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Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

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

Open to Public Inspection

A F	or the	2014 calendar year, or tax year beginning JUL 1, 2014 and ending	JUN 30, 2015	
Вс	heck if	C Name of organization	D Employer identifi	cation number
a	pplicable	LOCAL UNION NO. 82 UNITED BROTHERHOOD	1 ' '	
	Addre:			
	Name chang		− 90-0	683300
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/sui		
\vdash	Final	200 1EMU CMDEEM COLUMN	•	453 1301
	-Jreturn/ termin ated		G Gross receipts \$	236,235.
	Amen		H(a) Is this a group re	
\vdash	⊒return ∏Applic		for subordinates	
_	tion pendir			
	Tay ay		H(b) Are all subordinates in If "No." attach a	list. (see instructions)
				•
		te: ► N/A organization: Corporation Trust Association X Other ► LABOR L Ye		n number ▶ 0143
	art I	organization: Corporation Trust Association X Other ► LABOR L Ye Summary	ar of formation: 2011 M	State of legal domicile: MT
٦				
	1	Briefly describe the organization's mission or most significant activities: UNION HAI	. <u> </u>	
cțivities & Governance		Check this box if the organization discontinued its operations or disposed of mo	ere then OEO/ of the not or	
₩ Ţ	I	·	ı	10
~ <u>@</u>	I	Number of voting members of the governing body (Part VI, line 1a)	. 3	
(ex)	I	Number of independent voting members of the governing body (Part VI, line 1b)	. 4	0
Head	1	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	6
3	1	Total number of volunteers (estimate if necessary)	6	7
S.	1.	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	<u>γ b</u>	Net unrelated business taxable income from Form 990-T, line 34	. 7b	0.
			Prior Year	Current Year
å	1	Contributions and grants (Part VIII, line 1h)	0.	0.
Revenue		Program service revenue (Part VIII, line 2g)	224,467.	236,235.
ě	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
_	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	-	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	224,467.	236,235.
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	55,497.	58,049.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
×	b	Total fundraising expenses (Part IX, column (D), line 25)		
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	138,090.	149,214.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	193,587.	207,263.
	19	Revenue less expenses Subtract line 18 from line 12	30,880.	28,972.
Soc			Beginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)	72,825.	101,858.
\$ 6	21	Total liabilities (Part X, line 26)	582.	643.
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20	72,243.	101,215.
Pá	art II	Signature Block		
Und	er pena	alties of perjury, I declare that I have examined this return, including accompanying schedules and stat	ements, and to the best of m	y knowledge and belief, it is
true	, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of which prepa	rer has any knowledge.	
			8/2	0/2015
Sig	n	Signature of office	Date /	
Her	·e	MARIO MARTÍNEZ, FINANCIAL SECRETARY		
		Type or print name and title		
		Print/Type preparer's name Preparer's signature	Date Check [PTIN
Paid	đ	DON A CURTIS DON A CURTIS	08/08/15 self-emplo	P00010775
Pre	parer	Firm's name DON A CURTIS & ASSOCIATES PLLC	Firm's EIN	26-4388619
Use	Only	Firm's address P.O. BOX 7359		
		COVINGTON, WA 98042	Phone no. 25	3.631.2106
Ma	y the II	RS discuss this return with the preparer shown above? (see instructions)		Yes No
	001 11-0	· · · · · · · · · · · · · · · · · · ·		Form 990 (2014)

LOCAL UNION NO. 82 UNITED BROTHERHOOD OF CARPENTERS AND JOINERS OF AMERICA

	990 (2014) OF CARPENTERS AN		MERICA	90-0683300	Page 2
Par	t III Statement of Program Service Accomp	olishments			
	. Check if Schedule O contains a response or note to	any line in this Part III		·_	
1	Briefly describe the organization's mission				
	TO SECURE BETTER WAGES, BENEF	FITS AND WORKIN	G CONDITIONS	FOR THOSE I	N
	THE CARPENTER TRADE		<u>.</u>		
2	Did the organization undertake any significant program se	rvices during the year which	were not listed on		
	the prior Form 990 or 990-EZ?			Yes	X No
	If "Yes," describe these new services on Schedule O				
3	Did the organization cease conducting, or make significant	it changes in how it conduct	s, any program services?	. Yes	X No
	If "Yes," describe these changes on Schedule O				
4	Describe the organization's program service accomplishment	nents for each of its three larg	gest program services, as	measured by expenses	3
	Section 501(c)(3) and 501(c)(4) organizations are required	to report the amount of gran	nts and allocations to othe	rs, the total expenses,	and
	revenue, if any, for each program service reported				
4a	(Code) (Expenses \$	including grants of \$) (Revenu	ue \$)
	SECURE BETTER WAGES, BENEFITS	AND WORKING (CONDITIONS FOR	R THOSE IN T	HE
	CARPENTER TRADE				
			-		
					_
4b	(Code) (Expenses \$	including grants of \$) (Revenu	 ue \$	<u>_</u>
					
				· · · · · · · · · · · · · · · · · · ·	
			-		
4c	(Code) (Expenses \$	including grants of \$) (Revenu	ue \$	
	(0000) (Expended +		, (15.5.1		
					
4d	Other program services (Describe in Schedule O.)				
4G) (Revenue \$	1	
40	Total program service expenses		V Lightering &		

Form 990 (2014) OF CARPENTERS AND JOINERS OF AMERICA 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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			_ "
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	L	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X_
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			l
	Part VI	11a		X
þ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			3,5
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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	Х	X
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
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	445		x
400	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		
128	Schedule D, Parts XI and XII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	 	X
14a		14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	170	-	
_	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	ŀ		
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	Х
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	<u> </u>	X
2 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<u> </u>	X
h	If "Vee" to line 20a, did the organization attach a convior its audited financial statements to this return?	100	I	1

Form 990 (2014) OF CARPENTERS AND JOINERS OF AMERICA Part IV Checklist of Required Schedules (continued)

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			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 organization's current	_		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		х
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		х
b		24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
•	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	24u		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	· · · · · · · · · · · · · · · · · · ·	<u> 25a</u>		
	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	056		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	25b	-	
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes."			
	complete Schedule L, Part II			x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	26		
21	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			•
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27		X_
20	instructions for applicable filing thresholds, conditions, and exceptions).		İ	
а		200		v
b		28a		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	28b	 -	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	00-		₩.
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c		X
30	Did the organization receive more than \$25,000 in nor-cash contributions? If these complete schedule in	29		
30	contributions? If "Yes," complete Schedule M	200		.
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		X
31	If "Yes," complete Schedule N, Part I			.
32	Did the organization self, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31	-	X
32	Schedule N, Part II	200		•
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32	<u> </u>	X
55	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	20		•
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		<u> </u>
5 7	Part V, line 1	24		v
352	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a	 	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	256		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
5 0	If "Yes," complete Schedule R, Part V, line 2	200		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36	-	
J,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	27		v
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37	-	X
~	Note. All Form 990 filers are required to complete Schedule O	38	x	
	134.01. W. Com 1000 more and required to complete outredule O		990	(2014)
		I OHI	JUU	14U 14)

Form 990 (2014) Part V

O14) OF CARPENTERS AND JOINERS OF AMERICA

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response of Tax Compliance

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	Check it Schedule O contains a response or note to any line in this Part V					
			1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0			ĺ
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 r	eporta	ıble gamıng			
	(gambling) winnings to prize winners?	ι		1c_		<u> </u>
2 a	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	6			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b_	X	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s) .				
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b_		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	rity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	int)?	4a_		X
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	Accou	nts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		•	_5a_		X_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transfer	action'	?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		••	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he org	anızatıon solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions o	or 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 goods and se	rvices	provided to the payor?	7a_		_ X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b_		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as rec	quired			
	to file Form 8282?		•	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year .	7d	<u> </u>			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contra	ct?	7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?	•	7f	<u>.</u>	<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 8	899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation	file a Form 1098-C?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	d by th	ne	,		
	sponsoring organization have excess business holdings at any time during the year?			8_		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			i		
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a_	<u> </u>	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b	ļ	<u> </u>
10	Section 501(c)(7) organizations. Enter:	1	1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		}		
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	<u> </u>			}
11	Section 501(c)(12) organizations. Enter	1	1			
а	Gross income from members or shareholders	11a		1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b	L		ŀ	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	?	12a		-
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	<u> </u>	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>	ļ	
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	1	1			
	organization is licensed to issue qualified health plans	13b	ļ	1		
¢	Enter the amount of reserves on hand	13c	L	ļ	 	
14a	Did the organization receive any payments for indoor tanning services during the tax year?		•	14a	 	X
<u> </u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	ie O		14b		
				Forn	n 990	(201

Form 990 (2014)

OF CARPENTERS AND JOINERS OF AMERICA

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response or note to any line in this Part VI	_		X
Sec	tion A. Governing Body and Management			
		1	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 10			
	If there are material differences in voting rights among members of the governing body, or if the governing	1		
	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 1b 0			
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		X
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	x	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			-
, .	more members of the governing body?	7a	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			-
•	persons other than the governing body?	7b	x	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	x	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
	The second secon	-	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	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		ļ
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a		12a	X	
b		12b	X	
_	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
_	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy?	14		х
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	L_	X
	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	1		ļ
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization of the first forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires at the first forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires at the first forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires at the first forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires at the first forms 1023 (or 1024 if applicable).	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cıal	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	MARIO MARTINEZ - 406 453 1301			
	300 15TH STREET SOUTH CREAT FALLS MT 59405			

Form 990 (2014) OF CARPENTERS AND JOINERS OF AMERICA 90-0683300 Page Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

	components, or components, induced, its ample year, inglicate components
	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.

Let this box if neither the organization nor any related organization compensated any current officer, director, or trustee

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

(A)	(B)	U, ge		((C)		isat	(D)	(E)	(F)
Name and Title	Average hours per	(do	not c	Pos heck	rtion more	than o	one	Reportable compensation	Reportable compensation	Estimated amount of
	week	offic	ceran	ss pe id a d	rson	r/trus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for related	individual trustee or director	Ste			Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	trust	nal tru		oyee	edwo:		(** 2. *********************************		and related
	below	Mdua	Institutional trustee	Officer	Key employee	phesto	Ротте			organizations
/41	1.00	Ĕ	Ĕ	ਙ	, S.	포통	훈			
(1) BRET WALKER PRESIDENT	1.00			x				67.	o.	0.
(2) MARY ALICE MCMURRAY	1.00		_	-				<u> </u>	0.	<u>.</u>
VICE PRESIDENT				x				0.	0.	0.
(3) JEREMY WIEBUSCH	1.00									
RECORDING SECRETARY				X				0.	0.	0.
(4) MARIO MARTINEZ	1.00									
FINANCIAL SECRETARY	1 00		_	X	-			0.	0.	0.
(5) LONNY LA PIERRE	1.00			x				0.	0.	0
TREASURER (6) JOEL WORTH	1.00			^		-		0.	0.	0.
CONDUCTOR	1.00			X				0.	0.	0.
(7) JOHN SILVERNALE	1.00									
WARDEN				Х				0.	0.	0.
(8) MITCHELL BRESSLER	1.00	ŀ								
TRUSTEE		 		X	_			1,388.	0.	0.
(9) TROY COOK	1.00			,,				1 050		•
TRUSTEE	1.00	-	-	Х	-	-		1,050.	0.	0.
(10) MORGAN YELVINGTON TRUSTEE	1.00			x				0.	0.	0.
IKOBIEE				-						
		1								
				_						
					-					
	-	 —		\vdash		\vdash				
		Γ								
				<u> </u>						
	L				L	لسا	L	<u></u>	L	

Page 8

•	Section A. Officers, Directors, Tru (A) Name and title	(B) Average hours per week (list any	(do box offi	not c	(C Posi heck ss pe	ition more rson		one h an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations		Est am	(F) imate ount o	of
		hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MIS		fro orga and	m the nization relate	on ed
						-								
-														
										,				
	otal from continuation sheets to Part (add lines 1b and 1c)	VII, Section A	l	J				> >	2,505. 0. 2,505.		0.			0.
	number of individuals (including but ensation from the organization	not limited to th	ose	liste	ed at	oove	e) wh	no re		0,000 of reportable			Yes	0 No
line 1a	e organization list any forme r office ? If "Yes," complete Schedule J for y individual listed on line 1a, is the	such individual										3		х
and re 5 Did an	lated organizations greater than \$1 y person listed on line 1a receive o	50,000? If "Yes, r accrue compe	" <i>co</i> nsat	mple ion f	ete S rom	Sche any	dule unr	J f	or such individual	_		5	-	x x
Section B. 1 Comp	Independent Contractors ete this table for your five highest of	compensated inc	depe	ende	nt c	ontr	acto				pens		om	
the org	ganization Report compensation for (A) Name and busines			ONE		/itn (or w		n the organization's tax (B) Description of s		С	(C) ompen		1
			 ,					-					_	
		V-1-1						 					-	
		7.			_								-	
	number of independent contractors 100 of compensation from the orga		ot lii	nite	d to	thos	_	ted	above) who received n	nore than		Form 9		

LOCAL UNION NO. 82 UNITED BROTHERHOOD Form 990 (2014) OF CARPENTERS AND JOINERS OF AMERICA 90-0683300 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D)
Revenue excluded from tax under sections
512 - 514 (B) Related or Total revenue exempt function business revenue revenue 1 a Federated campaigns 1a **b** Membership dues 1b Fundraising events 1c 1d d Related organizations e Government grants (contributions) 1e 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 **Business Code** 2 a REBATE/REIMB EXP - PNR 900099 99,504. 99,504. Program Service **b REIMBURSED EXPENSES** 1,223. 1,223. 900099 900099 f All other program service revenue 135,508. 135,508. 236,235. g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (II) Personal 6 a Gross rents b Less: rental expenses Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) . 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c), See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a

236,235.

236,235.

0.

d All other revenuee Total. Add lines 11a-11d

Total revenue. See instructions.

Form 990 (2014)

OF CARPENTERS AND JOINERS OF AMERICA

90-0683300 Page 10

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 (A) Total expenses (B) Program service (C) Management and general expenses (D) Fundraising Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses expenses 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 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 2,505 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) 38,182. Other salaries and wages Pension plan accruals and contributions (include 1,820. section 401(k) and 403(b) employer contributions) 11,655. Other employee benefits 9 3,887. 10 Payroll taxes Fees for services (non-employees). Management Legal 4,200. c Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 1,773 column (A) amount, list line 11g expenses on Sch O.) 6,723. Advertising and promotion 12 14,222. 13 Office expenses Information technology 14 15 Royalties 1,142. Occupancy 16 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 16,069. Conferences, conventions, and meetings 19 Interest 20 99,062. Payments to affiliates 21 Depreciation, depletion, and amortization 22 851. 23 Insurance 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 0.) a DONATIONS 5,172. b C d All other expenses 25 Total functional expenses. Add lines 1 through 24e 207,263. 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)

OF CARPENTERS AND JOINERS OF AMERICA

90-0683300 Page 11

Check if Schedule O contains a response or note to any line in this Part X (B) End of year Beginning of year 72,825. 101,858. 1 1 Cash - non-interest-bearing Savings and temporary cash investments 2 2 3 3 Pledges and grants receivable, net 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 instr) Complete Part II of Sch L 6 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10b 10c b Less: accumulated depreciation Investments · publicly traded securities 11 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 Intangible assets 14 14 Other assets. See Part IV, line 11 15 15 72,825 101,858 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of 582. 25 Schedule D 643. 582. Total liabilities, Add lines 17 through 25 26 26 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 27 Unrestricted net assets 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here > X and complete lines 30 through 34. 0. 0. 30 Capital stock or trust principal, or current funds 30 0. 0. 31 Paid-in or capital surplus, or land, building, or equipment fund 31 72,243. Retained earnings, endowment, accumulated income, or other funds 101,215. 32 32 72,243. 101,215. Total net assets or fund balances 33 72,825. 101,858. Total liabilities and net assets/fund balances

Form 990 (2014)

Form 990 (2014)

Part X | Balance Sheet

	990 (2014) OF CARPENTERS AND JOINERS OF AMERICA	90-068	3300	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	23	<u>6,2</u>	<u>35.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	20	<u>7,2</u>	<u>63.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	2	8,9	<u>72.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u> </u>	<u>2,2</u>	<u>43.</u>
5	Net unrealized gains (losses) on investments	5			_
6	Donated services and use of facilities	6			
7	Investment expenses .	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		_	0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	10	1,2	<u> 15.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				LX.
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedu	ule O.			
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review	ved on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a sepa	rate basis,			
	consolidated basis, or both				
	X 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 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 S				
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		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the re	quired audit			

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form **990** (2014)

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.lrs.gov/form990.

OMB No 1545-0047

2014

Open to Public

Inspection

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) organiza	tions Complete Part III.			
Nan	ne of organization LOCAL U	NION NO. 82 UNIT	TED BROTHERH	OOD Emp	loyer identification number
	OF CARP	ENTERS AND JOIN	ERS OF AMERI	CA	90-0683300
Pa	art I-A Complete if the org	ganization is exempt un	der section 501(c)	or is a section 527 of	organization.
2	Provide a description of the organic Political expenditures Volunteer hours	zation's direct and indirect politi	ical campaign activities	_	.
Pá	art I-B Complete if the org	ganization is exempt un	der section 501(c))(3).	
	Enter the amount of any excise tax	· · · · · · · · · · · · · · · · · · ·		▶ \$	
	Enter the amount of any excise tax			5 ▶ 9	<u> </u>
3	If the organization incurred a section	on 4955 tax, did it file Form 4720	o for this year?		Yes No
48	Was a correction made?				Yes No
	If "Yes," describe in Part IV				
P	art I-C Complete if the or	ganization is exempt un	der section 501(c)	, except section 501	(c)(3).
1	Enter the amount directly expende	d by the filing organization for s	ection 527 exempt fund	ction activities	<u></u>
2	Enter the amount of the filing organ	nization's funds contributed to c	other organizations for s	section 527	
	exempt function activities			▶ \$	
3	Total exempt function expenditure	s. Add lines 1 and 2 Enter here	and on Form 1120-POL	-, •	
_	line 17b		•	▶ \$	Yes No
	Did the filing organization file Form	•			
5	Enter the names, addresses and en made payments. For each organization	• •	•	_	• •
	contributions received that were pi	•			•
	political action committee (PAC). If	• •		•	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) ramo	(5) / (30) 333	(0) 2	filing organization's	contributions received and
				funds. If none, enter -0-	promptly and directly
					delivered to a separate political organization
		1			If none, enter -0
		1			
		:			
					· · · · · · · · · · · · · · · · · · ·

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

Schedule C (Form 990 or 990-EZ) 2014

LOCAL UNION NO. 82 UNITED BROTHERHOOD Schedule C (Form 990 or 990-EZ) 2014 OF CARPENTERS AND JOINERS OF AMERICA 90-0683300 Page 2 Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). A Check rf the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). B Check I if the filing organization checked box A and "limited control" provisions apply. (b) Affiliated group (a) Filing **Limits on Lobbying Expenditures** organization's totals (The term "expenditures" means amounts paid or incurred.) totals 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 20% of the amount on line 1e. Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000. \$175,000 plus 10% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$17,000,000 \$1,000,000. g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0i Subtract line 1f from line 1c If zero or less, enter -0j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 ___ Yes reporting section 4911 tax for this year? 4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (b) 2012 (a) 2011 (c) 2013(d) 2014 (e) Total (or fiscal year beginning in) 2a Lobbying nontaxable amount **b** Lobbying ceiling amount (150% of line 2a, column(e)) c Total lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2014

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

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2014 OF CARPENTERS AND JOINERS OF AMERICA 90-0683300 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a)	(b	<u>)</u>
of the lobbying activity.	Yes	No	Amo	unt
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter.				
or referendum, through the use of				
a Volunteers?	 	-		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				<u>_</u>
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				-
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				_
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				_
b If "Yes," enter the amount of any tax incurred under section 4912		-		_
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501 (c)(4).	on 501(c)	(5) or se	ction	
501(c)(6).		(5), 01 36	Cuon	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1	X	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X	
 Did the organization make only in house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 		3 (5), or se	ction	X ne 3, is
3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."		3 (5), or se R (b) Par	ction	
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members	j "No," OF	3 (5), or se	ction	
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures).	j "No," OF	3 (5), or se R (b) Par	ction	
 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 	j "No," OF	3 (5), or se R (b) Par	ction	
 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 	j "No," OF	3 (5), or se R (b) Par	ction	
 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year 	j "No," OF	(5), or se R (b) Par	ction	
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Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

LOCAL UNION NO. 82 UNITED BROTHERHOOD

OF CARPENTERS AND JOINERS OF AMERICA

Employer identification number 90-0683300

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds o	r Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		-
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	funds
·	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	·	• ——
•	for charitable purposes and not for the benefit of the donor		· · · · · · · · · · · · · · · · · · ·
	impermissible private benefit?	or donor advisor, or for any other purpose cor	
Pai		ganization answered "Ves" to Form 900. Part	
1	Purpose(s) of conservation easements held by the organizat		10, 1116 7.
'			ally important land area
	Preservation of land for public use (e.g., recreation or e	·	•
	Protection of natural habitat	Preservation of a certified	d historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	a conservation easement on the last
	day of the tax year		10.00 - 0.00 - 0.00
	Total accept as of a secondary and a secondary		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic str	- ·	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
	listed in the National Register		_2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the or	ganization during the tax
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements		└── Yes └── No
6	Staff and volunteer hours devoted to monitoring, inspecting,	_	
7	Amount of expenses incurred in monitoring, inspecting, and	•	<u> </u>
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170(h)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		. L Yes L No
9	In Part XIII, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the	organization's accounting for
	conservation easements		
Pai	t III Organizations Maintaining Collections of		er Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherance	e of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr		
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement an	id balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public	service, provide the following amounts
	relating to these items:		
	(i) Revenue included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial ga	ain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items	
а	Revenue included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		> \$

	t III Organizations Maintaining C	Collections of A						90-06			ige ∠
Щ_											
3	Using the organization's acquisition, accessing	on, and other record	is, checi	k any or the	tollowing tha	it are a si	ignificant	use of its	collection	ı item:	S
	(check all that apply):		. —								
а	Public exhibition	C			hange progra	ams					
b	Scholarly research	е	• —	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co			-	_			se in Parl	XIII		
5	During the year, did the organization solicit o					er sımılaı	rassets	_	,	_	1
D	to be sold to raise funds rather than to be ma							<u> </u>	Yes		No
rai	reported an amount on Form 990, Par		ete if the	organizatio	on answered '	"Yes" to	Form 990	, Part IV, I	ine 9, or		
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contribution	ns or other as	sets not	ıncluded		_		
	on Form 990, Part X?				•	-			Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing 1	table:							
									Amount	<u> </u>	_
C	Beginning balance	•		•	-		1c				
d	Additions during the year						1d				
е	Distributions during the year	•					1e				
f	Ending balance		•		-		1f		_		
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for	escrow or ci	ustodial acco	unt liabil	lity?		Yes		No
	If "Yes," explain the arrangement in Part XIII.						<u> </u>				
Pa	t V Endowment Funds. Complete r	f the organization ar	swered	"Yes" to Fo	rm 990, Part	IV, line 1	0.				
		(a) Current year	(b) P	rior year	(c) Two year	rs back	(d) Three <u>y</u>	ears back	(e) Four	years	back
1a	Beginning of year balance				ļ						
b	Contributions										
C	Net investment earnings, gains, and losses				<u></u>						
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance .				<u></u>						
2	Provide the estimated percentage of the curr	rent year end baland	e (line 1	g, column (a	a)) held as.						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment										
С	Temporarily restricted endowment	%									
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%.									
3a	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	ınd admınıste	red for t	he organiz	zation	_		
	by:									Yes	No
	(i) unrelated organizations			•					3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(II), are the related organizations	s listed as required o	n Sched	dule R?	•				3b		
4	Describe in Part XIII the intended uses of the		wment	funds.							
Pa	rt VI Land, Buildings, and Equipm										
	Complete if the organization answered	d "Yes" to Form 990	, Part IV	, line 11a S	ee Form 990	, Part X,	line 10.				
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) A	ccumulate	ed	(d) Bool	k value	9
		basis (investr	nent)	basis	(other)	de	preciation				
1a	Land .										
b	Buildings .		_								
c	Leasehold improvements										
d	Equipment										
<u> </u>	Other										_
Total	Add lines 1a through 1a (Column (d) must a		V 1	(5) 1	10. \			N			^

Schedule D (Form 990) 2014

		ERS OF AMERICA 9	0-0683300 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" t	o Form 990, Part IV, Iir	ne 11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)	-		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			_
Complete if the organization answered "Yes" t	o Form 990, Part IV, III		
(a) Description of investment	(b) Book value	(c) Method of valuation. Cost or e	end-of-year market value
(1)			
(2)			
(3)	- <u>-</u>		
(4)			
(5)			· · · · · · · · · · · · · · · · · ·
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" t		ne 11d See Form 990, Part X, line 15.	#3 Deal walve
	Description		(b) Book value
(1)			
(2)			
(3)		<u>-</u>	
(4)			
(5)			
(6)			
(7)			
(8)	10		
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line	. 15)		
Part X Other Liabilities.	13.)		
Complete if the organization answered "Yes" t	o Form 990. Part IV. lu	ne 11e or 11f See Form 990 Part X line	25
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) WITHHELD PAYROLL TAXES		643.	
(3)	- -		
(4)			
(5)			
(6)	-		
(7)	-		

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. 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.

(8) (9)

	t XI Reconciliation of Revenue per Audited Financial State		90-0683300 Pag	•
- 4	Complete if the organization answered "Yes" to Form 990, Part IV, line 1		e per neturn.	
1	Total revenue, gains, and other support per audited financial statements	12d.		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		1	
a	Net unrealized gains (losses) on investments	2a		
a b	Donated services and use of facilities	2b	·	
_	Recoveries of prior year grants			
c d	Other (Describe in Part XIII.)	2c 2d		
e	Add lines 2a through 2d	20 (20	
3	Subtract line 2e from line 1	•	. <u>2e</u> 3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		3	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
C	Add lines 4a and 4b	40	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
	rt XII Reconciliation of Expenses per Audited Financial Stat	ements With Expens	es per Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 1	•	oo por riotariii	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		 	
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
_	Add lines 2a through 2d		20	
e 2	Subtract line 2e from line 1		2e	
3	Amounts included on Form 990, Part IX, line 25, but not on line 1:	•	. 3	
4		4-		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
_	Others (Describes as Dest MIII.)			
b	Other (Describe in Part XIII)	4b		
b c	Add lines 4a and 4b		4c	
ь с <u>5</u>	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		4c 5	
b c 5 Pa	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) rt XIII Supplemental Information.		5	<u> </u>
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SCHEDULE 0

(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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

LOCAL UNION NO. 82 UNITED BROTHERHOOD OF CARPENTERS AND JOINERS OF AMERICA

Employer identification number <u>90-0683300</u>

FORM 990, ITEM K, OTHER FORM OF ORGANIZATION:
LABOR UNION
FORM 990, PART VI, SECTION A, LINE 6: DUES PAYING MEMBERS OF THE LABOR UNION
FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS IN GOOD STANDING VOTE TO ELECT MEMBERS OF THE GOVERNING BODY
FORM 990, PART VI, SECTION A, LINE 7B: LARGE AND UNUSUAL TRANSACTIONS TAKEN BEFORE THE MEMBERSHIP
HANGE AND UNODORD TRANSPORT TRANSPORT THE MEMBERSHIT
FORM 990, PART VI, SECTION B, LINE 11: FORM 990 REVIEWED BY THE GOVERNING BODY PRIOR TO FILING
FORM 990, PART VI, SECTION B, LINE 12C: MONITORS EXPENSE RECORDS AND ACTIVITIES OF BOARD MEMBERS
FORM 990, PART VI, SECTION C, LINE 19: AVAILABLE ON REQUEST
FORM 990, PART XII, LINE 2C THE PROCESS HAS NOT CHANGED FROM THAT OF THE PRIOR YEAR