

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



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)

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

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

2014 Open to Public Inspection

OMB No. 1545-0047

Δ	For the 2014	calendar year, or tax year beginning , and ending	is govioriiisso.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1										
<u>~</u> В		C Name of organization , and ending , and ending	<del></del>	D Employer	identification number										
B	Check if applicable	1		- Lp.o,o.											
Ш	Address change	SHEET METAL WORKERS' LOCAL NO. 2		44 0	400550										
	Name change	Doing business as  Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephon	429770										
$\overline{\Box}$	Initial return	2902 BLUE RIDGE BLVD	Room/suite		254-8021										
믐	Final return/	City or town, state or province, country, and ZIP or foreign postal code	<del>'</del>												
Ш	terminated	KANSAS CITY MO 64129		C C	eiots \$ 4,904,140										
	Amended return	F Name and address of principal officer		G Gross rece	ipts 1,301,110										
	Application pending	GREG CHASTAIN, BUSINESS MANAGER	H(a) Is this a grou	up return for su	ibordinates? Yes X No										
		2902 BLUE RIDGE BLVD	H(b) Are all subo	ordinates incli	ided? Yes No										
		KANSAS CITY MO 64129			(see instructions)										
_					,,										
<del></del>	Tax-exempt status				_										
<u>J</u>		SHEETMETAL2.ORG	H(c) Group exen		3//0										
	Form of organization		Year of formation 1	980 ]	M State of legal domicile MO										
	T	ummary		<del></del>											
	1	escribe the organization's mission or most significant activities													
မွ		MOTE AND DEMONSTRATE THE POSSIBILITIES OF TRADE IN													
Jan		INDUSTRY AND PROTECT THE RIGHTS OF ITS MEMBERS IN A UNITED EFFORT WITH													
Governance		ER MEMBERS THROUGHOUT THE UNITED STATES AND CANADA.													
્ર	2 Check t	nis box 🕨 🔲 if the organization discontinued its operations or disposed of more than 2	ets												
8	3 Numbe	of voting members of the governing body (Part VI, line 1a)		3											
es	4 Numbe	of independent voting members of the governing body (Part VI, line 1b)		4	10										
Activities	5 Total nu	mber of individuals employed in calendar year 2014 (Part V, line 2a)		5	49										
Ct	6 Total nu	mber of volunteers (estimate if necessary)		6	0										
<b>⋖</b>	7a Total ur	related business revenue from Part VIII, column (C), line 12		7a	0										
	b Net unr	elated business taxable income from Form 990-T, line 34		7b	0										
			Prior Year	r	Current Year										
a	8 Contrib	tions and grants (Part VIII, line 1h)			0										
ne.	9 Program	service revenue (Part VIII, line 2g)	4,354		4,306,628										
Revenue	10 Investm	ent income (Part VIII, column (A), lines 3, 4, and 7d)		965	38,611										
œ	11 Other re	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		347	12,894										
	12 Total re	venue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,339	7,166	4,358,133										
	13 Grants	ind similar amounts paid (Part IX, column (A), lines 1–3)		5,787	158,013										
	14 Benefits	paid to or for members (Part IX, column (A), line 4)		357	27,292										
Ś	15 Salaries	, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,563	3,149	1,568,893										
xpenses	16a Profess	onal fundraising fees (Part IX, column (A), line the			0										
g	b Total fu	onal fundraising fees (Part IX, column (A), line per CEIVED 0													
ω	17 Other e	(Dat IV and IV and IV)	3,084	,922	2,828,794										
	18 Total ex	penses Add lines 13–17 (must equal Part IX, collumn (A), line 25)	4,725	5,215	4,582,992										
	l 19 Revenu		-386	5,049	-224,859										
Net Assets or	g	e less expenses Subtract line 18 from line 12	Beginning of Curr	rent Year	End of Year										
sets	20 Total as	sets (Part X, line 16)	3,801	L,014	3,539,737										
As	21 Total lia	bilities (Part X, line 26)	38	3,456	13,177										
<u> 2</u>	22 Net ass	ets or fund balances Subtract line 21 from line 20	3,762	2,558	3,526,560										
_F	Part II S	ignature Block													
U	Inder penalties o	perjury, I declare that I have examined the return, including accompanying schedules and staten	nents, and to the be	st of my kn	owledge and belief, it is										
tr	rue, correct, and	complete declaration of preparer (other than officer) is based on all information of which preparer	r has any knowledge	e	1, 1,										
		//U/1/2 / 2			1510										
Sig	gn 🖊	mature of officer		Date	' <b>,</b>										
He	ere 📗	ALLEN JAY LIND FINAL	NCIAL SEC	RETAR	Y/TREASURER										
		Type or print name and title													
	Print/T	pe preparer's name Preparer's signature	Date	Check	ıf PTIN										
Pa	id KEITI	F. NOVAK	05/15/	/15 self-em	ployed P00061531										
Pre	eparer Firm's	ame NOVAK BIRKS, P.C.	Fi	rm's EIN	43-1122456										
Us	e Only	4600 MADISON STE 120													
_	Firms	ddress	PI	hone no	816-931-6111										
Ma		ss this return with the preparer shown above? (see instructions)			X Yes No										
		luction Act Notice, see the separate instructions			Form <b>990</b> (2014)										
DAA	١.														

Form 990 (2014) SHEET METAL WORKERS: LOCAL NO. 2 44-0429770	Page Z
Part III Statement of Program Service Accomplishments	
Check if Schedule O contains a response or note to any line in this Part III	
1 Briefly describe the organization's mission	
PROMOTE AND DEMONSTRATE THE POSSIBILITIES OF TRADE IN THE VARIOU	JS FIELDS OF
INDUSTRY AND PROTECT THE RIGHTS OF ITS MEMBERS IN A UNITED EFFOR	RT WITH
OTHER MEMBERS THROUGHOUT THE UNITED STATES AND CANADA.	
2. Did the assessment undertake any constituent assessment and the constituent the constituent as the	
2 Did the organization undertake any significant program services during the year which were not listed on the	n
prior Form 990 or 990-EZ?	Yes X No
If "Yes," describe these new services on Schedule O	
3 Did the organization cease conducting, or make significant changes in how it conducts, any program	
services?	Yes X No
If "Yes," describe these changes on Schedule O	
4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
·	
expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	
the total expenses, and revenue, if any, for each program service reported	
4a (Code ) (Expenses \$ 2,574,368 including grants of \$ 158,013 ) (Revenue \$	1
MAINTAIN AND ADMINISTER THE ACTIVITIES AND PROGRAMS OF THE LOCAL	INTON
	ONION,
INCLUDING COLLECTIVE BARGAINING ON BEHALF OF MEMBERS.	
·	
4b (Code ) (Expenses \$ 511,000 including grants of \$ ) (Revenue \$	)
MAINTAIN GOOD STANDING WITH THE NATIONAL UNION.	•
1 405 604	
4c (Code ) (Expenses \$ 1,497,624 including grants of \$ ) (Revenue \$	)
4c (Code ) (Expenses \$ 1,497,624 including grants of \$ ) (Revenue \$ PROMOTE THE LOCAL UNION, INCLUDING THROUGH ADVERTISING AND WAGE	RATE
	RATE
PROMOTE THE LOCAL UNION, INCLUDING THROUGH ADVERTISING AND WAGE SUBSIDIES TO ASSIST LOCAL UNION CONTRACTORS IN SECURING WORK	RATE
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PROMOTE THE LOCAL UNION, INCLUDING THROUGH ADVERTISING AND WAGE SUBSIDIES TO ASSIST LOCAL UNION CONTRACTORS IN SECURING WORK OPPORTUNITIES FOR MEMBERS.	RATE
PROMOTE THE LOCAL UNION, INCLUDING THROUGH ADVERTISING AND WAGE SUBSIDIES TO ASSIST LOCAL UNION CONTRACTORS IN SECURING WORK OPPORTUNITIES FOR MEMBERS.  4d Other program services (Describe in Schedule O)	RATE
PROMOTE THE LOCAL UNION, INCLUDING THROUGH ADVERTISING AND WAGE SUBSIDIES TO ASSIST LOCAL UNION CONTRACTORS IN SECURING WORK OPPORTUNITIES FOR MEMBERS.	PATE

<ol> <li>Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A complete Schedule of Contributors (see instructions)?</li> <li>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</li> <li>Section 501(c)(3) organizations (a) organization engage in lobyling activities, or have a section 501(h) election in effect during the law yea? If "Yes," complete Schedule C, Part II</li> <li>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 95-19? If "Yes," complete Schedule C, Part III</li> <li>Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II</li> <li>Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? II "Yes," complete Schedule D, Part II</li> <li>Did the organization maintain collicitions of works of art, historical treasures, or other similar assess? If "Yes," complete Schedule D, Part II</li> <li>Did the organization expects of "Yes," complete Schedule D, Part II</li> <li>Did the organization areas of the similar part X, ine 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit courseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V</li> <li>Did the organization receive in a maint in Part X, ine 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit courseling, debt m</li></ol>		Yes	No
<ul> <li>2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?</li> <li>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 II</li> <li>3 Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax yea? If Yes," complete Schedule C, Part II</li> <li>5 Is the organization as 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 99-19? If Yes," complete Schedule C, Part II</li> <li>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 II</li> <li>Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land arises, or historic structures? If Yes," complete Schedule D, Part III</li> <li>Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land arises, or historic structures? If Yes," complete Schedule D, Part III</li> <li>Did the organization arises and including a second leasement of the similar assets? If Yes," complete Schedule D, Part III</li> <li>Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, and account leability, 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 VIII</li> <li>Did the organization services? If Yes, complete Schedule D, Part VIII</li> <li>Did the organization ser</li></ul>			
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election in effect during the tax year? If "Yes," complete Schedule C, Part II  Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III  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 II  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 III  Did the organization and areas, or historic structures? If "Yes," complete Schedule D, Part III  Did the organization and areas, or historic structures? If "Yes," complete Schedule D, Part III  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  Did the organization for amounts, or quasi-endowments? If "Yes," complete Schedule D, Part V III If the organization are networkers, or quasi-endowments? If "Yes," complete Schedule D, Part V III If the organization's answer to any of the following questions is "Yes," complete Schedule D, Part V III If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII VIII, VIII, IX, or X as applicable  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 VIII  Did the organization report an amount for other assets in Part X, line 12 that is 5% or more of its total assets reported in Part X, lin	3	Х	
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Part III  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  Did the organization maintain and collections of works of art, historical treasures, or other similar assests? If "Yes," complete Schedule D, Part II  Did the organization maintain collections of works of art, historical treasures, or other similar assests? If "Yes," complete Schedule D, Part III  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  Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V  If the organization as answer to any of the following questions is "Yes," then complete Schedule D, Part V  If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI  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  Did the organization report an amount for investments—other securities 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  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 VIII  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 XII and III  Did the org			
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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  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 III  8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  9 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 If the organization sanswer to any of the following questions is "Yes," then complete Schedule D, Part V  11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI  12 Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII  13 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 VIII  14 Did the organization report an amount for investments—other securities 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  15 Did the organization report an amount for investments—other securities 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 XII  16 Did the organization report an amount for other liabilities 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 XII  17 Did the organization	5	X	
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· · · · · · · · · · · · · · · · · · ·	19		X_
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Pa	art IV Checklist of Required Schedules (continued)		-	
			Yes	No
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	х	
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	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	<u> </u>		
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	x	
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	i		
	through 24d and complete Schedule K. If "No," go to line 25a	24a		х
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	1		
Ŭ	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		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
23a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	250		
b				
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	25b		
26	If "Yes," complete Schedule L, Part I	250		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	ŀ		
	current or former officers, directors, trustees, key employees, highest compensated employees, or	0.0		х
27	disqualified persons? If "Yes," complete Schedule L, Part II	26		
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	27		х
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
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)	20-		х
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	00-		v
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			,,
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	l		
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			١,,
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			İ
	or IV, and Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	1		
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		ļ
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	1		
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

	990 (2014) SHEET METAL WORKERS' LOCAL NO. 2 44-0429	770		_	P	age <b>5</b>
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance					_
	Check if Schedule O contains a response or note to any line in this Part V					لل
				<b></b>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	17	_		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0	_		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and					
	reportable gaming (gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	49	4		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	i)				37
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	_		3a	-	<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule (			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		ty			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin	ancial				х
	account)?			4a		
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 A		ta			
	(FBAR)	CCOun	ıs			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year.	tion?		5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	don.		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e		"		
-	organization solicit any contributions that were not tax deductible as charitable contributions?	•		6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or		7		
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	joods				
	and services provided to the payor?			7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s				
	required to file Form 8282?			7с		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontract	?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		·	7 <u>g</u>		
h	if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine	d by th	e			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	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	الممدا				
a	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a 10b		┥ .		
ь 11		[100]	·	-		
''	Section 501(c)(12) organizations. Enter  Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources			1		
U	against amounts due or received from them )	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		· · · · · · · · · · · · · · · · · · ·	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		1.20		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		· · · · · · · · · · · · · · · · · · ·	7		
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O					
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	13b		_		
С	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a	<u> </u>	X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	<u> 0</u>		14b		
					00/	<b>1</b>

Form 990 (2014) SHEET METAL WORKERS' LOCAL NO. 2 44-0429770

Form 990 (2014)

816-254-8021

KANSAS CITY

20

financial statements available to the public during the tax year

SHEET METAL WORKERS' LOCAL NO . 2

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

2902 BLUE RIDGE BLVD

MO 64130

Form 990 (2014)	SHEET	METAL	WORKERS'	LOCAL I	NO. 2	}	44-0429770	 Page 7

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. 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) Average hours per week (list any hours for	bo:	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				n ->	(D)  Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(***21033********************************	organization and related organizations
(1) ADAM HANSEN										
	1.00									
EXECUTIVE BOARD	0.00	X					_	2,163	0	0
(2) DANIEL LOFTIS										
	1.00					.		1 651	•	•
EXECUTIVE BOARD	0.00	X						1,651	0	0
(3) BOBBY CANTRELL	1 00	1								
HVHCVIMILUH DOLDD	1.00							1 520	0	0
EXECUTIVE BOARD  (4) DARYL OBERHOLTZ	0.00	X		-				1,539		<u> </u>
(4) DARIL OBERHOLIZ	1.00									
TRUSTEE	0.00	x						1,450	0	0
(5) JUSTIN COOK	0.00	A		-		<del>  -</del>		1,430		
(5) 5 5 5 1 1 1 6 5 6 1	1.00	1								
EXECUTIVE BOARD	0.00	x						1,370	0	0
(6) SHAWN GRAY		+			┢				<del></del>	
(2, 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1.00		-							
EXECUTIVE BOARD	0.00	x						1,234	0	0
(7) CHARLES COATS		1 -								
	1.00									
EXECUTIVE BOARD	0.00	X	İ					1,082	0	0
(8) JERRY LATTA								·		
	1.00				ŀ					
TRUSTEE	0.00	X						1,049	0	0
(9) RICK BELEW		]								
	1.00								_	
TRUSTEE	0.00	X		ļ		$\bot$		625	0	0
(10) GREGORY CHASTAIN										
	44.00								•	56 400
BUSINESS MANAGER	0.00	$\vdash$	<del> </del>	X	_	<b>├</b> ─├	_	109,781	0	56,433
(11) ALLEN JAY LIND	1 44 00									
DTW. VGT. 1 . GGG / MD. 2 . G	44.00			v				105 501	^	EE 710
FINANCIAL SEC/TREAS	0.00	1	L	X	L			105,581	0	55,718 Form <b>990</b> (2014)

Part VII

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

(F)

Name and title	Average hours per week (list any	bo	x, unle	check ess pe	rson i	than ones that the state of the	an ee)	Reportable compensation from the organization	Reportable compensation from related organizations (W-2/1099-MISC)		Estimated amount of other compensation from the		
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)		organiza and rela organiza	ation ated	
(12) GREGORY DAVISON	44 00												
BUSINESS REP	44.00			x				105,581	o		c	55,7	718
(13) GARY HUONKER	0.00	-	-	^	-	$\vdash$	-	103,301				,,,,	10
(10) 011111 110 01111	44.00												
BUSINESS REP	0.00			Х				105,581	0			55,7	718
(14) MARK SHUGHART													
	44.00												0
BUSINESS REP	0.00	-	_	X	_	ļ		105,581	0		5	55,7	18
(15)MORGAN WILLIAMS	44.00							]					
ORGANIZER	0.00			х				89,249	o		4	16,8	363
(16) JAMES FLACH	0.00			<u></u>			_	00,1					
(1.5)	44.00												
BUSINESS REP	0.00			Х				79,859	0		4	11,9	900
(17) JAMES HUFFMAN													
	44.00												
BUSINESS MANAGER	0.00	ļ	-	X	<u> </u>	<del> </del>	-	79,422	0			39,4	149
(18) TONY KEITHLEY	44.00			ļ									
BUSINESS REP	0.00			x				17,186	0			7,7	748
(19) JOHN SCARLETT		-											
, ,	2.00												
PRESIDENT	0.00			X				2,944	0	<u> </u>			0
1b Sub-total								812,928			4	15,2	265
c Total from continuation shee	ets to Part VII,	Sect	ion /	4				5,013 817,941				15,2	265
d Total (add lines 1b and 1c)  Total number of individuals (in	cluding but not	limite	d to	thos	ءرا ۾	ted a	hov	<del></del>	\$100,000 of	L		LJ , 4	205
reportable compensation from				11100									
												Yes	No
3 Did the organization list any for employee on line 1a? If "Yes,"								loyee, or highest compensa	ited		3	l	х
4 For any individual listed on line	e 1a, is the sum	of re	port	able	com	pens	satio						
organization and related organ	nizations greater	thar	1 \$15	50,00	ا د0(	f "Ye	s," c	complete Schedule J for su	ch		4	х	
individual  5 Did any person listed on line 1	a receive or acc	crue (	comi	oens	atior	n fror	n ar	ny unrelated organization or	· ındıvıdual				
for services rendered to the or											5		<u> </u>
Section B. Independent Contracto													
<ol> <li>Complete this table for your five compensation from the organic</li> </ol>	e highest comp	ensa	ited	inde	pend for t	dent o	cont	ractors that received more	than \$100,000 of	ear			
	(A) business address	omp	CIISE	ition	101 1	ije ce	T		(B) stion of services	<del>,,,,</del>		(C) mpensati	
Name and	business address						$\vdash$	Descrip	alion of services			mpensau	1011
							1						
						_							
							<u> </u>				<u> </u>		
							╀		<del></del>		<del> </del>		
			-	_			$\vdash$				<del>                                     </del>		<del></del> -
											<u>L</u> _		
2 Total number of independent of								se listed above) who					
received more than \$100,000	of compensatio	n fro	m_th	e org	anız	ation	1 <b>&gt;</b>	<del></del>	0		<u> </u>	m <b>990</b>	(2014)
DAA											run	550	(2014)

Part VII .Section A. Officers (A) Name and title	(B) Average hours per	Average Posi lours per (do not check r						(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)		icer a			Highest compensated employee		from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(12) WILLIAM LEWIS		$\vdash$				ä				
VICE PRESIDENT	1.00			x				1,993	0	(
(13) JASON FERGUSON	1.00									
RECORDING SECRETARY	0.00	ļ		x	<b></b>			1,770	0	(
(14) J.W. BROWN	1.00									
CONDUCTOR	0.00			х				682	0	
(15) TED BUBIEN	1.00									
WARDEN	0.00			x				568	0	
(16)										
(17)		-								
(18)										
(19)										
1b Sub-total		<u> </u>	<u> </u>	<u> </u>			<b>&gt;</b>	5,013		
c Total from continuation she	ets to Part VII,	Secti	ion A	4			<b>&gt;</b>			
d Total (add lines 1b and 1c)  Total number of individuals (in reportable compensation from			d to	thos	e lıs	ted a	bove	e) who received more than	\$100,000 of	
3 Did the organization list any fo								oyee, or highest compensa	ited	Yes No
employee on line 1a? If "Yes," 4 For any individual listed on line organization and related organ	e 1a, is the sum	of re	port	able	com	pens	atio			3
individual  5 Did any person listed on line 1									ındıvıdual	5
for services rendered to the or Section B Independent Contractor		res,	com	piete	30	neau	ie J	for such person		
Complete this table for your five compensation from the organical compensation from the organical compensation.										ear
	(A) business address								(B) tion of services	(C) Compensation
					-					
	-									
Total number of independent								se listed above) who		
received more than \$100,000										Form <b>990</b> (201

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) Total revenue (D) Revenue excluded from tax (B) Related or (C) Unrelated business exempt function under sections 512-514 revenue 1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1đ Program Service Revenue Contributions, 1e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f Busn Code 4,244,013 4,244,013 2a MEMBER ASSESSMENTS 62,615 62,615 b ORGANIZING SUBSIDY d f All other program service revenue g Total. Add lines 2a-2f  $\triangleright$ 4,306,628 Investment income (including dividends, interest, and other similar amounts) 27,644 27,644 Income from investment of tax-exempt bond proceeds ▶ Royalties (ı) Real (II) Personal 6a Gross rents b Less rental exps c Rental inc or (loss) Net rental income or (loss) 7a Gross amount from (i) Securities (II) Other sales of assets 529,403 27,571 other than inventor b Less cost or other 536,356 9,651 basis & sales exps -6,953 17,920 c Gain or (loss) 10,967 10,967 d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses ▶ c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities  $\triangleright$ 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 12,894 12,894 11a OTHER INCOME b d All other revenue Total. Add lines 11a-11d 12,894 4,330,489 Total revenue See instructions 4,358,133 27,644 Form 990 (2014)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (B) Program service expenses (A) Total expenses (C) Management and general expenses (D) Fundraising Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 150,308 150,308 and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 7,705 7,705 individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 27,292 27,292 Benefits paid to or for members Compensation of current officers, directors, 1,233,206 1,233,206 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 173,308 173,308 Other salaries and wages Pension plan accruals and contributions (include 33,408 33,408 section 401(k) and 403(b) employer contributions) 48,078 48,078 Other employee benefits 80,893 80,893 Payroll taxes Fees for services (non-employees) Management 60,422 60,422 Legal 175,265 175,265 Accounting d Lobbying Professional fundraising services See Part IV, line 17 4,062 4,062 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column 855 855 (A) amount, list line 11g expenses on Schedule O) 897,618 897,618 12 Advertising and promotion 111,480 111,480 13 Office expenses 21,001 21,001 14 Information technology 15 Rovalties 122,929 122,929 16 Occupancy 28,688 28,688 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 10,990 10,990 Conferences, conventions, and meetings 19 20 Interest 511,000 511,000 21 Payments to affiliates 56,588 56,588 22 Depreciation, depletion, and amortization 27,883 27,883 23 Insurance 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) CONTRACT LABOR SUPPORT 600,006 600,006 59,639 59,639 POLITICAL DIRECT EXPENSES 51,113 51,113 ORGANIZING EXPENSE c 50,627 50,627 MEMBER EVENTS 38,628 38,628 e All other expenses 0 4,582,992 4,582,992 Total functional expenses Add lines 1 through 24e 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 ▶ following SOP 98-2 (ASC 958-720)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year 700 700 Cash-non-interest bearing 1 2,260,100 2,463,933 2 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 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 Notes and loans receivable, net Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or 574,192 other basis Complete Part VI of Schedule D 10a 351,505 235,079 222,687 b Less accumulated depreciation 10b 10c 1,079,920 1,038,249 11 Investments—publicly traded securities 11 12 Investments-other securities See Part IV, line 11 12 Investments—program-related See Part IV, line 11 13 13 14 Intangible assets 14 21,382 18,001 15 15 Other assets See Part IV, line 11 3,539,737 3,801,014 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 38,456 11,612 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 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 1,565 of Schedule D 25 38,456 26 Total liabilities. Add lines 17 through 25 13,177 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 3,762,558 3,526,560 Unrestricted net assets 27 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds 3,526,560 3,762,558 33 Total net assets or fund balances 33 3,801,014 3,539,737 Total liabilities and net assets/fund balances

Form **990** (2014)

Form	990 (2014) SHEET METAL WORKERS' LOCAL NO. 2 44-0429770			Pa	ge <b>12</b>					
Pa	rt'XI Reconciliation of Net Assets									
	Check if Schedule O contains a response or note to any line in this Part XI									
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,3	358,	133					
2	Total expenses (must equal Part IX, column (A), line 25)	2 4,582,99								
3	Revenue less expenses Subtract line 2 from line 1	3	- 2	224,	859					
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,762,55							
5	Net unrealized gains (losses) on investments	5	5 -11,13							
6	Donated services and use of facilities	6								
7	Investment expenses	7								
8	Prior period adjustments	8								
9,	Other changes in net assets or fund balances (explain in Schedule O)	9								
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line									
	33, column (B))	10	3,5	26,	<u>560</u>					
Pa	rt XII Financial Statements and Reporting									
	Check if Schedule O contains a response or note to any line in this Part XII			<del></del>						
				Yes	No					
1	Accounting method used to prepare the Form 990 Cash Accrual X Other MODIFIED C	CASH								
	If the organization changed its method of accounting from a prior year or checked "Other," explain in									
	Schedule O									
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<u> 2a</u>	-	X					
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or									
	reviewed on a separate basis, consolidated basis, or both									
	Separate basis Consolidated basis Both consolidated and separate basis		1							
b	Were the organization's financial statements audited by an independent accountant?		<u>2b</u>	X	<del> </del>					
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		1							
	separate basis, consolidated basis, or both									
	Separate basis X Consolidated basis Both consolidated and separate basis									
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			٠,						
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X						
	If the organization changed either its oversight process or selection process during the tax year, explain in									
2-	Schedule O									
зa	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in									
h	the Single Audit Act and OMB Circular A-133?  If "Yos," did the exceptation underse the required audit or coults? If the exceptation did not underse the		3a	+	<del>  -</del>					
D	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3.							
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	90	0 (2014)					
			F	orm ゴゴ	U (2014)					

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

# Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

Nam	e of organization	·		Employer ident	fication number
	SHEET METAL WORKERS	LOCAL NO. 2		44-04297	70
Pa	rt I-A Complete if the organization is exem	pt under section 501(c	;) or is a section	n 527 organizatio	n.
1	Provide a description of the organization's direct and indire	ct political campaign activities	in Part IV		
2	Political expenditures			▶ \$	59,668
3	Volunteer hours			0	
Pa	rt I-B Complete if the organization is exem	pt under section 501(c	:)(3).	-	
1	Enter the amount of any excise tax incurred by the organization	ation under section 4955		▶ \$	
2	Enter the amount of any excise tax incurred by organization	n managers under section 49	55	<b>▶</b> \$	
3	If the organization incurred a section 4955 tax, did it file Fo	rm 4720 for this year?			Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV				
Pa	rt I-C Complete if the organization is exem	pt under section 501(c	c), except section	on 501(c)(3).	
1	Enter the amount directly expended by the filing organization	on for section 527 exempt fun	ction		
	activities			<b>▶</b> \$	59,668
2	Enter the amount of the filing organization's funds contribut	ted to other organizations for	section		
	527 exempt function activities			▶ \$	
3	Total exempt function expenditures Add lines 1 and 2 Ent	er here and on Form 1120-PC	DL,		
	ine 17b			▶ \$	59,668
4	Did the filing organization file Form 1120-POL for this year	?			Yes X No
5	Enter the names, addresses and employer identification nu	ımber (EIN) of all section 527	political organization	ns to which the filing	
	organization made payments. For each organization listed,	enter the amount paid from t	he filing organization	's funds Also enter	
	the amount of political contributions received that were pro	mptly and directly delivered to	a separate political	organization, such	
	as a separate segregated fund or a political action committed	ee (PAC) If additional space	is needed, provide in	nformation in Part IV	<del></del>
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and promptly and directly
				funds If none enter -0-	delivered to a separate
					political organization if
					none, enter -0-
(1)	SMW LOCAL #2 - DIRECTLY EXPENDED	KANSAS CITY			
	2902 BLUE RIDGE BLVD.	MO 64129	44-0429770	59,668	
(2)					
(3)					
(4)					
(5)					
(6)					
		l	1		

Sche	edule C (Form 990 or 990-EZ) 2014 SHEE 3	METAL WO	RKERS' LOCA	L NO. 2	4	44-0429770	Page	<u> 2</u>
Pa	art II-A Complete if the organi	zation is exemp	t under section	501(c)(3) an	d filed	Form 5768 (ele	ection under	
	section 501(h)).							_
A	Check ► ☐ if the filing organization						up members	
_	name, address, EIN, Check ► ☐ if the filing organization							
				provisio	lis app		(b) Affiliated	
	(The term "expenditures"	bying Expendit			orga	(a) Filing inization's totals	group totals	
1:	a Total lobbying expenditures to influence p						<del></del>	
_	o Total lobbying expenditures to influence a		·					
(	Total lobbying expenditures (add lines 1a	=	, 0,					
c	d Other exempt purpose expenditures							
6	Total exempt purpose expenditures (add li	nes 1c and 1d)						
	f Lobbying nontaxable amount Enter the ar	nount from the follow	ving table in both					
	columns							
	If the amount on line 1e, column (a) or (b) is	The lobbying no	ntaxable amount is:					
	Not over \$500,000	20% of the amour	nt on line 1e					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15	% of the excess over \$50	000,000				
	Over \$1,000,000 but not over \$1,500,000	<del>-  </del>	% of the excess over \$1,					
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% \$1,000,000	of the excess over \$1,5	00,000				
	Over \$17,000,000		 					
	g Grassroots nontaxable amount (enter 25%					_		
r	h Subtract line 1g from line 1a If zero or les	•						_
	Subtract line 1f from line 1c If zero or less		did the ergenization	filo Form 4720	L		<del></del>	
	j If there is an amount other than zero on eigenfullig reporting section 4911 tax for this year?	ther line in or line in	, did the organization	ille Form 4720			Yes N	^
	reporting section 4511 tax for this year.	4 Vans Avanas	ing Daried Under	nastian FO1/I			1 1 1 9 1 1 1 1	_
	(Some organizations that mad		ing Period Under s			of the five colum	nns helow	
	· —	-	nstructions for lin	-		or the live colum	iiiis below.	
	_			co za anoag	,			
	Lo	bbying Expendit	ures During 4-Yea	r Averaging	Period			
	Calendar year (or fiscal year				İ			
	beginning in)	(a) 2011	(b) 2012	(c) 201	3	(d) 2014	(e) Total	
2	a Lobbying nontaxable amount					·		
ı	b Lobbying ceiling amount							
	(150% of line 2a, column(e))							
	c Total lobbying expenditures							
(	d Grassroots nontaxable amount					<u>-</u>		
(	e Grassroots ceiling amount							
	(150% of line 2d, column (e))							
	• Grassroots Johnwan expenditures							

### Part IV Supplemental Information

and political expenditure next year?

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information

SCHEDULE C, PART I-A, LINE 1

Taxable amount of lobbying and political expenditures (see instructions)

CONTRIBUTIONS TO POLITICAL CANDIDATES AND COMMITTEES.

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying

Schedule C (Form 990 or 990-EZ) 2014 SHEET METAL WORKERS' LOCAL NO. 2 44-0429770

Part IV Supplemental Information (continued)

Page 4

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

Open to Public Inspection

OMB No 1545-0047

Name of the organization

Employer identification number

			. ,,	
S	HEET METAL WORKERS' LOCAL NO. 2		44-04	129770
Pa	Organizations Maintaining Donor Advised F Complete if the organization answered "Yes" to		ccount	s.
	Complete if the organization answered Tes to	(a) Donor advised funds	/h	Funds and other accounts
4	Total number at and of year	(a) bonor advised failes	15,	Tarias and onici accounts
1	Total number at end of year  Aggregate value of contributions to (during year)			
2	Aggregate value of grants from (during year)			
3				
4 5	Aggregate value at end of year  Did the organization inform all donors and donor advisors in writing the	hat the assets held in donor advised		
5	funds are the organization's property, subject to the organization's ex			Yes No
c	Did the organization inform all grantees, donors, and donor advisors			1es 10
6	only for charitable purposes and not for the benefit of the donor or do	• •		
	conferring impermissible private benefit?	onor advisor, or for any other purpose		Yes No
P	art II Conservation Easements.			
	Complete if the organization answered "Yes" to	Form 990, Part IV, line 7		
1	Purpose(s) of conservation easements held by the organization (che			
	Preservation of land for public use (e.g., recreation or education)			area
	Protection of natural habitat	Preservation of a certified historic	structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified con-	servation contribution in the form of a conse		
	easement on the last day of the tax year		<del> </del>	Held at the End of the Tax Year
а			2a	
b	, ,		2b	
С		• •	2c	
d	Number of conservation easements included in (c) acquired after 8/1	17/06, and not on a	_	
	historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, released,	extinguished, or terminated by the organizat	tion during	the
	tax year ▶			
4	Number of states where property subject to conservation easement			
5	Does the organization have a written policy regarding the periodic mi violations, and enforcement of the conservation easements it holds?			☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enfo		ear	
U	b	orolling conservation easements earling the y	ou,	
7	Amount of expenses incurred in monitoring, inspecting, and enforcin	g conservation easements during the year		
•	<b>▶</b> \$	<b>3</b>		
8	Does each conservation easement reported on line 2(d) above satisf	fy the requirements of section 170(h)(4)(B)(i	)	
	and section 170(h)(4)(B)(II)?			Yes No
9	In Part XIII, describe how the organization reports conservation ease	ements in its revenue and expense statemer	nt, and	
	balance sheet, and include, if applicable, the text of the footnote to the	he organization's financial statements that d	escribes th	ne
	organization's accounting for conservation easements			
P	art III Organizations Maintaining Collections of Ar		Similar A	Assets.
	Complete if the organization answered "Yes" to			
1a	If the organization elected, as permitted under SFAS 116 (ASC 958)			eet
	works of art, historical treasures, or other similar assets held for pub		erance of	
	public service, provide, in Part XIII, the text of the footnote to its final			
b	If the organization elected, as permitted under SFAS 116 (ASC 958)			
	works of art, historical treasures, or other similar assets held for pub	·	erance of	
	public service, provide the following amounts relating to these items			•
	(i) Revenues included in Form 990, Part VIII, line 1		<b>P</b>	\$
_	(ii) Assets included in Form 990, Part X	and the annual and the second and th	Number 41: -	\$
2	If the organization received or held works of art, historical treasures,		ovide the	
	following amounts required to be reported under SFAS 116 (ASC 95	relating to these items		<b>c</b>
a			<b>P</b>	\$
r	Assets included in Form 990, Part X			a)

Schedule D (Form 990) 2014 SHEET N	IETAL WORKER	S' LOCAL NO	0. 2	44-0	<u>429770</u>	Page 2
Part III Organizations Maintair	ning Collections o	f Art, Historical T	Treasures,	or Othe	r Similar Asse	ts (continued)
3 Using the organization's acquisition, acc collection items (check all that apply)	ession, and other record	ds, check any of the fo	ollowing that a	are a signif	icant use of its	
a Public exhibition	d 🗌	Loan or exchange pr	ograms			
b Scholarly research	е 🗌	Other				
c Preservation for future generations						
4 Provide a description of the organization	's collections and explai	n how they further the	organization	's exempt	purpose in Part	
XIII						
5 During the year, did the organization soli	cit or receive donations	of art, historical treas	ures, or other	sımılar		
assets to be sold to raise funds rather th		part of the organization	n's collection	2		Yes No
Part IV Escrow and Custodial	•			_		_
Complete if the organiza	tion answered "Yes	s" to Form 990, Pa	art IV, line s	3, or repo	orted an amoun	t on Form
990, Part X, line 21		_				
1a Is the organization an agent, trustee, cus	stodian or other intermed	diary for contributions	or other asse	ets not		О., О.,
included on Form 990, Part X?						Yes No
<b>b</b> If "Yes," explain the arrangement in Part	XIII and complete the fo	ollowing table				Amount
. Danier and halance					4-	Amount
c Beginning balance					1c	
d Additions during the year					1d	<del></del>
e Distributions during the year					1e	
f Ending balance	on Form 000 Bort V lin	21 for approve or all	atadial assau	صدادها ما م	1f	Yes No
<ul><li>2a Did the organization include an amount of</li><li>b If "Yes," explain the arrangement in Part</li></ul>		•		•		res No
Part V Endowment Funds.	All Check here if the e	xpianation has been	provided in P	ail Aili		
Complete if the organiza	tion answered "Yes	" to Form 990. Pa	art IV line	10		
Complete it the organiza	(a) Current year	(b) Prior year	(c) Two ye		(d) Three years back	(e) Four years back
1a Beginning of year balance	(.,,,	(-, ,				
b Contributions						
c Net investment earnings, gains, and						
losses						
d Grants or scholarships						
e Other expenditures for facilities and						
programs						
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentage of the	current year end balance	ce (line 1g, column (a)	)) held as			
a Board designated or quasi-endowment	%					
b Permanent endowment ►	%					
c Temporarily restricted endowment ▶	%					
The percentages in lines 2a, 2b, and 2c	should equal 100%					
3a Are there endowment funds not in the po	ssession of the organiz	ation that are held and	d administere	d for the		<del></del>
organization by						Yes No
(i) unrelated organizations						3a(ı)
(ii) related organizations						3a(ıi)
b If "Yes" to 3a(II), are the related organization	•					3b
4 Describe in Part XIII the intended uses o		owment funds				<del></del>
Part VI Land, Buildings, and E		" to Earn 000 D	- سدال/ انسا	110 0==	Earm 000 Ded	V line 10
Complete if the organiza						
Description of property	(a) Cost or other (investment	' '	r other basis ther)		Accumulated epreciation	(d) Book value
1a Land	(macamient	,		1	-p. 30idio//	
1a Land						
b Buildings	169	,300		<del> </del>	40,086	128,214
<ul> <li>c Leasehold improvements</li> <li>d Equipment</li> </ul>		,892		<del> </del>	311,419	94,473
e Other	100	, , , _		<del> </del>		
Total Add lines 1a through 1e (Column (d) m	ust equal Form 990. Pa	rt X, column (B). line	10c)	<del></del>	•	222,687
		, , , , , , , , , , , , , , , , , , , ,	- /			

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	OTHER LIABILITIES	1,565
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
_(9)		
Tota	I (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	1,565

<sup>2.</sup> Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2014 SHEET METAL WORKERS' LOCAL NO. 2 44-04297	/ 0	Page 4
	Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a		
1	Total revenue, gains, and other support per audited financial statements	1	4,488,121
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a -11,139		
b		1	
С	Recoveries of prior year grants 2c	1	
d	141 127	7 I	
е	Add lines 2a through 2d	2e	129,988
3	Subtract line 2e from line 1	3	4,358,133
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII )	1 1	
	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	4,358,133
Pa	ert XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Returr	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a		
1	Total expenses and losses per audited financial statements	1	4,791,888
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b	1	
	Other losses 2c	1	
d	Other (Describe in Part XIII ) 2d 208,896	i	
е	Add lines 2a through 2d	7 2e	208,896
3	Subtract line 2e from line 1	3	4,582,992
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIII )	1	
	Add lines 4a and 4b	4c	
5		5	4,582,992
Pá	art XIII Supplemental Information.		
	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, line 4, lines 1b and 2b, Part V, line 4, lines 1b and 2b, Part V, line 4, lines 1b and 2b, Part V, line 4, lines 1b and 2b, Part V, line 4, lines 1b and 2b, Part V, line 4, lines 1b and 2b, Part V, lines 2b and 2b, Part V, lines 2b and 2b, Part V, lines 2b and 2b, P	Part X, lı	ne
	art XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information		
		OTH	ER
В	UILDING FUND REPORTED ON SEPARATE 990 EIN 43-1223980	\$	141,127
ъ	ART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS	_ ОТ	urp
P	ARI XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS	- 011	AEK
R	UILDING FUND REPORTED ON SEPARATE 990 EIN 43-1223980	\$	220,316
٠		•	
В	UILDING FUND REPORTED ON SEPARATE 990 EIN 43-1223980	\$	-19,847
R	UILDING FUND REPORTED ON SEPARATE 990 EIN 43-1223980	\$	8,427
			- <b>,</b> ·

Schedule D (Form 990) 2014 SHEET METAL WORKERS' LOCAL NO. 2 44-0429770

Part XIII Supplemental Information (continued)

Page 5

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Υ-

**SCHEDULE 1** (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Part

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

2014 OMB No 1545-0047

▶ Attach to Form 990

Open to Public Inspection

Employer identification number

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

ž X Yes 44-0429770 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and SHEET METAL WORKERS' LOCAL NO. General Information on Grants and Assistance the selection criteria used to award the grants or assistance?

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Dod IV line 21 for any recipient that received more than \$5,000. Dod II can be disalicated if additional space is needed. 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part =

Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	received more i	than \$5,0	00 Part II can be	duplicated if addit	ional space is n	eeded	
1 (a) Name and address of organization	(b) EIN	(c) IRC	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	(g) Description of	(h) Purpose of grant
or government		if applicable	grant	cash assistance	other)	non-cash assistance	or assistance
(1) GREAT PLAINS DISTRICT COUNCIL							
4208 PARTRIDGE WAY NO UNIT 2							MEMBERSHIP DUES
PEORIA IL 61615	06-1694040	501C5	7,200				
(2) GTR KC BLDG & CONTR TRADES COUNCIL							
400 S MAIN							MEMBERSHIP DUES
INDEPENDENCE MO 64050	44-0206490	501CS	40,800				
(3) GREATER KANSAS CITY AFL-CIO							
1021 PENNSYLVANIA	·						MEMBERSHIP DUES
KANSAS CITY MO 64105	44-0643426	501C5	6,750				
(4) MISSOURI AFL-CIO							
227 JEFFERSON ST							MEMBERSHIP DUES
JEFFERSON CITY MO 65101	44-0150375	501C5	7,480				
(5) WORKING FAMILIES FRIEND							
1021 PENNSYLVANIA							DONATION
KANSAS CITY MO 64105	65-1169138	50103	29,000				
(6) MO ST BLDG & CONST TRADES COUNCIL							
308 E HIGH NO 104							MEMBERSHIP DUES
JEFFERSON CITY MO 65102	43-1003798	501C5	6,408				
(2)							
(8)							
(6)							
							-

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2014)

رم ما

44-0429770 7 SHEET METAL WORKERS' LOCAL NO. Schedule I (Form 990) (2014)

Grants and Other Assistance to Domestic Individuals. Complete of the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be discussed if additional space is needed Part III

	The second secon				
(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book,   (f) Description of non-cash assistance
	recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
; ; ;	7	7			
SALTAL	7.7	001,1			
2 YOUTH ACTIVITIES	40	4,000			
RDSHIP DONATIONS	2	2,605			
plemental Information. Prov	ide the information rec	juired in Part I, line 2	, Part III, column (b)	and any other additional	nformation
	1 ADULT ACTIVITIES 2 YOUTH ACTIVITIES 3 MEMBER HARDSHIP DONATIONS 4 5 6 7 7 Part IV Supplemental Information. Prov	IVITIES 11  INDITIES 40  RDSHIP DONATIONS 5	TVITIES 11 1,100  TVITIES 40 4,000  RDSHIP DONATIONS 5 2,605  Slemental Information. Provide the information required in Part I, line 2	I	DONATIONS 5 formation. Provide the information required in Pa

# PART IV - ADDITIONAL INFORMATION

\$100 PER PERSON, TO DEFRAY THE COST OF THE INDIVIDUAL PARTICIPATING IN AN ADULT AND YOUTH ACTIVITIES CONSIST OF SUPPORT TO INDIVIDUALS, LIMITED TO APPROVED ACTIVITY, SUCH AS A YOUTH OR ADULT SPORTS LEAGUE, BOY OR GIRL SCOUTS, OR SIMILAR COMMUNITY BENEFIT ORGANIZATIONS.

## SCHEDULE J (Form 990)

**Compensation Information** 

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

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

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

Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

SHEET METAL WORKERS' LOCAL NO. 2

Employer identification number 44 - 0429770

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			ĺ
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)			1
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			1
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
				ĺ
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line			i
	1a?	2		<u> </u>
3	Indicate which, if any, of the following the filing organization uses 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			ĺ
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III			ĺ
	Compensation committee Written employment contract			l
	Independent compensation consultant Compensation survey or study			l
	Form 990 of other organizations X Approval by the board or compensation committee			ĺ
				ĺ
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			ĺ
	organization or a related organization			ĺ
а	Receive a severance payment or change-of-control payment?	4a		X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X X
·	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III			
	The second of this second of the persons and provide the approach amounts for each term in the transfer			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			ĺ
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			ĺ
J	compensation contingent on the revenues of			
_		5a		ĺ
	The organization?	5b	<del>-</del>	<del></del>
D	Any related organization?	30		<del></del>
	If "Yes" to line 5a or 5b, describe in Part III			
_	For a second of Form CCO. Dod VIII. Control A. Inc. 4a. did the concentration on the control of			
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			ĺ
	The organization?	<u>6a</u>		
þ	Any related organization?	6b	<del> </del>	
	If "Yes" to line 6a or 6b, describe in Part III			
7			:	
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		<del> </del>
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8	ļ	ļ
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9_		

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44-0429770 ~ SHEET METAL WORKERS' LOCAL NO. Schedule J (Form 990) 2014

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 Part II

Note The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

NOTE THE SALL OF COLUMNS (D)(1) (II) TO EACH INSTANTIAL HIGH MANAGEMENT OF THE TAIL VIII) SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII) SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII SECTION OF THE TAIL VIII	מפו באחמו נווכ נטנמו מו	House of Losin 330, r ar	ני און, טפכנוטוו א, וווופ	ia, applicable colulli	(U) allu (E) alliuul	ILS IOI (IIIdi IIIOIVIOUAI	
	(B) Breakdowr	(B) Breakdown of W-2 and/or 1099-MISC compensation	ISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title	(I) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(a)(ı)(a)	in column (B) reported as deferred in prior Form 990
GREGORY CHASTAIN	(1) 109,7	81 0	0	45,910	10,523	166,214	0
1 BUSINESS MANAGER	(11)	0 0		0	0	0	0
ALLEN JAY LIND	(1) 105,581	81 0	0	45,195	10,523	161,299	0
2 FINANCIAL SEC/TREAS	(11)	0 0	[ o	0	0	0	0
GREGORY DAVISON	(1) 105,58	Т		45,195	10,523	161,299	0
3 BUSINESS REP	(E)	0	0	0	0	0	0
GARY HUONKER	(1) 105,5	581 0	0	45,195	10,523	161,299	0
4 BUSINESS REP	<b>(E)</b>	0		0	0	0	0
MARK SHUGHART	(1) 105,581		0	45,195	10,523	161,299	0
5 BUSINESS REP	(m)	0 0	0	0	0	0	0
	ε						
9	(11)						
	Θ						
7	(11)						
	(0)						
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Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Schedule J (Form 990) 2014 SHEET METAL WORKERS' LOCAL NO. Supplemental Information Part III

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

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

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization

SHEET METAL WORKERS' LOCAL NO. 2

Employer identification number 44 - 0429770

FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS THE PARENT ORGANIZATION CHANGED ITS NAME FROM SHEET METAL WORKERS INTERNATIONAL ASSOCIATION (SMWIA) AS A RESULT OF A MERGER WITH THE UNITED TRANSPORTATION UNION (UTU) FORMING THE INTERNATIONAL ASSOCIATION OF SHEET METAL, AIR, RAIL AND TRANSPORTATION WORKERS (SMART). AS A RESULT OF THIS MERGER THE PARENT ORGANIZATION INCREASED THE NUMBER OF GENERAL VICE PRESIDENTS FROM ELEVEN (11) TO SEVENTEEN (17).

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS
MEMBERS OF THE GOVERNING BODY ARE ELECTED BY THE MEMBERS OF THE LOCAL
UNION FOR A TERM OF THREE YEARS.

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS

DECISIONS OF THE GOVERNING BODY ARE APPROVED BY THE MEMBERS OF THE LOCAL

UNION AT THEIR MONTHLY MEETINGS.

FORM 990, PART VI, LINE 10B - POLICIES AND PROCEDURES GOVERNING CHAPTERS
THE LOCAL UNION FOLLOWS THE POLICIES AND PROCEDURES OUTLINED IN THE
CONSTITUTION OF THE SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION AND THE
BY-LAWS OF THE SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION LOCAL UNION
NO. 2.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE FORM 990 RETURN IS REVIEWED BY THE ORGANIZATION'S FINANCIAL
SECRETARY/TREASURER, PRIOR TO BEING FILED.

Employer identification number

SHEET METAL WORKERS' LOCAL NO. 2

44-0429770

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL THE COMPENSATION LEVELS OF ALL OFFICERS ARE AS OUTLINED IN THE BY-LAWS OF THE LOCAL UNION.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

ALL COMPENSATION LEVELS OF OTHER OFFICERS ARE ALSO OUTLINED IN LOCAL'S

BY-LAWS. THE LOCAL'S OFFICE STAFF COMPENSATION LEVELS ARE

APPROVED BY THE LOCAL'S OFFICERS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION REQUESTS FOR A COPY OF THE FORM 1024, "APPLICATION FOR RECOGNITION OF EXEMPTION UNDER SECTION 501(C)", ARE REFERRED TO THE NATIONAL HEADQUARTERS OF THE UNION WHERE IT IS MAINTAINED.

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SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

Part

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Related Organizations and Unrelated Partnerships

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

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

2014

Open to Public Inspection

(f) Direct controlling Employer identification number 44-0429770 (e) End-of-year assets Identification of Disregarded Entities Complete of the organization answered "Yes" on Form 990, Part IV, line 33 (d) Total income (c)
Legal domicile (state
or foreign country) (b) Primary activity SHEET METAL WORKERS' LOCAL NO. (a) Name, address and EIN (if applicable) of disregarded entity

entity

(g) Section 512(b)(13) controlled entity? No × × × Yes Identification of Related Tax-Exempt Organizations Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year (f) Direct controlling entity FILER N/A N/A (e)
Public charity status
(if section 501(c)(3)) (d) Exempt Code section 501C5 501C5 501C2 (c) Legal domicile (state or foreign country) S ပ္က ğ INTL ASSOC POLITICAL (b) Primary activity BUILDING 43-1223980 44-0429770 52-1557564 SMW L2 LEGISLATIVE ACTION COMMITTEE SMW LOCAL NO 2 BUILDING ASSOCIATION 1750 NEW YORK AVENUE, NW - 6TH FLR (a)Name, address, and EIN of related organization 20006 MO 64129 MO 64129 SMW INTERNATIONAL ASSOCIATION 2902 BLUE RIDGE BLVD 2902 BLUE RIDGE BLVD KANSAS CITY KANSAS CITY WASHINGTON Part II Ξ 3 ල €

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

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Schedule R (Form 990) 2014

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44-0429770

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Page 2 Schedule R (Form 990) 2014 (k) Percentage (i) Section 512(b)(13) controlled entity? ownership ş (J) General or managing partner? Yes No 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 Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year Percentage ownership £ amount in box 20 of Schedule K-1 Code V—UBI (Form 1065) end-of-year assets Share of (h) Dispro-portionate alloc ? Yes No **6** (g) Share of end-ofyear assets Share of total Share of total (C corp, S corp, Type of entity or trust) (d)
Direct controlling
entity (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) (d) Direct controlling (c) Legal domicile foreign country) (state or (c) Legal domicile (state or foreign country) SHEET METAL WORKERS' LOCAL NO. Primary activity Primary activity ê Name, address, and EIN of related organization Name address, and EiN of related organization Schedule R (Form 990) 2014 Part III Part IV ¥ A € lΞ 2 <u>|</u>ල 1  $\equiv$ 2 <u>@</u>

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Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
_	

- Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
  - b Gift, grant, or capital contribution to related organization(s)
    - c Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- f Dividends from related organization(s)
- g Sale of assets to related organization(s)
- h Purchase of assets from related organization(s)
- i Exchange of assets with related organization(s)
- j Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- I Performance of services or membership or fundraising solicitations for related organization(s)
  - m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- p Reimbursement paid to related organization(s) for expenses
- q Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds s Other transfer of cash or property from related organization(s)

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(1) SMW LOCAL NO 2 BUILDING ASSOCIATION  (2) SMW INTERNATIONAL ASSOCIATION  (3) SMW INTERNATIONAL ASSOCIATION  (4) SMW LOCAL NO 2 BUILDING ASSOCIATION  (5) SMW INTERNATIONAL ASSOCIATION  (6) SMW LOCAL NO 2 BUILDING ASSOCIATION  (7) SMW LOCAL NO 2 BUILDING ASSOCIATION  (8) SMW LOCAL NO 2 BUILDING ASSOCIATION  (9) SMW LOCAL NO 2 BUILDING ASSOCIATION  (10) SMW LOCAL NO 2 BUILDING ASSOCIATION  (11) SMW LOCAL NO 2 BUILDING ASSOCIATION  (12) SMW LOCAL NO 2 BUILDING ASSOCIATION  (13) SMW LOCAL NO 2 BUILDING ASSOCIATION  (14) SWW LOCAL NO 2 BUILDING ASSOCIATION  (15) SMW LOCAL NO 2 BUILDING ASSOCIATION  (16) SMW LOCAL NO 2 BUILDING ASSOCIATION  (17) SMW LOCAL NO 3 BUILDING ASSOCIATION  (18) SMW LOCAL NO 3 BUILDING ASSOCIATION  (18) SMW LOCAL NO 3 BUILDING ASSOCIATION  (18) SMW LOCAL NO 3 BUILDING ASSOCIATION  (18) SMW LOCAL NO 3 BUILDING ASSOCIATION  (18) SMW LOCAL NO 3 BUILDING ASSOCIATION  (18) SMW LOCAL NO 3 BUILDING ASSOCIATION  (18) SMW LOCAL NO 3 BUILDING ASSOCIATION  (18) SMW LOCAL NO 3 BUILDING ASSOCIATION  (18) SMW LOCAL NO 3 BUILDING ASSOCIATION  (18) SMW LOCAL NO 3 BUILDING ASSOCIATION  (18) SMW LOCAL NO 3 BUILDING ASSOCIATION  (18) SMW LOCAL NO 3 BUILDING ASSOCIATION  (18) SMW LOCAL NO 3 BUILDING ASSOCIATION  (18) SMW LOCAL NO 3 BUILDING ASSOC			6	management and address of the second	
SMW LOCAL NO 2 BUILDING ASSOCIATION  SMW INTERNATIONAL ASSOCIATION  SMW INTERNATIONAL ASSOCIATION  SMW LOCAL NO 2 BUILDING ASSOCIATION  SMW LOCAL NO 2 BUILDING ASSOCIATION  P 19,847 ACTU		(e)	(q)	(c)	(p)
SMW LOCAL NO 2 BUILDING ASSOCIATION  SMW INTERNATIONAL ASSOCIATION  SMW LOCAL NO 2 BUILDING ASSOCIATION  P  P  P  P  P  P  P  P  P  P  P  P  P		Name of related organization	Transaction	Amount involved	Method of determining amount involved
SMW LOCAL NO 2 BUILDING ASSOCIATION  SMW INTERNATIONAL ASSOCIATION  SMW LOCAL NO 2 BUILDING ASSOCIATION  P			type (a-s)		
SMW INTERNATIONAL ASSOCIATION  SMW INTERNATIONAL ASSOCIATION  SMW LOCAL NO 2 BUILDING ASSOCIATION  P	(5)	SMW LOCAL NO 2 BUILDING ASSOCIATION	ж	102,757	
SMW INTERNATIONAL ASSOCIATION  SMW LOCAL NO 2 BUILDING ASSOCIATION  P	(2)	SMW INTERNATIONAL ASSOCIATION	ĸ	511,000	ACTUAL CASH PAYMENTS
SMW LOCAL NO 2 BUILDING ASSOCIATION P	(3)	SMW INTERNATIONAL ASSOCIATION	တ	62,615	ACTUAL CASH RECEIPTS
(5)	(4)	SMW LOCAL NO 2 BUILDING ASSOCIATION	<u>Ω</u> ,	19,847	ACTUAL CASH PAYMENTS
(9)	(5)				
	(9)				

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Part VI

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

Part VII Supplemental Information

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

SCHEDULE R - ADDITIONAL INFORMATION

PART II

SHEET METAL WORKERS LOCAL NO 2 BUILDING ASSOCIATION IS A FUND OF THE LOCAL, THE ACTIVITIES OF WHICH ARE REPORTED IN A SEPARATE 990.

SHEET METAL WORKERS LOCAL NO 2 LEGISLATIVE ACTION COMMITTEE IS A FUND OF THE LOCAL, THE ACTIVITIES OF WHICH ARE REPORTED IN THIS 990.