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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 <u>www.IRS.gov/form990</u>

OMB No 1545-0047

Open to Public

			lendar year, or tax year beginning 0: C Name of organization	L-01-2015 , and ending 12-31-201	5	D Emplo	ver ident	ification number
		applicable change	UNITED STEEL PAPER AND FORESTRY RUBBER MANUFACTURING ENERGY ALLII	-n			-	incation number
_		_	RUBBER MANUFACTURING ENERGY ALLII	D:		25-08	18080	
∏ Naı		=	Doing business as UNITED STEELWORKERS USW					
∏ Inıt		turn	Number and street (or P.O. box if mail is	not delivered to street address) Room/sur	te	E Telepho	ne numbe	er
Fin- reti		erminated	60 BLVD OF THE ALLIES	Thot delivered to street address, Room, sail	te.	(412)	562-24	00
┌ Am	ended	d return	City or town, state or province, country,	and ZIP or foreign postal code				
Apr	olicatio	on pending	PITTSBURGH, PA 15222	3		G Gross r	eceipts \$ 8	392,556,444
			F Name and address of principa	al officer	11/-) 7			
			LEO W GERARD	ar officer		this a group bordinates?	return to	or □Yes ▽ No
			60 BLVD OF THE ALLIES PITTSBURGH,PA 15222		H(b) Ar	e all subordı	nates	□Yes □No
			11113B0K0H,1 A 13222			:luded? "No " ottoob	- 1 /-	see instructions)
Ta	x-exe	empt status	「 501(c)(3)	t no)				ber 🕨 0260
1 W	ebsit	ite: ► WV	/W USW ORG		11(0)	roup exempt	ion numi	Der F 0260
					T.		1	
		_	Corporation Trust Association	Other P	L Year o	f formation 19	36 M S	tate of legal domicile PA
Ра	rt I		mary					
			scribe the organization's mission or TINUE TO WORK TOGETHER TO PF		OUALITY	IN THE WO	RKPLAC	F & IN SOCIETY
e e	-	10 00111	THE TO WORK TO GETTIEN TO TH	CONTO TE PAIRWESS, 30311CE WE	QUALITI	IN THE WO	KKI LAC	L WIN SOCIETY
≧								
≝	- ا	<u> </u>				250/ 51		
Governance	2	Check tr	nis box দ if the organization discor	tinued its operations or disposed of	r more thar	1 25% OF ITS	net asse	ets
	3	Number	of voting members of the governing b	oody (Part VI, line 1a)			з	20
<u>ي</u> س			of independent voting members of th				4	0
Ě			umber of individuals employed in calendar year 2015 (Part V, line 2a)				5	1,507
Activities &	6	Total nu	mber of volunteers (estimate if neces	ssary)			6	0
4	7a	Total un	related business revenue from Part \	III, column (C), line 12			7a	0
	ь	Net unrela	ated business taxable income from F	orm 990-T, line 34			7b	0
					Р	rior Year		Current Year
	8	Contr	butions and grants (Part VIII, line 1	h)	Р	rior Year	0	Current Year
nue	8		ibutions and grants (Part VIII, line 1 am service revenue (Part VIII, line 2		P	rior Year 476,327,8	-	
enue		Progra Inves	am service revenue (Part VIII, line 2 tment income (Part VIII, column (A	2g)	P	476,327,8 28,676,	387 598	0 477,256,237 27,572,509
Revenue	9	Progra Inves Other	am service revenue (Part VIII, line 2 tment income (Part VIII, column (A revenue (Part VIII, column (A), line	g)		476,327,8	387 598	0 477,256,237
Revenue	9 10	Progra Inves Other Total	am service revenue (Part VIII, line 2 tment income (Part VIII, column (A	g)		476,327,8 28,676,	387 598 735	0 477,256,237 27,572,509
Revenue	9 10 11 12	Progra Inves Other Total 12)	am service revenue (Part VIII, line 2 tment income (Part VIII, column (A revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (mi	eg)		476,327,3 28,676,1 225,7 505,230,7	387 598 735 220	0 477,256,237 27,572,509 186,701 505,015,447
Revenue	9 10 11 12	Progra Inves Other Total 12) Grant	am service revenue (Part VIII, line 2 tment income (Part VIII, column (A revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (mu s and similar amounts paid (Part IX,	eg)	3	476,327,3 28,676,3 225,5 505,230,3	387 598 735 220	0 477,256,237 27,572,509 186,701 505,015,447 5,410,207
	9 10 11 12 13 14	Progra Inves Other Total 12) Grant Benef	am service revenue (Part VIII, line 2 tment income (Part VIII, column (A revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (mi s and similar amounts paid (Part IX, its paid to or for members (Part IX,	eg)	3	476,327,8 28,676,1 225,7 505,230,7 6,208,7	387 598 735 220 712	0 477,256,237 27,572,509 186,701 505,015,447 5,410,207 31,894,063
	9 10 11 12	Progra Inves Other Total 12) Grant Benef	am service revenue (Part VIII, line 2) tment income (Part VIII, column (A revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (miles and similar amounts paid (Part IX, column to or for members (Part IX), column t	eg)	3	476,327,3 28,676,3 225,5 505,230,3	387 598 735 220 712	0 477,256,237 27,572,509 186,701 505,015,447 5,410,207 31,894,063
	9 10 11 12 13 14	Progra Inves Other Total 12) Grant Benef Saları 5-10	am service revenue (Part VIII, line 2) tment income (Part VIII, column (A revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (miles and similar amounts paid (Part IX, column to or for members (Part IX), column t	eg)		476,327,8 28,676,1 225,7 505,230,7 6,208,7	387 598 735 220 712	0 477,256,237 27,572,509 186,701 505,015,447 5,410,207 31,894,063
Expenses Revenue	9 10 11 12 13 14 15	Progra Inves Other Total 12) Grant Benef Saları 5-10 Profe	am service revenue (Part VIII, line 2 tment income (Part VIII, column (A revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (miss and similar amounts paid (Part IX, cits paid to or for members (Part IX, cits, other compensation, employee b) ssional fundraising fees (Part IX, column (D), line and similar amounts).	2g)		476,327,8 28,676,1 225,7 505,230,1 6,208,7 7,819,7	387 598 735 220 712 272 627	0 477,256,237 27,572,509 186,701 505,015,447 5,410,207 31,894,063 136,002,547
	9 10 11 12 13 14 15 16a b	Progra Inves Other Total 12) Grant Benef Salari 5-10 Profe Total fu	am service revenue (Part VIII, line 2) tment income (Part VIII, column (A) revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (mi s and similar amounts paid (Part IX, its paid to or for members (Part IX, c es, other compensation, employee b) ssional fundraising fees (Part IX, col indraising expenses (Part IX, column (D), line expenses (Part IX, column (A), line	eg)		476,327,4 28,676,4 225,7 505,230,7 6,208,7 7,819,7 128,388,6	387 598 735 220 712 272 627 0	0 477,256,237 27,572,509 186,701 505,015,447 5,410,207 31,894,063 136,002,547 0
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Expenses	9 10 11 12 13 14 15 16a b	Progra Inves Other Total 12) Grant Benef Salari 5-10 Profe Total ft Other Total	am service revenue (Part VIII, line 2) tment income (Part VIII, column (A) revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (mi s and similar amounts paid (Part IX, its paid to or for members (Part IX, c es, other compensation, employee b) ssional fundraising fees (Part IX, col indraising expenses (Part IX, column (D), line expenses (Part IX, column (A), line	eg)		476,327,4 28,676,4 225,7 505,230,7 6,208,7 7,819,7 128,388,6	387 598 735 220 712 272 627 0	0 477,256,237 27,572,509 186,701 505,015,447 5,410,207 31,894,063 136,002,547 0
Expenses	9 10 11 12 13 14 15 16a b	Progra Inves Other Total 12) Grant Benef Salari 5-10 Profe Total ft Other Total	am service revenue (Part VIII, line 2) tment income (Part VIII, column (A), line revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (miles and similar amounts paid (Part IX, column to a similar amounts paid to a similar amounts paid (Part IX, column to a similar amounts paid to a similar amounts paid (Part IX, column to a similar amounts paid to a similar amounts paid (Part IX, column to a similar amounts paid to a similar amounts paid (Part IX, column to a similar amounts paid to a similar amounts paid (Part IX, column to a similar amounts paid to a similar amounts paid to a similar amounts paid (Part IX, column to a similar amounts paid to	eg)		476,327,4 28,676,5 225,7 505,230,7 6,208,7 7,819,7 128,388,4	387 598 735 220 712 272 527 0 751 362 358	0 477,256,237 27,572,509 186,701 505,015,447 5,410,207 31,894,063 136,002,547 0 285,457,730 458,764,547
Expenses	9 10 11 12 13 14 15 16a b	Progra Inves Other Total 12) Grant Benef Salari 5-10 Profe Total fi Other Total Rever	am service revenue (Part VIII, line 2) tment income (Part VIII, column (A), line revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (miles and similar amounts paid (Part IX, column to a similar amounts paid to a similar amounts paid (Part IX, column to a similar amounts paid to a similar amounts paid (Part IX, column to a similar amounts paid to a similar amounts paid (Part IX, column to a similar amounts paid to a similar amounts paid (Part IX, column to a similar amounts paid to a similar amounts paid (Part IX, column to a similar amounts paid to a similar amounts paid to a similar amounts paid (Part IX, column to a similar amounts paid to	eg)		476,327,4 28,676,5 225,7 505,230,7 6,208,7 7,819,7 128,388,6 255,287,7 397,704,7	387 598 735 220 712 272 527 0 751 362 358	0 477,256,237 27,572,509 186,701 505,015,447 5,410,207 31,894,063 136,002,547 0 285,457,730 458,764,547 46,250,900
Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Progra Inves Other Total 12) Grant Benef Salari 5-10 Profe Total fi Other Total Rever	am service revenue (Part VIII, line 2) tment income (Part VIII, column (A) revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (mi s and similar amounts paid (Part IX, its paid to or for members (Part IX, c es, other compensation, employee b) ssional fundraising fees (Part IX, col indraising expenses (Part IX, column (D), line expenses (Part IX, column (A), line expenses Add lines 13–17 (must e ine less expenses Subtract line 18 in	2g)		476,327,4 28,676,4 225,7 505,230,7 6,208,7 7,819,7 128,388,6 255,287,7 397,704,1 107,525,8	387 598 735 220 712 272 627 0 751 362 358 Year	0 477,256,237 27,572,509 186,701 505,015,447 5,410,207 31,894,063 136,002,547 0 285,457,730 458,764,547 46,250,900 End of Year
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Not Assets or Expenses Fund Balances	9 10 11 12 13 14 15 16a b 17 18 19	Progra Inves Other Total 12) Grant Benef Salari 5-10 Profe Total fi Other Total Rever Total Total Net as	am service revenue (Part VIII, line 2 tment income (Part VIII, column (A revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (miles and similar amounts paid (Part IX, ots paid to or for members (Part IX, ots, other compensation, employee b) ssional fundraising fees (Part IX, column (D), line expenses (Part IX, column (A), line expenses (Part IX, column (A), line expenses Add lines 13–17 (must expenses Subtract line 18 to liabilities (Part X, line 16)	2g)	Beginnin	476,327,4 28,676,4 225,7 505,230,7 6,208,7 7,819,7 128,388,6 255,287,7 397,704,7 107,525,8 g of Current (689,101,4) 629,099,7 60,002,7	387 598 735 220 712 272 527 0 751 362 358 Year 596 252 344	0 477,256,237 27,572,509 186,701 505,015,447 5,410,207 31,894,063 136,002,547 0 285,457,730 458,764,547 46,250,900 End of Year 686,279,647 716,250,657 -29,971,010
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A Fund Balances Expenses	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 ••••••••••••••••••••••••••••••	Progra Inves Other Total 12) Grant Benef Salari 5-10 Profe Total fi Other Total Rever Total Net as I Sign nalties of edge and has any k	am service revenue (Part VIII, line 2 tment income (Part VIII, column (A revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (mines and similar amounts paid (Part IX, column (A), lines, other compensation, employee b) assional fundraising fees (Part IX, column (D), lines, other compenses (Part IX, column (D), lines, other expenses (Part IX, column (A), lines, expenses Add lines 13–17 (must expenses Add lines 13–17 (must expenses Expenses Subtract line 18 for assets (Part X, line 16)	2g)	Beginnin	476,327,4 28,676,4 225,7 505,230,7 6,208,7 7,819,7 128,388,6 255,287,7 397,704,7 107,525,8 g of Current (689,101,4) 629,099,7 60,002,7	387 598 735 220 712 272 527 0 751 362 358 Year 596 252 344	0 477,256,237 27,572,509 186,701 505,015,447 5,410,207 31,894,063 136,002,547 0 285,457,730 458,764,547 46,250,900 End of Year 686,279,647 716,250,657 -29,971,010
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Use Only

Firm's address \blacktriangleright ONE PPG PLACE SUITE 1700

PITTSBURGH, PA 15222 May the IRS discuss this return with the preparer shown above? (see instructions) Phone no (412) 261-3644

. ✓ Yes ☐ No

Forn	1990 (2015)				Page
Pai	t IIII Statement	of Program Service	Accomplishments		
		•	e or note to any line in this Part	III	<u> </u>
1	Briefly describe the	organization's mission			
			ETTER FUTURE, PROMOTE FAI	RNESS, JUSTICE AND EQUAL	ITY IN THE
WUF	KPLACE AND IN SO	CIELL			
2	Did the organization the prior Form 990 (program services during the year	which were not listed on	「Yes ▽No
	If "Yes," describe th	nese new services on Sche	dule O		
3	Did the organization services?	= -	e significant changes in how it co	nducts, any program	└Yes └VNo
	If "Yes," describe th	nese changes on Schedule	0		
4	expenses Section 5	501(c)(3) and 501(c)(4) or	ccomplishments for each of its th ganizations are required to repor h program service reported		
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	NEGOTIATION OF COLL ORGANIZATION	ECTIVE BARGAINING AGREEMEN	rs and the administration and enfo	DRCEMENT OF THE AGREEMENTS MADE	BY THE LABOR
4b	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
	ORGANIZING EFFORTS	TO BECOME THE EXCLUSIVE BAR	GAINING REPRESENTATIVE FOR ANY UN	IIT OF EMPLOYEES AND TO RECRUIT N	EW MEMBERS
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	ASSISTING WITH LOCAL	L UNION ADMINISTRATION INCLU	DING MEMBERSHIP EDUCATION PROGR	AMS, MEMBERSHIP MEETINGS AND ELE	ECTIONS
	Other program ser	vices (Describe in Schedul	e O)		
	(Expenses \$		ng grants of \$) (Revenue \$)

Total program service expenses ▶

|--|

	Checkhot of Regali ou Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Yes	
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	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 🚨	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 😼	12a		No
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
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	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
_	Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

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Pal	t V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this		v			
	<u> </u>				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable	1a	299			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
	Did the organization comply with backup withholding rules for reportable payments to gaming (gambling) winnings to prize winners?	o vend	dors and reportable	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	1,507			
b	If at least one is reported on line 2a, did the organization file all required federal emp Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file			2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation			3a 3b		No
4a	At any time during the calendar year, did the organization have an interest in, or a si over, a financial account in a foreign country (such as a bank account, securities account)?			4a	Yes	
b	If "Yes," enter the name of the foreign country ►CA See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank (FBAR)	k and	Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during	ng the	tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited t	tax sh	elter transaction?	5b		Νo
c	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 \$10 organization solicit any contributions that were not tax deductible as charitable cont			6a		No
b	If "Yes," did the organization include with every solicitation an express statement the were not tax deductible?	nat su	ch contributions or gifts	6b		
7	Organizations that may receive deductible contributions under section 170(c).					
	Did the organization receive a payment in excess of \$75 made partly as a contributi services provided to the payor?			7a		
	If "Yes," did the organization notify the donor of the value of the goods or services p			7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal proper file Form 8282?	.	· · · · ·	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a p	erson	al benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a person	onal b	enefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the o required?		ation file Form 8899 as	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles Form 1098-C?	s, dıd 1	the organization file a	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess but during the year?	siness	s holdings at any time	8		
Qa.	Did the sponsoring organization make any taxable distributions under section 4966	?		9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or rela			9b		
10	Section 501(c)(7) organizations. Enter	P				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	ın lıe	u of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state ${}^{\circ}N$ additional information the organization must report on Schedule O	ote. S	ee the instructions for	13a		
b	Enter the amount of reserves the organization is required to maintain by the states	13b				
c	In which the organization is licensed to issue qualified health plans	13c				
	Did the organization receive any payments for indoor tanning services during the tax		?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explana	•		14b		

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 20			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	110
	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or	H	103	
	more members of the governing body?	7a	Yes	
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	<u>even</u> ı	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	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	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		No
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		No
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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		No
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			
		16h		
6.	organization's exempt status with respect to such arrangements?	16b		
	organization's exempt status with respect to such arrangements?	16b		
	organization's exempt status with respect to such arrangements?	16b		
Se 17 18	organization's exempt status with respect to such arrangements?	16b		

State the name, address, and telephone number of the person who possesses the organization's books and records INSTANLEY W JOHNSON 60 BLVD OF THE ALLIES PITTSBURGH, PA 15222 (412) 562-2400

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ◆ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	tion (han d in is l	one b both	ox, an c	heck unless officer stee)	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
See Additional Data Table										
										Form 990 (2015)

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

(A) Name and Title	d Title A verage hours per week (list any hours				oox, an d	heck unless officer stee)	į	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F Estim amount o compen from	ated of other sation the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organizat relat organiza	ed
See Additional Data Table											
	-										
1b Sub-Total c Total from continuation she	ets to Part VII, S	 ection A	٠.								
d Total (add lines 1b and 1c)	<u> </u>		<u></u>			▶		3,734,668	0	1,	321,511
2 Total number of individuals (\$100,000 of reportable com							e) wl	ho received more t	han		
										Yes	No
3 Did the organization list any	former officer, dir	ector o	r trus	tee,	key	emplo	yee,	or highest comper	sated employee	. 30	

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee		
	on line 1a? If "Yes," complete Schedule I for such individual		Νo
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such		
	ındıvıdual	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for		
	services rendered to the organization? If "Yes," complete Schedule I for such person		No

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A)	(B)	(C)
Name and business address	Description of services	Compensation
PHILION LEBLANC BEAUDRY	LEGAL SERVICES	904,868
565 BOUL CREMAZIE EST BUREAU 5400 MONTREAL, QC H2M 2V6 CA		
VICTORY SQUARE LAW OFFICE LLP	LEGAL SERVICES	828,135
500-128 W PENDER ST VANCOUVER, BC V6B 1R8 CA		
GILBERT & SACKMAN	LEGAL SERVICES	775,613
3699 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA 900102732		
PALIARE ROLAND ROSENBERG ROTHSTEIN LLP	LEGAL SERVICES	693,969
155 WELLINGTON ST W TORONTO, ON M5V 3H1 CA		
BREDHOFF & KAISER	LEGAL SERVICES	629,787
805 FIFTEENTH STREET NW STE 1000 WASHINGTON, DC 20005		
3 Total number of independent contractors (including but not limited to these	salusted shove) who recoved more than	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 30

Part V	4 🛊 🛊 1	Statement o		aca ar nata ta any li	no in this Dart VIII			_
		Check if Schedi	ule O contains a respoi	ise of note to any ii	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s s	1a	Federated cam	paigns 1a					
Grants mounts	ь	Membership du	es 1b					
Gr imo	С	Fundraising eve	ents 1c					
iffs, ar A	d	Related organiz	zations 1d					
Contributions, Giffs, and Other Similar A	e	Government grants	s (contributions) 1e	-				
ons Sir	f	All other contribution	ons, gifts, grants, and 1f					
uti her	•	sımılar amounts no						
₫ij	g	Noncash contribution 1a-1f \$	ons included in lines					
Contributions, Giffs, Grants and Other Similar Amounts	h	Total. Add lines	s 1a-1f	📦				
				Business Code				
Program Serwce Revenue	2a	MEMBERSHIP DUE	S	900099	474,956,916	474,956,916		
Re Ve	ь	LOCAL UNION ESC	ROW	900099	1,094,205	1,094,205		
ce l	c	EDUCATIONAL CON	NFERENCES	900099	635,864	635,864		
ervi	d	SHARED SERVICES	6/EXP REIMB	900099	380,995	380,995		
៣ទ	e	LEGAL SETTLEMEN	TS	900099	95,935	95,935		
∕⊜ra	f	All other progra	am service revenue		92,322	92,322		
Ĕ	g	Total. Add lines	s 2a-2f		477,256,237			
	3	Investment inc	ome (including dividen	ds, interest,	12,776,148			12,776,148
	4		ar amounts)		12,770,148			12,770,148
	5		· · · · · · · · · · · · · · · · · · ·	` <u> </u>	1,867,799			1,867,799
			(ı) Real	(II) Personal				
	6a	Gross rents						
	ь	Less rental						
	c	expenses Rental income						
		or (loss)						
	d	Net rental incol	me or (loss) (i) Securities	► - (II) O ther				
	7a	Gross amount from sales of assets other than inventory	402,337,358	(ii) o circi				
	b	Less cost or other basis and sales expenses Gain or (loss)	387,540,997 14,796,361					
	d	Net gain or (los			14,796,361			14,796,361
Other Revenue	8a	Gross income f events (not inc \$						
ther Ro		See Part IV, lin	ne 18 a					
Ò	b c		penses b (loss) from fundraising	events				
	9a		rom gaming activities	events : . p				
	ь	less directev	penses b					
			(loss) from gamıng actı	vities				
		Gross sales of	ınventory, less					
		returns and allo	owances . a					
	ь	Less costofa	oods sold b					
	С		(loss) from sales of inv	entory 🛌				
		Miscellaneous		Business Code				
	11a	INVESTMENT	IN SUBSIDIARY	900003	-1,681,098			-1,681,098
	b							
	С							
	d	All other reven	ue					
	е	Total. Add lines	s 11a-11d		-1,681,098			
	12	Total revenue.	See Instructions .	· · · · •	505,015,447	477,256,237	(27,759,210

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	Statement of Functional Expenses				
Section	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns	All other organiza	itions must com	plete column (A)	
	Check if Schedule O contains a response or note to any line in t	his Part IX			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	3,429,743			
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	1,980,464			
4	Benefits paid to or for members	31,894,063			
5	Compensation of current officers, directors, trustees, and key employees	4,060,620			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	64,567,108			
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	10,726,905			
9	Other employee benefits	48,732,851			
10	Payroll taxes	7,915,063			
11	Fees for services (non-employees)				
а	Management				
b	Legal	7,741,001			
C	Accounting	202,927			
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	2,129,869			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,791,067			
12	Advertising and promotion				
13	Office expenses	3,463,296			
14	Information technology	1,924,374			
15	Royalties				
16	Occupancy	14,250,119			
17	Travel	17,687,921			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,179,256			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	889,429			
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 O)				
а	LOCAL UNION REFUNDS	181,844,229			
b	FOREIGN EXCHANGE LOSS	27,300,303			
C	DIST EDUC/LEGIS FUNDS	7,894,648			
d	PER CAPITA DUES	5,869,103			<u> </u>
e	All other expenses	8,290,188			
25	Total functional expenses. Add lines 1 through 24e	458,764,547			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2015) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 257.044.050 1 171,541,789 Cash-non-interest-bearing 2 Savings and temporary cash investments . . 2 3 3 Pledges and grants receivable, net . . . 364,241 954,105 4 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 6 161,801 7 168,204 7 719,932 8 630,832 8 Inventories for sale or use 9 2,944,750 9 2,031,407 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis 31,501,399 Complete Part VI of Schedule D 10a 10b 30.239.610 1,365,925 10c 1,261,789 b Less accumulated depreciation . 412,337,793 495,763,613 11 11 1,000,000 1,000,000 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . 14 14 13,163,104 12.927.908 15 15 Other assets See Part IV, line 11 Total assets.Add lines 1 through 15 (must equal line 34) . . 689,101,596 16 686,279,647 16 20.442.116 **17** 18,407,069 **17** Accounts payable and accrued expenses . 18 18 Grants payable 19 19 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . _iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 608,657,136 25 697,843,588 629.099.252 716.250.657 26 26 **Total liabilities.**Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete **Fund Balances** lines 27 through 29, and lines 33 and 34. 27 60.002.344 -29.971.010 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. Net Assets or 30 30 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 33 60.002.344 -29,971,010 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 689.101.596 34 686,279,647

Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>			F
1	Total revenue (must equal Part VIII, column (A), line 12)	1		505,	015,447
2	Total expenses (must equal Part IX, column (A), line 25)	2		458,7	764,547
3	Revenue less expenses Subtract line 2 from line 1	3		46.:	250,900
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			 002,344
5	Net unrealized gains (losses) on investments	5			512,487
6	Donated services and use of facilities	6			312,407
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-107	711,767
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			971,010
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		. 区
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	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	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Software ID: Software Version:

EIN: 25-0818080

Name: UNITED STEEL PAPER AND FORESTRY RUBBER MANUFACTURING ENERGY ALLIED

RODDER PIANOTAC TORTING ENERGY ALLIED

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

Form 990, Part VII - Compensation Compensated Employees, and Indo (A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more the perso	ors tion (han o n is b	(C) do n ne b ooth ctor,	ot ch ox, u an of	eck inless ficer tee)	5	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
LEO W GERARD	40 00	x		x				190,632	0	65,570
PRESIDENT	1 90 40 00									
STANLEY W JOHNSON SECRETARY/TREASURER		х		х				162,417	0	59,927
THOMAS M CONWAY	2 20									
VICE PRESIDENT	1 90	х		Х				153,605	0	58,163
FREDRICK D REDMOND	40 00								_	
VICE PRESIDENT	1 90	X		X				155,997	0	58,225
KENNETH G NEUMANN	40 00	х		х				162,421	0	31,702
NATIONAL DIRECTOR-CANADA	0 80	_ ^						102,421		31,702
CAROL LANDRY	40 00	×						155,677	0	58,387
VICE PRESIDENT	0 80								-	,
JON T GEENEN	40 00	x						158,098	0	58,052
VICE PRESIDENT	0 30									
GARY BEEVERS		x						164,506	0	42,755
DAVID R MCCALL	0 30 40 00									
DIRECTOR	2 00	х						134,667	0	52,777
MICHAEL BOLTON	40 00									
DIRECTOR	2 00	X						127,862	0	52,617
STEVE HUNT	40 00	, ,						141.707		20,000
DIRECTOR	0 30	Х						141,787	0	29,899
JOHN E SHINN	40 00	×						126,509	0	52,653
DIRECTOR	2 00								_	,
DANIEL ROY	40 00	x						150,348	0	27,907
DIRECTOR	0 30									
ORVILLE M WARREN DIRECTOR		x						141,216	0	27,907
MICHAEL R MILLSAP	0 30 40 00									
DIRECTOR	2 00	х						127,683	0	52,679
ERNEST R THOMPSON	40 00									
DIRECTOR	2 00	X						126,907	0	52,927
R DANIEL FLIPPO	40 00	х						126,619	0	52,553
DIRECTOR	2 00							120,019		32,333
ROBERT J MCAULIFFE	40 00	×						127,282	0	52,795
DIRECTOR	2 00									
EMIL A RAMIREZ		x						126,249	0	52,703
DIRECTOR ROBERT LAVENTURE	2 00									
DIRECTOR		х						128,194	0	52,795
RUBEN A GARZA	2 00									
DIRECTOR	2 00	Х						126,410	0	52,541
RICHARD J BREAN	40 00					.				
GENERAL COUNSEL	0 30					×		155,048	0	57,467
JOSEPH P STULIGROSS	40 00					x		141,649	0	54,499
ASSISTANT GENERAL COUNSEL	0 30					<u> </u>		171,049		57,75
DANIEL M KOVALIK	40 00					×		141,611	0	54,539
ASSISTANT GENERAL COUNSEL	0 30		1	_		<u> </u>	_			
BRUCE A FICKMAN ASSOCIATE GENERAL COUNSEL						x		141,237	0	54,851
ASSOCIATE SENERAL COUNSEL	0 30	I	1	1	1	1	1	I		Ī

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Pore an Individual trustae or director	ion (d nan o n is b	ne booth a	ox, un an off trust	nless ficer :ee)	Forme	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
MARY ANNE WESTON ASSISTANT	40 00 0 30					Х		140,037	0	54,621

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DLN: 93493285006096

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Inspection

If the organization answered "Yes" on 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

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

If the organization answered "Yes" on 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" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** UNITED STEEL PAPER AND FORESTRY RUBBER MANUFACTURING ENERGY ALLIED 25-0818080 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures Volunteer hours Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 ┌ Yes 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? □ No Was a correction made? □ No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 3 Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name (b) Address (c) EIN (d) A mount paid from (e) A mount of political filing organization's contributions received funds If none, enter - 0 and promptly and directly delivered to a separate political organization If none, enter -0-(1) USW WORKS 60 BLVD OF THE ALLIES 46-4517192 0 2,100,267 PITTSBURGH, PA 15222 UNITED STEELWORKERS NON-60 BLVD OF THE ALLIES 20-5395553 163,747 (2) FEDERAL ACCOUNT PITTSBURGH, PA 15222

f Grassroots lobbying expenditures

5ch	edule C (Form 990 or 990-EZ) 2015					Page 2
Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and fil	ed Form 5768	
	Check fithe filing organization belongs to expenses, and share of excess lobbed. Check fithe filing organization checked bo	oying expenditures)		_	up member's nam	e, address, EIN,
		ying Expenditures		,	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public of	opinion (grass roots	<u> </u>		1918.9	
Ia	lobbying)			-		
b	Total lobbying expenditures to influence a legisl	iative body (direct lobb)	/ing)			
c	Total lobbying expenditures (add lines $1a$ and 1	b)				_
d	O ther exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount	from the following table	ın both columns			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxab	ole amount is:			
	Not over \$500,000	20% of the amount on lin	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
g h i j	Subtract line 1g from line 1a If zero or less, ento Subtract line 1f from line 1c If zero or less, ento If there is an amount other than zero on either line porting section 4911 tax for this year?	er -0-	organization file F		No	
	(Some organizations that made a columns below. See t	the separate instr	ection do not uctions for lin	have to cor les 2a throu		ne five
	Lobbying Exp	enditures During 4	4-Year Avera	ging Perioa	T	1
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

<u> </u>	date 6 (1 01111 330 01 330 EE) 2013				Г	aye 🧈
Pa	t II-B Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)).					
For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)	,	(b)	
activ			No	l .	A mour	nt
	·	Yes		'		
1	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					
а	Volunteers?					
ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			1		
c	Media advertisements?			1		
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	O ther 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?					
Par	t III-A Complete if the organization is exempt under section $501(c)(4)$, section 5	01(c)(5),	or s	ectio	n
	501(c)(6).					
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		-	1	Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		No
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
Ь	Carryover from last year	2b				
	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	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 and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
	ort IV Supplemental Information					
	vide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou see instructions), and Part II-B, line 1 Also, complete this part for any additional information	p list)	, Part I	I-A,	lines 1	and
	Return Reference Explanation					
PAR	THE ORGANIZATION PROVIDED INFORMATION TO ITS MEMBERS CAMPAIGNS AND ISSUES, ENCOURAGES ITS MEMBERS TO PARTIC PROCESS, AND COLLABORATES WITH OTHER LABOR ORGANIZATI ON ELECTORAL MATTERS, ALL IN ORDER TO SERVE THE BEST INT ORGANIZATION'S MEMBERS, THEIR FAMILIES AND ALL WORKING ORGANIZATION ALSO SPONSORS SEPARATE SEGREGATED FUNDS AS FEDERAL POLITICAL COMMITTEES WITH THE FEDERAL ELECTI AND A SEPARATE SEGREGATED FUND THAT IS REGISTERED AS A	CIPAT ONS A EREST PEOP STHAT ON C	E IN TI AND AI IS OF T LE THI T ARE OMMIS	HE E LLIEI THE E REGI	LECTO O GRO	UPS ED

ORGANIZATION WITH THE INTERNAL REVENUE SERVICE (IRS) THE ORGANIZATION PROVIDED ADMINISTRATIVE SUPPORT FOR THESE FUNDS IN ACCORDANCE WITH THE

RESPECTIVE FEC AND TREASURY REGULATIONS

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DLN: 93493285006096

OMB No 1545-0047

SCHEDULE D Supplemental Financial Statements

(Form 990)

Department of the Treasury

► Complete if the organization answered "Yes," on 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

JNITED S	of the organization STEEL PAPER AND FORESTRY MANUFACTURING ENERGY ALLIED	<u></u>	Employer identification number
Part I		Advised Funds or Other Similar F	25-0818080 Funds or Accounts.
	Complete if the organization answere		
		(a) Donor advised funds	(b)Funds and other accounts
	Total number at end of year		
	Aggregate value of contributions to (during year)		
	Aggregate value of grants from (during year)		
	Aggregate value at end of year		
	d the organization inform all donors and donor a ds are the organization's property, subject to t		noradvised Yes No
us	d the organization inform all grantees, donors, a ed only for charitable purposes and not for the nferring impermissible private benefit?		
art I	Conservation Easements. Comple	ete if the organization answered "Yes"	on Form 990, Part IV, line 7.
Г Г с°	rpose(s) of conservation easements held by th Preservation of land for public use (e g , recre Protection of natural habitat Preservation of open space mplete lines 2a through 2d if the organization is sement on the last day of the tax year	ation or education) Preservation of a	certified historic structure
	,		Held at the End of the Year
a To	tal number of conservation easements		2a
То	tal acreage restricted by conservation easeme	nts	2b
Nu	mber of conservation easements on a certified	historic structure included in (a)	2c
	mber of conservation easements included in (c toric structure listed in the National Register) acquired after 8/17/06, and not on a	2d
	mber of conservation easements modified, trai cyear ▶	nsferred, released, extinguished, or terminat	ed by the organization during the
Nu	mber of states where property subject to cons	ervation easement is located 🛌	<u></u>
	es the organization have a written policy regar lations, and enforcement of the conservation e		ndling of Yes No
Sta yea	aff and volunteer hours devoted to monitoring, l ar	nspecting, handling of violations, and enforc	ing conservation easements during the
►_			
	nount of expenses incurred in monitoring, inspe	ecting, handling of violations, and enforcing o	conservation easements during the year
	ses each conservation easement reported on lines (i) and section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of se	ction 170(h)(4)
I n bal	Part XIII, describe how the organization report lance sheet, and include, if applicable, the text e organization's accounting for conservation ea	of the footnote to the organization's financia	nd expense statement, and
rt II	Organizations Maintaining Collec	tions of Art, Historical Treasures,	or Other Similar Assets.
	Complete if the organization answere	ed "Yes" on Form 990, Part IV, line 8.	
wo	the organization elected, as permitted under SF rks of art, historical treasures, or other similar rvice, provide, in Part XIII, the text of the footi	assets held for public exhibition, education,	or research in furtherance of public
wo	the organization elected, as permitted under SF rks of art, historical treasures, or other similar rvice, provide the following amounts relating to	assets held for public exhibition, education,	
(i) _R	evenue included on Form 990, Part VIII, line 1		► \$
	ssets included in Form 990, Part X		▶ \$
Ift	the organization received or held works of art, howing amounts required to be reported under S		for financial gain, provide the
Re	venue included on Form 990, Part VIII, line 1		▶ - \$

b Assets included in Form 990, Part X

Part	T##I	Organizations Maintaining (continued)	Collections of A	Art, Hi	storica	l Tre	asures, o	or Ot	her Similar A	ssets
3		the organization's acquisition, accetion items (check all that apply)	ession, and other re	cords, c						se of its
а	ΓP	ublic exhibition		d	l L	oan or	exchange p	orogra	ms	
b	┌ s	cholarly research		е	Го	ther				
c	ΓP	reservation for future generations								
4	Provid Part X	de a description of the organization's	s collections and ex	plaın ho	w they f	urther t	the organiza	atıon's	exempt purpose	e in
5	During	g the year, did the organization solic	cit or receive donati	ons of a	rt, hıstoı	rical tre	easures or	other	sımılar	
		s to be sold to raise funds rather th		as part	of the or	ganıza	tıon's colle	ction?	☐ Yes	s
Par	BIV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		n Form	990, Pa	art IV,	, line 9, oi	repo	orted an amou	nt on Form 990,
1a		e organization an agent, trustee, cus led on Form 990, Part X?	todian or other inte	rmediar	y for con	trıbutıc	ons or other	rasse	ts not ryes	s 「No
b	If"	Yes," explain the arrangement in Pa	art XIII and comple	te the fo	llowing t	able			An	nount
c		ginning balance					1	1c		
d		ditions during the year					Ţ	1d		
e	Dıs	tributions during the year					Ī	1e		
f	End	ing balance					Ī	1f		
2a		ie organization include an amount o	n Form 990, Part X,	line 21,	, for escr	oword	ے ustodial ac	count	t liability? TYes	s Г No
b	If"Ye	s," explain the arrangement in Part	XIII Check here ıf	the exp	lanation	has be	en provideo	d ın Pa	art XIII	Г
Par	t V	Endowment Funds. Comple							· · · · · · · · · · · · · · · · · · ·	
			(a)Current year	(b) P	nor year	b (c	Two years b	ack (d) Three years back	(e)Four years back
1a	=	nning of year balance				+				
b	Contr	ributions								
c	Net ir losse	nvestment earnings, gains, and s								
d	Grant	ts or scholarships								
e		r expenditures for facilities rograms								
f	• A dmi	nistrative expenses								
g g		of year balance								
2		de the estimated percentage of the	current vear end hal	lance (li	ne 1a ca	olumn ((a)) held as			<u> </u>
– a		designated or quasi-endowment	ourrent your one but	41100 (11	19, 0	, , , , , , , , , , , , , , , , , , ,	(4)) 11014 45			
b		anent endowment								
С	•	orarily restricted endowment > ercentages on lines 2a, 2b, and 2c	should equal 100%							
3a	organ	nere endowment funds not in the pos ization by related organizations	_		that are	held a	nd adminis	tered	_	Yes No
		lated organizations				•	•			a(ii)
ь		s" on 3a(II), are the related organiz							-	3b
4	Descr	ribe in Part XIII the intended uses o	of the organization's	endown	nent fund	ds				<u> </u>
Par	t VI	Land, Buildings, and Equip								
		Complete if the organization a Description of property	inswered 'Yes' to		990, Pai (a) ost or othe (investm	er basıs	Ine 11a.S (b) Cost or other	er basıs	Accumulated	(d)Book value
1a	and				luisconii	ciit)	(otile)	' /	+	
		gs		. H					†	
Ь⊦		-		· -					+	
	easeh	iold improvements		. !						
c l		old improvements nent		: -			31.	501,399	30,239,6	1,261,789
c L	quipm	•					31,	501,399	30,239,6	10 1,261,789

(including name of security)	(b)Book value	(c)Method of valuation Cost or end-of-year market value
(1)Financial derivatives		The state of the s
(2)Closely-held equity interests (3)Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	P	
Part VIIII Investments—Program Related. Complete if the organization answered 'Yes' on For	m 990, Part IV, line 11c.	a Form 990 Part Y line 13
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		cost of cha of year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answered 'Ye	oc' on Form 990 Part IV June 1	1 d Soo Form 000 Part V June 15
(a) Description	es on rolli 990, raiciv, ille i	(b) Book value
Total. (Column (b) must equal Form 990. Part X. col.(B) line 15.)		
Part X Other Liabilities. Complete if the organization ans		
Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25.		
Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability	swered 'Yes' on Form 990, P	
Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	swered 'Yes' on Form 990, P	
Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes FUNDS FOR INACTIVE LOCAL UNIONS DEFERRED COMPENSATION	(b) Book value 4,749,127 1,699,515	
Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes FUNDS FOR INACTIVE LOCAL UNIONS DEFERRED COMPENSATION DISTRICT POLITICAL EDUCATION AND LEGISLATIVE FUNDS	(b) Book value 4,749,127 1,699,515 7,632,370	
Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes FUNDS FOR INACTIVE LOCAL UNIONS DEFERRED COMPENSATION DISTRICT POLITICAL EDUCATION AND LEGISLATIVE FUNDS ACCRUED PENSION EXPENSE	(b) Book value 4,749,127 1,699,515 7,632,370 84,106,747	
Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes FUNDS FOR INACTIVE LOCAL UNIONS DEFERRED COMPENSATION DISTRICT POLITICAL EDUCATION AND LEGISLATIVE FUNDS ACCRUED PENSION EXPENSE DISTRICT EDUCATION FUNDS	(b) Book value 4,749,127 1,699,515 7,632,370 84,106,747 1,228,207	
Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes FUNDS FOR INACTIVE LOCAL UNIONS DEFERRED COMPENSATION DISTRICT POLITICAL EDUCATION AND LEGISLATIVE FUNDS ACCRUED PENSION EXPENSE DISTRICT EDUCATION FUNDS ACCRUED POSTRETIREMENT BENEFIT	(b) Book value 4,749,127 1,699,515 7,632,370 84,106,747 1,228,207 589,278,454	
Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes FUNDS FOR INACTIVE LOCAL UNIONS DEFERRED COMPENSATION DISTRICT POLITICAL EDUCATION AND LEGISLATIVE FUNDS ACCRUED PENSION EXPENSE DISTRICT EDUCATION FUNDS ACCRUED POSTRETIREMENT BENEFIT DUE TO UNITED STEELWORKERS BUILDING FUND	(b) Book value 4,749,127 1,699,515 7,632,370 84,106,747 1,228,207 589,278,454 5,779,352	
Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes FUNDS FOR INACTIVE LOCAL UNIONS DEFERRED COMPENSATION DISTRICT POLITICAL EDUCATION AND LEGISLATIVE FUNDS ACCRUED PENSION EXPENSE DISTRICT EDUCATION FUNDS ACCRUED POSTRETIREMENT BENEFIT DUE TO UNITED STEELWORKERS BUILDING FUND LINDEN HALL	(b) Book value 4,749,127 1,699,515 7,632,370 84,106,747 1,228,207 589,278,454 5,779,352 1,213,398	
Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes FUNDS FOR INACTIVE LOCAL UNIONS	(b) Book value 4,749,127 1,699,515 7,632,370 84,106,747 1,228,207 589,278,454 5,779,352	

2	Total revenue, gains, and other support per audited financial statements	1
	A mounts included on line 1 but not on Form 990, Part VIII, line 12	
а	Net unrealized gains (losses) on investments 2a	
b	Donated services and use of facilities	
c	Recoveries of prior year grants	
d	Other (Describe in Part XIII) 2d	
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
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 . 4a	
b	Other (Describe in Part XIII)	
С	Add lines 4a and 4b	4c
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	s pe
	Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	ı
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	
а	Donated services and use of facilities	
b	Prior year adjustments	
С	Other losses	
d	Other (Describe in Part XIII).............. <mark>2d</mark>	
e	Add lines 2a through 2d	2e
_	Subtract line 2e from line 1	3
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
3 4		
3	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
3 4		
i a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	4c

Return Reference	Explanation
PART X, LINE 2	THE USW'S COMBINED STATEMENTS OF FINANCIAL POSITION AT DECEMBER 31, 2015 AND 2014 DO NOT INCLUDE ANY LIABILITIES ASSOCIATED WITH UNCERTAIN TAX POSITIONS, FURTHER, THE USW HAS NO UNRECOGNIZED TAX BENEFITS THERE WERE NO INTEREST OR PENALTIES RECOGNIZED IN THE COMBINED STATEMENTS OF ACTIVITIES FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014 THE STATUTORY TAX YEARS REMAIN OPEN TO EXAMINATION

Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2015

Additional Data

Software ID: **Software Version:**

EIN: 25-0818080

(b) Book Value

Name: UNITED STEEL PAPER AND FORESTRY

RUBBER MANUFACTURING ENERGY ALLIED

Form 990, Schedule D, Part X, - Other Liabilities

1 (a) Description of Liability	(b) Book Value
FUNDS FOR INACTIVE LOCAL UNIONS	4,749,127
DEFERRED COMPENSATION	1,699,515
DISTRICT POLITICAL EDUCATION AND LEGISLATIVE FUNDS	7,632,370
ACCRUED PENSION EXPENSE	84,106,747
DISTRICT EDUCATION FUNDS	1,228,207
ACCRUED POSTRETIREMENT BENEFIT	589,278,454
DUE TO UNITED STEELWORKERS BUILDING FUND	5,779,352
LINDEN HALL	1,213,398
DUE TO UNITED STEELWORKERS EDUCATION CENTER	2,156,418

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493285006096

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. 2015

OMB No 1545-0047

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

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

Open to Public Inspection

	e of the organization				Employer ident	ification number
	ED STEEL PAPER AND FOREST BER MANUFACTURING ENERGY				25-0818080	
Pa	rt I General Information Complete if the organi				14b.	
1	For grantmakers. Does the of and other assistance, the grants or a used to award the grants or a	ntees' eligibili	ty for the grar	nts or assistance, and	the selection criteria	▼ Yes
2	For grantmakers. Describe in assistance outside the United Activites per Region (The follow	d States.			-	ts and other
	Activites per Region (The follow	ing Farci, line s	table call be d	upileated if additional sp	ace is needed ;	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	See Add'l Data					
(2)						
(3)						
(4)						
(5)						
	Sub-total Total from continuation sheets to Part I	4	269 0			57,353,094 (
	: Totals (add lines 3a and 3b)	4	269			57,353,094

Part II	Grants and Other	Assistance to	Organizations	or Entities	Outside the	United States.
---------	-------------------------	----------------------	---------------	-------------	-------------	----------------

Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
· ,								

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

5

11

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be	<u>duplicated if addit</u>	cional space is no	eded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)					,		
(2)		+			1		1
(3)		†	·		'		
(4)		+			+		1
(5)		+ +			†		
(6)		+			†		1
(7)		+			†		1
(8)		+ +			<u> </u>		
(9)		+ + +					1
(10)		+ +	·		<u> </u>		
(11)		+ + +			1		
(12)		+ + +					
(13)		+ +	·		<u>'</u>		'
(14)		†			1		
(15)		+ + +			1		
(16)		1			1		
(17)					1		
(18)					1		

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	<u> ~</u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Γ	Yes	⊽	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Γ	Yes	<u> </u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Γ	Yes	ᅜ	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Γ	Yes	굣	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Г	Yes	<u>~</u>	No

Schedule F (Form 990) 2015

Schedule F (Form 990) 2015 Page **5**

Part V

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	CONTRIBUTIONS ARE APPROVED BY MEMBERS OF THE INTERNATIONAL EXECUTIVE BOARD

Additional Data

Software ID: Software Version:

EIN: 25-0818080

Name: UNITED STEEL PAPER AND FORESTRY

RUBBER MANUFACTURING ENERGY ALLIED

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
NORTH AMERICA	4		COLLECTIVE BARGAINING	PROGRAM SERVICES	57,101,836
EUROPE	1 01		SUPPORT WORKERS RIGHTS	PROGRAM SERVICES	183,818
SOUTH AMERICA	0	_	SUPPORT WORKERS RIGHTS	PROGRAM SERVICES	27,862

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	the employees or conducted in region (by agents in type) (i.e., fundraising, region program services, specifi		(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region					
EAST ASIA AND THE PACIFIC	0	=	SUPPORT WORKERS RIGHTS	PROGRAM SERVICES	25,581					
SOUTH ASIA	0	_	SUPPORT WORKERS RIGHTS	PROGRAM SERVICES	1,641					
CENTRAL AMERICA AND THE CARIBBEAN	0	0	COLLECTIVE BARGAINING	PROGRAM SERVICES	7,771					

Form 990 Schedule F Part I - Activities Outside The United States									
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region				
MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,	0		SUPPORT WORKERS RIGHTS	PROGRAM SERVICES	4,585				

Form 990 Schedu	orm 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)			
		NORTH AMERICA	GENERAL SUPPORT	1,500,000	CHECK	0	N/A	N/A			
		NORTH AMERICA	GENERAL SUPPORT	56,600	CHECK	0	N/A	N/A			
		NORTH AMERICA	GENERAL SUPPORT	50,000	CHECK	0	N/A	N/A			
		NORTH AMERICA	GENERAL SUPPORT	43,333	CHECK	0	N/A	N/A			

Form 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)	
		NORTH AMERICA	GENERAL SUPPORT	40,000	CHECK	0'	N/A	N/A	
		NORTH AMERICA	GENERAL SUPPORT	35,000	CHECK	0'	N/A	N/A	
		NORTH AMERICA	GENERAL SUPPORT	20,000	CHECK	0'	N/A	N/A	
		NORTH AMERICA	GENERAL SUPPORT	17,000	CHECK	0	N/A	N/A	

Form 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)	
		NORTH AMERICA	GENERAL SUPPORT	15,000	CHECK	0	N/A	N/A	
		NORTH AMERICA	GENERAL SUPPORT	12,500	CHECK	0	N/A	N/A	
		NORTH AMERICA	GENERAL SUPPORT	10,000	CHECK	0	N/A	N/A	
		NORTH AMERICA	GENERAL SUPPORT	10,000	CHECK	0	N/A	N/A	

Form 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)	
		NORTH AMERICA	GENERAL SUPPORT	8,000	CHECK	0	N/A	N/A	
		NORTH AMERICA	GENERAL SUPPORT	8,000	CHECK	0	N/A	N/A	
		NORTH AMERICA	GENERAL SUPPORT	6,500	CHECK	0	N/A	N/A	
		NORTH AMERICA	GENERAL SUPPORT	5,400	CHECK	0	N/A	N/A	

lefile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule I

DLN: 93493285006096 OMB No 1545-0047

Open to Public **Inspection**

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Attach to Form 990.

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

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization

Employer identification number UNITED STEEL PAPER AND FORESTRY 25-0818080 RUBBER MANUFACTURING ENERGY ALLIED **General Information on Grants and Assistance**

Does the organization maintain rethe selection criteria used to aw	ard the grants or as:	sıstance?				tance, and	√ Yes
2 Describe in Part IV the organiza Part II Grants and Other Assista that received more than \$	nce to Domestic Org	janizations and Dome	stic Governments. Com		answered "Yes" on F	orm 990, Part IV, line 2:	L, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grar or assistance
See Additional Data Table							

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

15

PART I, LINE 2

Gr	rants and Other Assistance to Domestic Individuals. Complete If the organization answered "Yes" on Form 990, Part IV, line 22
Ρa	art III can be duplicated if additional space is needed

(a)Type of grant or assistant	ce	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance				
		·								
Part IV Supplemental I	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.									
Return Reference	Explanat	ion								

CONTRIBUTIONS ARE APPROVED BY MEMBERS OF THE INTERNATIONAL EXECUTIVE BOARD

Schedule I (Form 990) 2015

Additional Data

Software ID:

Software Version:

EIN: 25-0818080

Name: UNITED STEEL PAPER AND FORESTRY

RUBBER MANUFACTURING ENERGY ALLIED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	1 ' '	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
5A ELITE YOUTH EMPOWERMENT PO BOX 16024 PITTSBURGH,PA 15242	47-1118194	501(C)(3)	8,500	0	N/A	N/A	GENERAL SUPPORT
AFL-CIO SECRETARY- TREASURER 815 16TH STREET NW WASHINGTON,DC 20006	53-0228172	501(C)(5)	78,000	0	N/A	N/A	GENERAL SUPPORT
AIDS-FREE WORLDTIDES CENTER 857 BROADWAY THIRD FLOOR NEW YORK, NY 10003	94-3213100	501(C)(3)	35,000	0	N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ALLEGHENY COUNTY LABOR COUNCIL AFL-CIO 401 WOOD STREET SUITE 501 PITTSBURGH, PA 15222	25-0728563	501(C)(5)	6,200	0	N/A	N/A	GENERAL SUPPORT		
ALLIANCE FOR RETIRED AMERICANS 815 16TH STREET NW 4TH FLOOR WASHINGTON, DC 20006	52-2277805	501(C)(4)	130,000	0	N/A	N/A	GENERAL SUPPORT		
AMERICAN HEART ASSOCIATION 444 LIBERTY AVE STE 1300 PITTSBURGH,PA 15222	13-5613797	501(C)(3)	25,000	0	N/A	N/A	GENERAL SUPPORT		

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN RED CROSS 225 BLVD OF THE ALLIES PITTSBURGH,PA 15222	53-0196605	501(C)(3)	10,000	0	N/A	N/A	GENERAL SUPPORT			
AMERICANS FOR DEMOCRATIC ACTION 1629 K STREET NW SUITE 300 WASHINGTON, DC 20006	53-0180733	501(C)(4)	14,750	0	N/A	N/A	GENERAL SUPPORT			
APRI 815 16TH STREET NW 4TH FLOOR WASHINGTON, DC 20006	13-2548181	501(C)(4)	10,700	0	N/A	N/A	GENERAL SUPPORT			

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
APRI - PITTSBURGH CHAPTER PO BOX 22194 PITTSBURGH,PA 15222	80-0564629	501(C)(3)	28,500	0	N/A	N/A	GENERAL SUPPORT			
CAMPAIGN FOR AMERICA'S FUTURE 1825 K STREET NW SUITE 400 WASHINGTON, DC 20006	52-1971942	501(C)(4)	25,000	0	N/A	N/A	GENERAL SUPPORT			
COALITION OF KAISER PERMANENTE UNIONS 8484 GEORGIA AVENUE SUITE 620 SILVER SPRING,MD 20910	52-2360920	501(C)(5)	40,187	0	N/A	N/A	GENERAL SUPPORT			

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	, , , ,	(h) Purpose of grant or assistance			
COALITION TO STOP FAST TRACK 815 16TH STREET NW WASHINGTON, DC 20006	47-2965424	501(C)(4)	50,000	0	N/A	N/A	GENERAL SUPPORT			
COLLEGE ATHLETES PLAYERS ASSOCIATION 11748 MAGNOLIA AVENUE SUITE C1 RIVERSIDE, CA 92503	46-4601824	501(C)(5)	140,000	0	N/A	N/A	GENERAL SUPPORT			
COMMUNITY COLLEGE OF ALLEGHENY COUNTY EDUCATIONAL FOUNDATION 808 RIDGE AVENUE 102 PITTSBURGH, PA 15212	25-1384469	501(C)(3)	10,500	0	N/A	N/A	GENERAL SUPPORT			

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DEMOS 220 FIFTH AVENUE 2ND FLOOR NEW YORK, NY 10001	13-4105066	501(C)(3)	10,000	0	N/A	N/A	GENERAL SUPPORT		
ECONOMIC POLICY INSTITUTE 1333 H ST NW STE 300 EAST TOWER WASHINGTON, DC 20005	52-1368964	501(C)(3)	100,000	0	N/A	N/A	GENERAL SUPPORT		
EPILEPSY FOUNDATION OF WESTERNCENTRAL PENNSYLVANIA 1501 REEDSDALE STREET PITTSBURGH,PA 15233	23-7241930	501(C)(3)	10,500	0	N/A	N/A	GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	1 3 5	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GREATER PITTSBURGH COMMUNITY FOOD BANK 1 N LINDEN STREET DUQUESNE,PA 15110	25-1420599	501(C)(3)	7,500	0	N/A	N/A	GENERAL SUPPORT			
INSTITUTE FOR GLOBAL LABOUR & HUMAN RIGHTS 60 BLVD OF THE ALLIES SIXTH FLOOR PITTSBURGH, PA 15222	13-3695377	501(C)(3)	70,000	0	N/A	N/A	GENERAL SUPPORT			
JEFFERSON AWARDS FOR PUBLIC SERVICE 100 W 10TH STREET SUITE 215 WILMINGTON, DE 19801	52-0959336	501(C)(3)	26,000	0	N/A	N/A	GENERAL SUPPORT			

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance			
JUST HARVEST - A CENTER FOR ACTION AGAINST HUNGER 16 TERMINAL WAY PITTSBURGH, PA 15219	25-1549432	501(C)(4)	5,220	0	N/A	N/A	GENERAL SUPPORT			
LOS ANGELES ALLIANCE FOR A NEW ECONOMY 464 LUCAS AVENUE SUITE 202 LOS ANGELES, CA 90017	95-4459427	501(C)(3)	25,000	0	N/A	N/A	GENERAL SUPPORT			
NEW MEXICO FEDERATION OF LABOR AFL-CIO 2300 BUENA VISTA DRIVE SE 126 ALBUQUERQUE,NM 87106	85-0057176	501(C)(5)	10,000	0	N/A	N/A	GENERAL SUPPORT			

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	1	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ROOSEVELT INSTITUTE 570 LEXINGTON AVENUE 5TH FLOOR NEW YORK,NY 10022	23-7213592	501(C)(3)	10,000	0	N/A	N/A	GENERAL SUPPORT			
STEEL VALLEY AUTHORITY 1112 S BRADDOCK AVENUE SUITE 300 SWISSVALE,PA 15218	25-1528181	GOVERNMENT	10,000	0	N/A	N/A	GENERAL SUPPORT			
TEXAS AFL-CIO BUILDING FUND PO BOX 12727 AUSTIN,TX 78711	74-1289747	501(C)(5)	10,000	0	N/A	N/A	GENERAL SUPPORT			

Form 990,Schedule I, Part	t II, Grants and	Other Assistance	e to Domestic Orga	anizations and D	omestic Governme	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
THE AMERICAN IRELAND FUND 211 CONGRESS STREET 10TH FLOOR BOSTON,MA 02110	25-1306992	501(C)(3)	7,500	0	N/A	N/A	GENERAL SUPPORT
THE HARKIN INSTITUTE FOR PUBLIC POLICY AND CITIZEN ENGAGEMENT 2429 UNIVERSITY AVENUE DES MOINES,IA 50311	42-0680460	501(C)(3)	34,650	0	N/A	N/A	GENERAL SUPPORT
UNION SPORTSMEN'S ALLIANCE 3340 PERIMETER HILL DRVIE NASHVILLE,TN 37211	27-2345009	501(C)(4)	10,000	0	N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Par	t II, Grants and	Other Assistance	e to Domestic Orga	nizations and D	omestic Governme	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED STUDENTS AGAINST SWEATSHOPS 1150 17TH STREET NW WASHINGTON, DC 20036	52-2094677	501(C)(3)	10,000	0	N/A	N/A	GENERAL SUPPORT
UNITED WAY OF ALLEGHENY COUNTY 1250 PENN AVENUE PITTSBURGH,PA 15222	25-1043578	501(C)(3)	100,700	0	N/A	N/A	GENERAL SUPPORT
USW WORKS 60 BLVD OF THE ALLIES PITTSBURGH,PA 15222	46-4517192	527	2,100,267	0	N/A	N/A	GENERAL SUPPORT

Form 990,Schedule 1, Par	t II, Grants and	Otner Assistance	to Domestic Orga	inizations and D	<u>omestic Governme</u>	nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORKING AMERICA 815 16TH STREET WASHINGTON,DC 20006	20-0263611	501(C)(5)	10,000		N/A	N/A	GENERAL SUPPORT

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Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

DLN: 93493285006096

OMB No 1545-0047

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

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

2015

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

Open to Public Inspection

Employer identification number Name of the organization UNITED STEEL PAPER AND FORESTRY RUBBER MANUFACTURING ENERGY ALLIED 25-0818080

Pai	rt I Questions Regarding Compensation	on				
					Yes	No
1a	Check the appropriate box(es) if the organization p 990, Part VII, Section A, line 1a Complete Part I		ny of the following to or for a person listed on Form vide any relevant information regarding these items			
	First-class or charter travel		Housing allowance or residence for personal use			
	Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the reimbursement or provision of all of the expenses			1b	Yes	
2	Did the organization require substantiation prior to		- · · · · · · · · · · · · · · · · · · ·			
	directors, trustees, officers, including the CEO/Ex	ecutive D	Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing org organization's CEO/Executive Director Check all used by a related organization to establish compe	that appl				
	Compensation committee	굣	Written employment contract			
	☐ Independent compensation consultant		Compensation survey or study			
	Form 990 of other organizations		Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990 or a related organization	0, Part VI	I, Section A, line $f 1a$ with respect to the filing organization			
а	Receive a severance payment or change-of-contro	ol paymer	nt?	4a	Yes	
b	Participate in, or receive payment from, a supplem	nental non	iqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-	-based co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and $\boldsymbol{\mu}$	provide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiz	zations m	ust complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section compensation contingent on the revenues of	A, line 1a	a, did the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," on line 5a or 5b, describe in Part III					
6	For persons listed on Form 990, Part VII, Section compensation contingent on the net earnings of	A, line 1a	a, did the organization pay or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	If "Yes," on line 6a or 6b, describe in Part III					
7	For persons listed on Form 990, Part VII, Section payments not described in lines 5 and 6? If "Yes,"			7		
8	Were any amounts reported on Form 990, Part VII subject to the initial contract exception described in Part III		accured pursuant to a contract that was ations section 53 4958-4(a)(3)? If "Yes," describe	8		
9	If "Yes" on line 8, did the organization also follow t section 5.3 4958-6(c)?	the rebutt	cable presumption procedure described in Regulations	•		

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

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

Note. The sum of columns (B)(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

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	` '	(E) Total of columns	• •
	Base (i) compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2015

Part III Supplemental Information

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

Flovide the information, explanation, o	r descriptions required for Fart 1, lines 1a, 1b, 3, 4a, 4b, 4c, 3a, 3b, 6a, 6b, 7, and 6, and for Fart 11. Also complete this part for any additional information
Return Reference	Explanation
PART I, LINE 4A	GARY BEEVERS - \$24,136

Schedule J (Form 990) 2015

Software ID: **Software Version:**

EIN: 25-0818080

Name: UNITED STEEL PAPER AND FORESTRY

Form 990, Schedule J, Part	. TT	- Officers Direct	RUBB	ED STEEL PAPER AN BER MANUFACTURIN	IG ENERGY ALLIED	sated Employees		
(A) Name and Title			W-2 and/or 1099-MIS (ii) Bonus & Incentive		(C) Retirement and other deferred compensation	(D) Nontaxable benefits		(F) Compensation in column (B) reported as deferred on prior Form 990
1LEO W GERARDPRESIDENT	(1)	180,387	compensation	compensation 10,245	34,093	31,477	256,202	0
	(11)			10,245	34,093	31,4//	256,202	
1STANLEY W JOHNSON	(1)	0 154,832	0	7,585	0 29,263	30,664	222,344	0
SECRETARY/TREASURER	(11)							
2THOMAS M CONWAY	(1)	146,313	0	7,292	0 27,653	30,510	211,768	0
VICE PRESIDENT	(11)							
3FREDRICK D REDMOND	(1)	146,313	0	9,684	0 27,653	30,572	214,222	0
VICE PRESIDENT	(11)							
4KENNETH G NEUMANN	(1)	137,795	0	0 24,626	0 26,043	0 5,659	194,123	0
NATIONAL DIRECTOR- CANADA	(11)					-		
5CAROL LANDRY	(1)	146,313	0	9,364	0 27,653	30,734	214,064	0
VICE PRESIDENT	(11)					-	-	
6JON T GEENEN	(1)	146,313	0	0 11,785	0 27,653	30,399	216,150	0
VICE PRESIDENT	(11)	-						
7GARY BEEVERS	(1)	158,381	0	0 6,125	29,934	12,821	207,261	0
VICE PRESIDENT (1-1-15 TO 11-30-15)	(11)							
8DAVID R MCCALLDIRECTOR	(1)	119,333	0	15,334	0 22,554	30,223	187,444	0
	(11)							
9MICHAEL BOLTONDIRECTOR	(1)	119,333	0	0 8,529	22,554	30,063	180,479	0
	(11)	-						
10STEVE HUNTDIRECTOR	(1)	119,333	0	0 22,454	0 22,554	7,345	171,686	0
	(11)					-		
11JOHN E SHINNDIRECTOR	(1)	119,333	0	7,176	22,554	30,099	179,162	0
	(11)	-	-			-		
12DANIEL ROYDIRECTOR	(1)	119,333	0	31,015	22,554	5,353	178,255	0
	(11)	-	-			-		
13ORVILLE M WARREN DIRECTOR	(1)	119,333	0	21,883	22,554	5,353	169,123	0
	(11)	-				-		
14MICHAEL R MILLSAP DIRECTOR	(1)	119,333	0	8,350	22,554	30,125	180,362	0
	(11)	-				-		
15ERNEST R THOMPSON DIRECTOR	(1)	119,333	0	7,574	22,554	30,373	179,834	0
	(11)	-	-		-	-		
16R DANIEL FLIPPO DIRECTOR	(1)	119,333	0	7,286	22,554	29,999	179,172	0
	(11)	-	-		-	-		
17ROBERT J MCAULIFFE DIRECTOR	(1)	119,333	0	7,949	22,554	30,241	180,077	0
	(11)	- - 0		-		-		
18EMIL A RAMIREZ DIRECTOR	(1)	119,333	0	6,916	22,554	30,149	178,952	
	(11)			-		-		
19ROBERT LAVENTURE DIRECTOR	(1)	119,333	0	8,861	22,554	30,241	180,989	0
	(11)	- - 0	-	-				-
	ı	٦	θĮ	0	0	0	0	ı ⁰

Form 990, Schedule J, Pa	art	II - Officers, Dire	ctors, Trustees, K	ey Employees, an	d Highest Compen	sated Employees	5	
(A) Name and Title		(B) Breakdown of W-2 and/or 1099-M (i) (ii) Base Bonus & Incentive compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
21RUBEN A GARZADIRECTOR	(1)		<u> </u>	7,077	22,554	29,987	7 178,951	0
1RICHARD J BREAN GENERAL COUNSEL	(I)		0	0 13,614	26,731	30,736	5 212,515	0
		0	<u>'</u> o'	<u>, </u>	0		0	
2 JOSEPH P STULIGROSS ASSISTANT GENERAL COUNSEL	(I) (II)		o'	12,282	24,450	30,049	196,148	0
	'	0'	0	<u>, o'</u>	1 0	0	<u>,</u> o	0
3 DANIEL M KOVALIK ASSISTANT GENERAL COUNSEL	(I) (II)		01	12,244	24,450	30,089	196,150	
4BRUCE A FICKMAN ASSOCIATE GENERAL COUNSEL	(I)		0	11,870	24,450	30,401	1 196,088	0
	'	0'	o'	<u>, o'</u>	0	0	<u>,</u> o	0
5 MARY ANNE WESTON ASSISTANT	(I) (II)		o'	10,670	24,450	30,171	194,658	0
	' '	0'	0'	0	0	, 0	0	o

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DLN: 93493285006096

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 UNITED STEEL PAPER AND FORESTRY RUBBER MANUFACTURING ENERGY ALLIED

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

25-0818080

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	ACTIVE MEMBERS PAY FULL DUES THEY HAVE THE RIGHT TO VOTE ASSOCIATE MEMBERS DO NOT MEET THE REQUIREMENT FOR FULL MEMBERSHIP THEY ARE NOT EMPLOYED IN A BARGAINING UNIT REPRESENTED BY THE UNION ASSOCIATE MEMBERS ARE ENTITLED TO VOTE WITHIN THE ASSOCIATE MEMBER ORGANIZATION ASSOCIATE MEMBERS DO NOT PAY FULL REGULAR DUES
FORM 990, PART VI, SECTION A, LINE 7A	ACTIVE MEMBERS IN GOOD STANDING MAY VOTE IN LOCAL AND INTERNATIONAL ELECTIONS
FORM 990, PART VI, SECTION A, LINE 7B	CONSTITUTIONAL AMENDMENTS MAY BE MADE BY A MAJORITY VOTE OF THE DELEGATES AT THE INTERNATIONAL CONVENTION
FORM 990, PART VI, SECTION A, LINE 8B	THE INTERNATIONAL EXECUTIVE BOARD DOES NOT AUTHORIZE COMMITTEES TO ACT ON ITS BEHALF
FORM 990, PART VI, SECTION B, LINE 11	THE COMPLETED FORM 990 WAS REVIEWED BY FINANCIAL MANAGEMENT UPON COMPLETION OF THE REVIEW , COPIES OF THE RETURN WERE PROVIDED TO THE INTERNATIONAL EXECUTIVE BOARD AND DISCUSSED AT A MEETING BEFORE FILING WITH THE INTERNAL REVENUE SERVICE
FORM 990, PART VI, SECTION B, LINE 15	ALL SALARIES FOR THE INTERNATIONAL OFFICERS AND DIRECTORS ARE PROVIDED FOR IN ARTICLE IV, SECTION 21 OF THE USW CONSTITUTION
FORM 990, PART VI, SECTION C, LINE 19	THE UNION DOES NOT ROUTINELY MAKE SUCH DOCUMENTS AVAILABLE TO THE PUBLIC
FORM 990, PART XI, LINE 9	BENEFIT CHANGES OTHER THAN NET PERIODIC BENEFIT COST -107,540,950 WORKERS UNITING EXPENSE -170,817
FORM 990, PART XII, LINE 2C, OVERSIGHT OF FINANCIAL STATEMENT AUDIT	USW'S FINANCIAL STATEMENTS ARE AUDITED BY AN INDEPENDENT ACCOUNTING FIRM IN ADDITION, USW HAS IDENTIFIED CERTAIN INDIVIDUALS THAT ASSUME THE RESPONSIBILITY FOR OVERSIGHT OF THE AU DIT OF ITS FINANCIAL STATEMENTS AND ITS SELECTION OF THE INDEPENDENT ACCOUNTANT THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR
SCHEDULE J, PART I, QUESTION 3, COMPENSATION	THE BASE SALARIES OF THE INTERNATIONAL OFFICERS AND DIRECTORS ARE PROVIDED FOR IN ARTICLE IV, SECTION 21 OF THE USW CONSTITUTION ALL AMENDMENTS TO THE CONSTITUTION ARE APPROVED BY A MAJORITY OF USW MEMBERS ALL OF WHOM ARE INDEPENDENT WITH RESPECT TO COMPENSATION MATTER S ANNUAL SALARY CHANGES ARE BENCHMARKED AGAINST MEMBERS WAGES, THEREFORE, THE PROCESS INC ORPORATES COMPARABILITY DATA AND IS INTENDED TO SATISFY THE REASONABLE COMPENSATION SAFE H ARBOR SET FORTH IN THE INTERNAL REVENUE CODE AND THE REGULATIONS ENACTED THEREUNDER

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DLN: 93493285006096

2015

OMB No 1545-0047

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

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

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

Name of the organization UNITED STEEL PAPER AND FORESTRY RUBBER MANUFACTURING ENERGY ALLIED

SCHEDULE R

(Form 990)

Department of the Treasury

Internal Revenue Service

Part I

Employer identification number 25-0818080

(a) Name, address, and EIN (ıf applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the	tions Complete ıf tl tax year.	ne organization an	swered "Yes" (on Form 990, Pa	art IV, line 34 because it	had on	е
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	tion (e) Public charity (if section 501	status (f) Direct controlling entity	Section (13) co	(g) n 512(l ontrolle itity? No
See Additional Data Table						res	1 NO
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ı	Cat No 501	35Y	1	Schedule R (For	m 990) 2	 2015

Part III 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.

(a) Name, address, and EIN of related organization	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	alloca	tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana parti	aging ner?	(k) Percentage ownership
			·			Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of- year assets	(h) Percentage ownership	Section (b)(i contro entit	n 512 13) olled ty?
(1) LINDEN HALL CORPORATION 432 LINDEN HALL RD DAWSON, PA 15428 25-1299377	WHOLLY OWNED SUBSIDIARY OF THE USW		UNITED STEEL PAPER AND FORESTRY RUBBER MANUFACTURING ENERGY ALLIED	С	1,761,063	845,872	100 000 %	Yes	No No
AMERICAN FLINT GLASS WORKERS UNION (2)SCHOLARSHIP FUND 1440 SOUTH BYRNE ROAD TOLEDO, OH 43614 34-1804857	SCHOLARSHIP	ОН	N/A	T					No

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

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

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	org	(e) all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
											1	1	İ
			<u> </u>	_			1	I	_	<u> </u>		_	

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2015

USW DISTRICT 9 NON-FEDERAL ACCOUNT 1413 THOMPSON CIRCLE SUITE 101 PO B

GARDENDALE, AL 35071

20-5397114

Software ID: **Software Version:**

EIN: 25-0818080

Form 990, Schedule R, Part II - Identification of (a)	Related Tax-Exempt O	rganizations (c)	(d)	(e)	(f)	(9	1)
(a) Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501 (c)(3))	Direct controlling entity	Section (b)(contraction entities)	n 512 13) olled
STEELWORKER ORGANIZATION OF ACTIVE RETIREES 60 BLVD OF THE ALLIES PITTSBURGH, PA 15222 25-1501684	RETIREE ORGANIZATION	PA	501(C)(5)		N/A	Yes	No
STEELWORKERS CHARITABLE AND EDUCATIONAL ORGANIZATION 60 BLVD OF THE ALLIES PITTSBURGH, PA 15222 83-0400973	FORMED TO CONDUCT THE CHARITABLE ACTIVITIES OF THE UNITED STEELWORKERS	PA	501(C)(3)	509(A)(3) TYPE I	UNITED STEEL PAPER AND FORESTRY RUBBER MANUFACTURING ENERGY ALLIED	Yes	
UNITED STEELWORKERS NON-FEDERAL ACCOUNT 60 BLVD OF THE ALLIES PITTSBURGH, PA 15222 20-5395553	527 ORGANIZATION	PA	527		N/A		No
UNITED STEELWORKERS POLITICAL ACTION FUND 60 BLVD OF THE ALLIES PITTSBURGH, PA 15222	HELPS SPEAK WITH A UNITED VOICE TO FIGHT ISSUES	PA	527		N/A		No
UNITED STEELWORKERS BUILDING FUND 60 BLVD OF THE ALLIES PITTSBURGH, PA 15222 23-7270416	COMPANY HOLDS TITLE TO UNITED STEELWORKERS BUILDING	PA	501(C)(2)		UNITED STEEL PAPER AND FORESTRY RUBBER MANUFACTURING ENERGY ALLIED	Yes	
UNITED STEELWORKERS EDUCATION CENTER 60 BLVD OF THE ALLIES PITTSBURGH, PA 15222 25-1299546	HOLDS TITLE TO UNITED STEELWORKERS EDUCATION TRAINING CENTER	PA	501(C)(2)		UNITED STEEL PAPER AND FORESTRY RUBBER MANUFACTURING ENERGY ALLIED	Yes	
UNITED STEELWORKERS OF AMERICA DISTRICT 3 HOLDING SOCIETY 300-3920 NORLAND AVENUE BURNABY V5G4K7 CA	COMPANY HOLDS TITLE TO REAL PROPERTY	CA			N/A		No
STEELWORKERS TRUSTEED BENEFIT PLAN PO BOX 6020 STATION B ETOBICOKE M9W7A3 CA	BENEFITS	CA			N/A		No
UNITED STEELWORKERS DISTRICT 1 PCE 777 DEARBORN PARK LANE SUITE J COLUMBUS, OH 43085 20-5461013	527 ORGANIZATION	ОН	527		N/A		No
USWA DIST 1 OHIO PAC LA 766 777 DEARBORN PARK LANE SUITE J COLUMBUS, OH 43085 91-2101105	527 ORGANIZATION	он	527		N/A		No
USW DISTRICT 2 WI NON-FEDERAL ACCOUNT 1244A MIDWAY ROAD MENASHA, WI 54952 46-5719094	527 ORGANIZATION	WI	527		N/A		No
USW DISTRICT 4 MASSACHUSETTS NON-FEDERAL ACCOUNT 305 CAYUGA ROAD SUITE 175 CHEEKTOWAGA, NY 14225 20-5733533	527 ORGANIZATION	NY	527		N/A		No
USW DISTRICT 4 RHODE ISLAND NON-FEDERAL ACCOUNT 305 CAYUGA ROAD SUITE 175 CHEEKTOWAGA, NY 14225 20-8978834	527 ORGANIZATION	NY	527		N/A		No
USW DISTRICT 4 NY NJ DE ME NON-FEDERAL ACCOUNT 305 CAYUGA ROAD SUITE 175 CHEEKTOWAGA, NY 14225 20-8979911	527 ORGANIZATION	NY	527		N/A		No
USW DISTRICT 7 NON-FEDERAL ACCOUNT 1301 TEXAS STREET ROOM 200 GARY, IN 46402 20-5397361	527 ORGANIZATION	IN	527		N/A		No
USW DISTRICT 7 NON-FEDERAL ACCOUNT - ILLINOIS 1301 TEXAS STREET ROOM 200 GARY, IN 46402 20-5397474	527 ORGANIZATION	IN	527		N/A		No
USW DISTRICT 8 KY NON-FEDERAL ACCOUNT 85 C MICHAEL DAVENPORT BOULEVARD SU FRANKFORT, KY 40601 20-5488742	527 ORGANIZATION	КҮ	527		N/A		No
USW DISTRICT 8 WV NON-FEDERAL ACCOUNT 85 C MICHAEL DAVENPORT BOULEVARD SU FRANKFORT, KY 40601 20-5488896	527 ORGANIZATION	КҮ	527		N/A		No
USW DISTRICT 8 MD VA NON-FEDERAL ACCOUNT 85 C MICHAEL DAVENPORT BOULEVARD SU FRANKFORT, KY 40601 20-5488980	527 ORGANIZATION	КҮ	527		N/A		No
USW DISTRICT 9 NON-FEDERAL ACCOUNT	527 ORGANIZATION	AL	527		N/A		No

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations (d) (f) (e) (g) Name, address, and EIN of related organization Primary activity Legal domicile Exempt Code Public charity Direct controlling Section 512 (state section status entity (b)(13) (if section 501(c) or foreign controlled entity? country) (3)) Yes No 527 ORGANIZATION ΜN 527 N/A Νo UNITED STEELWORKERS DISTRICT 11 NON-FEDERAL ACCOUNT 2929 UNIVERSITY AVENUE SE SUITE 150 MINNEAPOLIS, MN 55414 20-5476420 527 ORGANIZATION NΜ 527 N/A Νo UNITED STEELWORKERS DISTRICT 12 3150 CARLISLE BOULEVARD NE SUITE 11 ALBUQUERQUE, NM 87110 20-5400370 527 ORGANIZATION NΜ 527 N/A Νo UNITED STEELWORKERS DISTRICT 12 CALIFORNIA 3150 CARLISLE BOULEVARD NE SUITE 11 ALBUQUERQUE, NM 87110 20-5670270 527 ORGANIZATION 527 N/A NMΝo UNITED STEELWORKERS DISTRICT 12 COLORADO 2150 CADITCLE BOLLEVADO NE CLITE 11 Νo Νo Νo Νo

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N/A

Νo

3150 CARLISLE BOULEVARD NE SUITE 11 ALBUQUERQUE, NM 87110 _20-5670003				
UNITED STEELWORKERS DISTRICT 12 UTAH 3150 CARLISLE BOULEVARD NE SUITE 11 ALBUQUERQUE, NM 87110 20-5400494	527 ORGANIZATION	NM	527	N/A
UNITED STEELWORKERS DISTRICT 13 NON-FEDERAL ACCOUNT 1300 ROLLINGBROOK DRIVE SUITE 504 BAYTOWN, TX 77521 20-5445127	527 ORGANIZATION	тх	527	N/A
WORKERS UNITING 60 BLVD OF THE ALLIES PITTSBURGH, PA 15222 27-0205511	GLOBAL UNION	PA	501(C)(5)	N/A
STEELWORKERS HUMANITY FUND 234 EGLINTON AVENUE 8TH FLOOR TORONTO M4P 1K7 CA	BENEFITS	СА		N/A

HELPS SPEAK WITH A

UNITED VOICE TO FIGHT ISSUES

USW WORKS

46-4517192

60 BLVD OF THE ALLIES PITTSBURGH, PA 15222

Form	Form 990, Schedule R, Part V - Transactions With Related Organizations								
	(a) Name of related organization	(b) Transaction type(a-s)	(c) A mount Involved	(d) Method of determining amount involved					
(1)	DISTRICT 3 HOLDING SOCIETY	К	282,326	FMV					
(1)	USW BUILDING FUND	К	1,644,706	FMV					
(2)	LINDEN HALL CORPORATION	М	574,170	FMV					
(3)	USW BUILDING FUND	Р	68,388	FMV					
(4)	STEELWORKERS CHARITABLE AND EDUCATIONAL ORGANIZATION	Р	165,399	FMV					
(5)	STEELWORKERS CHARITABLE AND EDUCATIONAL ORGANIZATION	Q	441,491	FMV					
(6)	LINDEN HALL CORPORATION	R	1,722,874	FMV					
(7)	USW BUILDING FUND	R	900,955	FMV					
(8)	STEELWORKERS TRUSTEED BENEFIT PLAN	R	2,170,000	FMV					
(9)	USW WORKS	В	2,100,267	FMV					