TO CAPITALIZING IMPROVEMENTS AND UNIT OF PROPERTY

#186: CHANGE TO DEDUCTING NON-INCIDENTAL MATERIAL AND SUPPLIES TO WHEN USED OR CONSUMMED

#192: CHANGE TO CAPITALIZING ACQUISITION OR PRODUCTION COSTS AND, IF DEPRECIABLE, TO DEPRECIATING SUCH PROPERTY UNDER SECTION 167 OR SECTION 168

This 3115, Application for Change in Accounting Method, is filed to change to the automatic accounting methods # 184, 186, and #192. Method # 184 is filed to deduct Repair and Maintenance Costs, to Capitalizing Amounts Paid or Incurred for Improvements to Tangible Property, to adopt the Routine Maintenance Safe Harbor, and/or to Change the Method of Identifying the Unit of Property. #186 is filed to adopt the Non-incidental Material and Supplies. #192 is filed to adopt the Amounts paid to acquire or produce tangible property.

# As required by Rev. Proc. 2015-13, we are including the following method change(s) description(s) and regulation citation(s):

Subject Matter or Issue	Citation to Regulation Section	Automatic Method #
Repairs and maintenance	1.162-4(a)	184
Capital expenditures in general	1.263(a)-1(a)	184
Amounts paid to improve tangible property		
Definitions	1.263(a)-3(b)	184
Requirement to capitalize amounts paid	1.263(a)-3(d)	184
Special rules for determining improvement costs, certain costs incurred during an improvement, in general	1.263(a)-3(g)(1)	184
Safe harbor for routine maintenance on property Routine maintenance for buildings	1.263(a)-3(i)	184
Capitalization of betterments	1.263(a)-3(j)	184
Capitalization of restorations	1.263(a)-3(k)	184

COMPANY OR ENTITY NAME: UNITED ASSOCIATION OF JOURNEYMEN OF THE PLUMBING &

PIPEFITTING INDUSTRY L562

FEDERAL EIN: 43-0560620, TAX YEAR: 2014

FORM 3115, APPLICATION FOR CHANGE IN ACCOUNTING METHOD, AUTOMATIC METHODS # 184, 186, and 192.

#184: DEDUCTING REPAIRS AND MAINTENANCE COSTS TO CAPITALIZING IMPROVEMENTS AND UNIT OF PROPERTY

#186: CHANGE TO DEDUCTING NON-INCIDENTAL MATERIAL AND SUPPLIES TO WHEN USED OR CONSUMMED

#192: CHANGE TO CAPITALIZING ACQUISITION OR PRODUCTION COSTS AND, IF DEPRECIABLE, TO DEPRECIATING SUCH PROPERTY UNDER SECTION 167 OR SECTION 168

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Capitalization of amounts to adapt property to a new or different use	1.263(a)-3(l)	184
Capitalization of amounts to adapt property to a new or different use, buildings	1.263(a)-3(l)(2)	184
Treatment of capital expenditures	1.263(a)-3(o)	184
Recovery of capitalized amounts	1.263(a)-3(p)	184
Non-incidental material and supplies	1.162-3(a)(1)	186
Material and supplies definition	1.162-3(c)	186
Amounts paid to acquire or produce tangible property:		
Requirement to capitalize	1.263(a)-2(d)	192
Defense or perfection of title to property	1.263(a)-2(e)	192
Transaction costs	1.263(a)-2(f)	192
Treatment of capital expenditures	1.263(a)-2(g)	192

Part II, Question 9a "Has the applicant, its predecessor, or a related party requested or made (under either an automatic change procedure or a procedure requiring advance consent) a change in method of accounting within the past 5 years (including the year of change)?" No, however, the scope limitations in section 5.01 of Rev. Proc. 2015-13, as described in Rev. Proc. 2014-16, do not apply to a taxpayer that makes these method changes for any tax year beginning before January 1, 2015. As such, the filing of this Change in Accounting Method Application is permitted whether we have filed such method changes or not.

COMPANY OR ENTITY NAME: UNITED ASSOCIATION OF JOURNEYMEN OF THE PLUMBING &

PIPEFITTING INDUSTRY L562

FEDERAL EIN: 43-0560620, TAX YEAR: 2014

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Part II, Question 12: If the applicant is either (i) not changing its overall method of accounting, or (ii) is changing its overall method of accounting and also changing to a special method of accounting for one or more items, attach a detailed and complete description for each of the following:

- a. The item(s) being changed: The taxpayer is changing its methods of accounting for:
  - 1. Definition of, determining, and expensing non-incidental materials and supplies
  - 2. Repair and maintenance costs for its expenditures paid or incurred for tangible property to the rules outlined in §1.162-4. Taxpayer's prior accounting method followed superseded Treasury guidance that generally concluded that those amounts paid or incurred for tangible property required capitalization under §263(a).
  - 3. Capital expenditures in general
  - 4. Determining the amount paid to acquire or produce tangible property
  - 5. Determining the amount to be capitalized as an improvement to tangible property
    - a. The costing criteria of 1.263(a)-3(g) for improvement related to direct and indirect costs.
    - b. The betterment criteria of 1.263(a)-3(j) for improvements to tangible property.
    - c. The restoration criteria of 1.263(a)-3(k) for improvements to tangible property.
    - d. The adaption criteria of 1.263(a)-3(l) for improvements to tangible property.
  - 6. Safe harbor for routine maintenance of 1.263(a)-3(i). The taxpayer has not been employing this method and seeks to add this method.
  - 7. Unit of property criteria for its building(s) and land improvements under 1.263(a)-3(e)

## b. The applicant's present method for the item(s) being changed.

- 1. Definition of, determining, and expensing non-incidental materials and supplies: Taxpayer currently expenses non-incidental material and supplies and proposes to change that accounting to deferring non-incidental material and supplies until used or consumed.
  - 2. Determining and expensing of repairs and maintenance:

Taxpayer currently capitalizes many expenditures that when measured under the new improvement capitalization criteria of 1.263(a)-3 will not be capitalized. Taxpayer will employ the proper criteria and elements of employ the requirements of 1.263(a)-1, -2, and-3 and seeks to change to those requirements and criteria.

- 3. Capital expenditures in general: taxpayer does not fully employ the requirements of 1.263(a)-1, -2, nor-3 and seeks to change to those requirements and criteria.
- 4. Determining the amount paid to acquire or produce tangible property: taxpayer does not fully employ the requirements of 1.263(a)-1, -2, nor-3 and seeks to change to those requirements and criteria.
- 5. Determining the amount to be capitalized as an improvement to tangible property:

COMPANY OR ENTITY NAME: UNITED ASSOCIATION OF JOURNEYMEN OF THE PLUMBING & PIPEFITTING INDUSTRY L562

FEDERAL EIN: 43-0560620, TAX YEAR: 2014

FORM 3115, APPLICATION FOR CHANGE IN ACCOUNTING METHOD, AUTOMATIC METHODS # 184, 186, and 192.

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For these four above methods, the taxpayer currently accounts for amounts paid or incurred for tangible property as either items requiring capitalization under 263(a) or as amounts for repair and maintenance costs. The difference between the current and proposed method is that under the current method the taxpayer had been capitalizing items that now, under the guidance of \$1.162-4 and/or 1.263(a)-3 will result in more items being deducted as \$162 ordinary and necessary business deductions as a repair and maintenance cost. For example, taxpayer may have capitalized a \$10,000 roof repair where clearly under \$1.162-4 that expenditure should have been classified as a repair and maintenance cost. While the taxpayer has included the method changes described in items 1-5 above, as a method change under Question 12a, it is not aware that their current accounting methods are contrary to the 1.263(a)-2 or -3 regulations. Taxpayer, therefore, does not have an IRC 481(a) adjustments related to those methods.

6. Safe harbor for routine maintenance:

Taxpayer does not currently employ this method and proposes to utilize this method.

7. Unit of Property:

The taxpayer has not been employing any defined unit of property criteria.

### c. The applicant's proposed method for the item(s) being changed.

The taxpayer proposes to use the guidance of §1.162-3 related to non-incidental material and supplies, §1.162-4 and other sections of the tangible property regulations to determine whether an expenditure should be written off as a repair and maintenance cost or under §1.263(a)-1, -2, and/or -3, be capitalized. The taxpayer will employ the routine maintenance safe harbor of 1.263(a)-3(i). For these and the other method changes also see b. above, other than Unit of Property below under 1.263(a)-3(e):

The taxpayer will be accounting for its building as the building, its building structures and building systems as one unit of property. Additionally, the taxpayer will account for its land improvements consisting of its parking lots, landscaping, and outside lighting as one unit of property, separate from the building unit of property.

d. The applicant's present overall method of accounting (cash, accrual, or hybrid). The taxpayer currently employs the cash method of accounting.

Part II, Question 13: Attach a detailed and complete description of the applicant's trade(s) or business(es), and the principal business activity code for each. If the applicant has more than one trade or business as defined in Regulations section §1.446-1(d), describe: whether each trade or business is accounted for separately; the goods and services provided by each trade or business and any other types of activities engaged in that generate gross income; the overall method of accounting for each trade or business; and which trade or business is requesting to change its accounting method as part of this application or a separate application. The taxpayer has one trade or business, and it is to achieve by organization the

COMPANY OR ENTITY NAME: UNITED ASSOCIATION OF JOURNEYMEN OF THE PLUMBING & PIPEFITTING INDUSTRY L562

FEDERAL EIN: 43-0560620, TAX YEAR: 2014

FORM 3115, APPLICATION FOR CHANGE IN ACCOUNTING METHOD, AUTOMATIC METHODS # 184, 186, and 192.

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improvement of the social and economic conditions of the employees, and the business activity code is 900099.

Question 25: Enter the 481(a) adjustment and a summary of the computation of it and explanation of the methodology used to determine it: There is no 481(a) adjustment.

#### Additional information:

The taxpayer agrees to the terms and conditions of Rev. Proc. 2011-14, as modified by Rev. Proc. 2014-16 and Rev. Proc. 2015-13, that are necessary or required to effect the method change which is the subject matter of this application.