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

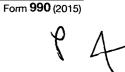
OMB No 1545-0047

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Α	For the	2015 calendar year, or tax year beginning and	ending		
В	Check if applicable	C Name of organization NATIONAL MAINTENANCE AGREEMENT		D Employer identific	cation number
Г	Addres	S TAROR MANAGEMENT ROLLING CONSTRUCT			
Ē	Name change			52-1	289622
	Initial	Number and street (or P 0. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Final return/ termin-	1501 LEE HIGHWAY	202	(703	)841-9707
	ated Ameno return	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$  H(a) Is this a group re	2,959,801.
	Application	F Name and address of principal officer of EFFEN R. DINDAGE.	R	for subordinates	
	pendin	9 1501 LEE HIGHWAY, SUITE 202, ARLINGTON		H(b) Are all subordinates in	ncluded? Yes No
		mpt status 501(c)(3) _X 501(c) ( 6 ) ◀ (insert no.) 4947(a)(1)	or 527	If "No," attach a	list (see instructions)
		e: ► NMAPC.ORG		H(c) Group exemption	
ĸ	Form of	organization: X Corporation Trust Association Other	L Year	of formation: $1981$ N	State of legal domicile: DC
P	art I	Summary			
Governance	1	Briefly describe the organization's mission or most significant activities SEE	SCHEDU	ILE O.	
'n	2	Check this box I if the organization discontinued its operations or dispo	sed of more	than 25% of its net as	sets
Ve		Number of voting members of the governing body (Part VI, line 1a)	sed of filore	3	11
		Number of independent voting members of the governing body (Part VI, line 1b)		4	10
Activities &		Total number of individuals employed in calendar year 2015.(Part V, line 2a)		5	0
ij	L	Total number of volunteers (estimate if necessary)		6	0
Ě		Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
ĕ		Net unrelated business taxable income from Form 990-T, line 34	,	( ) 7b	0.
	1 "	ly-i sua z -	2010	Ö Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	2016 📙	ch 0.	0.
Revenue	1	Program service revenue (Part VIII, line 2g)		<u>2,323,569.</u>	2,317,179.
Ver	1	1		214,102.	401,638.
æ		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	- " V	211,910.	240,984.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-	2,749,581.	2,959,801.
_	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)	-	0.	0.
	1		-	1,025,097.	1,052,567.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e)	-	0.	0.
Je L	loa	Total fundraising expenses (Part IX, column (D), line 25)	o.		0.
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<del></del>	1,263,009.	1,357,811.
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	2,288,106.	2,410,378.
		Revenue less expenses Subtract line 18 from line 12	<b>⊢</b>	461,475.	549,423.
<u> </u>		nevenue less expenses. Subtract line 18 from line 12	B.	eginning of Current Year	End of Year
sets or	20	Total assets (Bart V. Inc. 16)		7,324,273.	6,993,285.
ASSE	21	Total assets (Part X, line 16) Total liabilities (Part X, line 26)		1,389,274.	967,130.
Net As	22	Net assets or fund balances Subtract line 21 from line 20	$\vdash$	5,934,999.	6,026,155.
	art II	Signature Block		3,33 = ,333 •	0,020,133.
		Ities of perjury, I declare that have examined the return, including accompanying schedule	e and etatem	ente and to the heet of m	v knowledge and helief it is
		t, and complete, Declaration of preparer (other than officer) is based on all information of wi			y knowledge and belief, it is
	, 001100	t, and complete the analytic for the project (opter that officer) is based on all information of wh	inch proparci	S /4/	10
e:-		Signature of officer		Date Date	<u>/</u> &
Sig		STEPHEN R. LINDAUER, CEO			
He	re	Type or print name and title			
_				Date / Check	TT PTIN
Pai	id	JOANN WOODSON, CPA  Preparer's signature  JOANN WOODSON, CPA  Preparer's signature  DUNN Woods		7/20/14	
	parer	Firm's name CALIBRE CPA GROUP PLLC		Firm's EIN	47-0900880
	e Only	Firm's address 7501 WISCONSIN AVENUE, SUITE 12	00 141	EST FINIS EIN D	±1 020000
030	Unity	BETHESDA, MD 20814	OO WE		2-331-9880
_	Ale : 1º		_	Priorie no 20	
Ma	ıy tne II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No



### NATIONAL MAINTENANCE AGREEMENT LABOR-MANAGEMENT POLICY COMMITTEE

	1 990 (2015) LABOR-MANAGEMENT POLICY COMMITTEE	52-1289622	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<del></del>	
1	Briefly describe the organization's mission SEE SCHEDULE O		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes [	X No
_	If "Yes," describe these new services on Schedule O	. —	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service If "Yes," describe these changes on Schedule O.	.s? ∟Yes L	_A_i No
4	Describe the organization's program service accomplishments for each of its three largest program services,	an manager and here are a	
7	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to or		nd
	revenue, if any, for each program service reported		
4a	(Code) (Expenses \$	venue \$	)
	RESOLVING PROBLEMS OF MUTUAL CONCERN, ADMINISTERS NATI		TC E
	AGREEMENTS, AND ACTS AS GRIEVANCE AND DISPUTE-HANDLER.	ONAL MAINIBNAN	ACT:
	MONDEMENTS, THE NOTE THE CREENINGER THE DISTOTE INMIDERAL.		
		<u>-</u> .	
4b	(Code) (Expenses \$ including grants of \$) (Rev	venue \$	)
	FORMS, EVALUATES AND DEVELOPS PROGRAMS, ESTABLISHES IN		ES,
	AND GENERALLY EXPANDS AND IMPROVES WORKING RELATIONSHI WORKERS AND MANAGERS.	PS BETWEEN	
	WORKERS AND MANAGERS.		
		<del></del>	
			<del></del>
4c	(Code) (Expenses \$	venue \$	)
		<del></del>	
		· · · · · · · · · · · · · · · · · · ·	
		<del></del>	
			<del></del>
			<del></del>
4d	Other program services (Describe in Schedule O.)		
70	(Expenses \$ including grants of \$ ) (Revenue \$	١	
4e	Total program service expenses		
		OC	0015

532002 12-16-15

Form **990** (2015)

Page 3

## NATIONAL MAINTENANCE AGREEMENT Form 990 (2015) LABOR-MANAGEMENT POLICY COMMITTEE Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors	2		Х
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	<u> </u>	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	<u> </u>	ļ
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_	1	J
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	<u> </u>	Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to		İ	x
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	<b></b>	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_	1	x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	-	<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	•		<del></del> -
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			ŀ
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable	,,,	``	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	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		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		^
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		x	1
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	^	
128	Schedule D, Parts XI and XII	12a	x	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120	<del> </del>	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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		Х
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		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			l
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<u> </u>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	├	X
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		x
	COMPLETE OCHEQUIC CL. FAIL III	. 19	1	ıΛ

Form 990 (2015) LABOR - MANAGEMENT P
Part IV Checklist of Required Schedules (continued)

b If Yes' to line 20s, did the organization attach a copy of its audited financial statements to this return?  20b I bid the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic povernment on Part IX, column (A), line 2° II "Yes," complete Schedule I, Parts I and III  21 Did the organization report more than \$5,000 of grants or other assistance to or for domestic includus on Part IX, column (A), line 2° II "Yes," complete Schedule I, Parts I and III  22 Did the organization answer "Yes" to Part IXI, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, insuless, key employees, and highest compensated employees? If "Yes," complete Schedule II and IXI				Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any demestic organization or domestic government on Part IX, column (A), line 27. If "Yes," complete Schedule (L Parts I and II)  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 27. If "Yes," complete Schedule I, Parts I and III  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, insistes, key employees, and highest compensated employees? If "Yes," complete Schedule Is Schedule Is 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 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  25b Did the organization maintain an escrow account other than a refunding escrow at any time during the year?  25c Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a desqualited person during the year? If "Yes," complete Schedule L, Part II  25c Schedule I, Part II  25d Did the organization aware that it engaged in an excess benefit transaction with a desqualited person during the year? If "Yes," complete Schedule L, Part IV  25d 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, instecs, key employees, highest compensated employees, or disqualitied persons? If "Yes," complete Schedule L, Part IV  25d Did the organization aparty to a business transaction with ore of the following parties (see Schedule L, Part IV  27d Can entity of which a current or former officer, director, instender, or key employees, if "Yes," complete Schedule L, Part IV  28d Did the organization receive more than \$25,000 in non-cash contributi	<b>2</b> 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
domestic government on Part IX, column (A), line 37 if "Yes," complete Schedule i, Parts I and il 21 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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? // "Yes," complete Schedule I, Part I and III 2 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? // "Yes," complete Schedule I, Part II 2 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? // "Yes," answer lines 24b through 24d and complete Schedule K. If "No." jo to line 25a Did the organization maintain an escrow account other than a returnding escrow at any time during the year to defease any tax-exempt bonds?  1 Did the organization amount as an "on behalf of" issuer for bonds outstanding at any time during the year?  22a 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  25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II  25c I be the organization aware that it engaged in an excess benefit transaction with a disqualified person on a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 E27 If "Yes," complete Schedule L, Part II  25c I be the organization and any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, frustee, complete Schedule L, Part IV  25c I be schedule L, Part II  27d I be the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions?  27d I was the organization and a	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
Part IX, column (A), Ine 27 If "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VII, Section A, Ine 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I.  23 X  24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule II" "No", go to line 25a  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24b  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24c  Did the organization invest any proceeds of tax-exempt bonds outstanding principal amount of meriod principal and the secretary tax exempt bonds?  24d  Did the organization and the secretary principal and the secretary tax exempt bonds?  25d  Did the organization aware that engaged in an excess benefit transaction with a disqualified person in a principal and that the transaction and any of the organization approach are any animal to Part Yies, "complete Schedule L, Part II"  Did the organization are principal and provide a grant of other assistance to an officer, director, trustee, key employee, substantial contributor of any of these persons? If "Yes," complete Schedule L, Part III  Did the organization party to a business transaction with one of the following parties (see Schedule L, Part III)  Did the organization receive mor		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
23 Did the organization answer "Yes" to Part VII, Section A, Ine 3. 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule U and 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  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  24d	22				l
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 24 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 If "Tho," go to him e 25a  b Did the organization minist an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization maintain an escrow account other than a refunding escrow at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization aware that tengaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I I b 1s 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 E27 If "Yes," complete Schedule L, Part II D 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 disqualited persons? If "Yes," complete Schedule L, Part III 25b 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 a current or former officer, director, trustee, or key employees? If "Yes," complete Schedule L, Part IV 25c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 25c Did the organization receive m			22		X
Schedule J  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  24b Did the organization mentan an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  24c Did the organization mentan an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  25c 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 II 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 E27 If "Yes," complete Schedule L, Part II b is 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 D id 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 farmly member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV anstructions for applicable fling thresholds, conditions, and exceptions)  22b A farmly member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A farmly member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A farmly member of a current or former officer, director, trustee, or k	23				
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  24b  Did the organization inwest any proceeds of tax-exempt bonds beyond a temporary penid exception?  24c  Did the organization inwest any proceeds of tax-exempt bonds beyond a temporary penid exception?  24d  Did the organization area as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d  Did the organization with a disqualified person during the year? If "Yes," complete Schedule L, Part I  Did the organization as the reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I  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, 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 IV  25d  Did the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV  27d  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV  28e  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV  29d  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contri				v	
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  b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-evempt bonds?  d Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-evempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person outly transaction with a disqualified person outly at that the transaction with a disqualified person outly an an excess benefit transaction with a disqualified person outly an an excess benefit transaction with a disqualified person on a price of the organization or port any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, frustees, key employees, inchest complete Schedule L, Part II  Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustee, expending or any of these persons? If "Yes," complete Schedule L, Part III  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)  a A current of former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  and the organization receive more than \$255,000 in non-cash contributions? If "Yes," complete Schedule R, Part I Nimes 1  Did the organization of level of the organization with a contro	04-		23		
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Form <b>990</b> (20		Tracer, w. C.III. 200 micro dro required to complete opriodate o			2015)

Check if Schedule O contains a response or note to any line in this Part V  10 Enter the number reported in Box 3 of Form 1096 Enter- of not applicable 1	Par		022		age o
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b Enter the number of Forms W2G included in line 1a Enter O-If not applicable  Old the organization comply with backup with backup with binding rules for reportable payments to vendors and reportable gaming (gimbling) warnings to prize winnings?  22 Enter the number of employees reported on Form W3, Transmital of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  b if at least one is reported on line 2a, did the organization life all required federal employment tax returns?  Note. If the sum of lines 1 and 2 as greater than 250, you may be required to e-life (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  5a Did the organization have unrelated business gross income of \$1,000 or more during the year?  5b If "Yes," has it field a Form 990-Tof for this year 1"/60, ** for line 30, more/de an explaination in Schedule 0  5b If "Yes," has it field a Form 990-Tof for this year 1"/60, ** for line 30, more/de an explaination in Schedule 0  5c If Yes," the site of Form 990-Tof for this year 1"/60, ** for line 30, more during the year?  5c If Yes," the first the number of the foreign country; by  5c If Yes, "the first the approximation of the foreign country; by  5c If Yes," the ine 5a or 5b, did the organization first twas or is a party to a prohibitor tax shelter transaction?  6c If Yes," to line 5a or 5b, did the organization first twas or is a party to a prohibitor tax shelter transaction or grifs were not tax deductible as charitable contributions?  6c If Yes," to line 5a or 5b, did the organization first twas or is a party to a prohibitor than twen or tax deductible as charitable contributions and explain that such a contribution or grifs were not tax deductible on this device the party to a prohibitor than the war or is a party to a prohibitor than the variation shell of the party of the comparization shell are may receive deductible contributions or an express statement that such contributio	1a	Enter the number reported in Box 3 of Form 1096. Enter .0. if not applicable		162	140
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2a Eiter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements.    1b If at least one is reported on home 2a, did the organization file all frequired federal amployment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  2b Dd the organization have unrelated business gross income of \$1,000 or more dumping the year?  8b If "Yes," has it field a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O  8c At any time dumping the calend year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FIAAF).  8c en entructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FIAAF).  8c was the organization party to a prohibetid stat whelter transaction at any time during the tax year?  8c Dest the organization have have sheller transaction at any time during the tax year?  8c Dest the organization have a mail gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions under section 170(c).  8c Dest the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that may receive deductible contributions under section 170(c).  9c Diff the organization include with every solicitation an experses statement that such contributions or grifs were not tax deductible?  9c Diff the organization include with every solicitation an experses statement that such contributions or grifs were not tax deductible?  9c Diff the organization that may receive deductible contributions under section 170(c).  9c Diff the organization that may receive deductible contributions under section 170(c).  9c Diff the organization than the property of the value of the good	Ŭ		10	X	·
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b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to 4-file (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  5b If "Yes," has it filed a Form 990 T for this year? If "No," to line 3b, provide an explanation in Schedule 0  4a At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  5c If "Yes," to line 3a or 5b, did the organization with the standard or in a possibility of a prohibited tax shellor transaction at any time during the tax year?  5c If Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  6c If Yes," to line 5a or 5b, did the organization that file was or is a party to a prohibited as schartable contributions?  6c If Yes," to line 5a or 5b, did the organization that file was or is a party to a prohibited as schartable contributions?  6c If Yes," to line 5a or 5b, did the organization that file was or is a party to a prohibited that was or is a party to a prohibited that was or is a party to a prohibited that was or is a party to a prohibited that was or is a party to a prohibited that was or is a party to a prohibited that was or is a party to a prohibited that the organization oscillation and party of the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c If Yes," to the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  6c If Yes," to the organization receive any payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  6c If Yes," to the organizat			, 9, 6	ì	KK:
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to 4-file (see instructions)  □ Did the organization have unrelated business gross income of \$1,000 or more during the year?  □ If Yes,* has it filed a Form 990-T for this year? If "No," to line 30, provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. ►  5a Was the organization for the foreign country. ►  5a Was the organization a porty to a prohibited fax shelter transaction at any time during the tax year?  5a Was the organization a porty to a prohibited fax shelter transaction at any time during the tax year?  5b Ud any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?  5c Uf "Yes," to line 5a or 5b, did the organization file Form 888617  6b Does the organization have annual gross recepts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  7b Uffect of the organization shell are that was or is a party to a prohibited tax shelter transaction or gifts were not tax deductible?  7c Organizations that may receive deductible contributions under section 170(c).  □ Did the organization receive a payment in excess of \$75 made party as a contribution of and party for goods and services provided to the payor?  7a Did the organization receive apayment in excess of \$75 made party as a contribution of prometry for which it was required to file Form 8282?  1b If "Yes," did the organization receive apayment in excess of \$75 made party as a contribution of prometry for which it was required to file Form 8282?  1c Did the organization received a payment in excess of \$75 made party as a contribution of prometry for which it was required?  1c Did the organization received an ortherwise dispose of tangels personal property for which it was required?	b			in ind	, ME 1500/200
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transcual account in a foreign country (such as a bank account, securities account, or other financial accounti?)  b If "Yes," enter the name of the foreign country."  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF).  Sa Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  55. X  c If "Yes," to line Sa or Sb, did the organization file Form 8886-17  60. Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions intal tweer not tax deductible as charitable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  70. Organizations that may receive deductible contributions under section 170(c).  80. Did the organization receive any anyment in excess of \$75 made parity as a contribution and partly for goods and services provided to the payor?  71. If "Yes," indicate the number of Forms 8282 filed during the year of the region of the requirement of the Form 8282?  71. The Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  72. The Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  73. The organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  74. If the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  75. Did the organization received a contribution of cars, boats, anjanes, or other vehicles, did the organization the Form 1098-0?  76. Sponsoring organizations maintaining donor advised funds. Did a donor advised fund mainta	b				
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b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  if "Yes," to line 5a or 5b, did the organization file Form 88867 secepts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make access business holdings at any time during the year?  3 Sponsoring organizations make any taxable distributions under section 4966?  b Did the sponsoring organization make any taxable distribution or under section 4966?  9 Did the sponsoring organization make any taxable distribution or under section 4966?  9 Did the sponsoring organization make any taxable distribution or under section 4966?  9 Did the sponsoring organization make any taxable distribution under section 4966?  9 Did the sponsoring organization make any taxable distribution or under section 4966?  9 Did the sponsoring organization make any taxable distribution or under section 4966?  9 Did the sponsoring organization make any taxable distribution or under section 4966?  9 Did the organization here sources (Do not net amount		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			i
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7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  b If "Ves," did the organization netify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Ves," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organizations. Enter  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12  cross income from members or shareholders  b Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  11b  12a  Section 501(c)(2) organizations. Enter  a Is the organization is unally file and profit health insurance issuers.  Is the organization is unally file and profit health insura	b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			İ
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				990	(2015)

# NATIONAL MAINTENANCE AGREEMENT

LABOR-MANAGEMENT POLICY COMMITTEE

52-1289622

Form 990 (2015) Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response or note to any line in this Part VI						X
Sec	tion A. Governing Body and Management						
			_			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		_11			1.5
	If there are material differences in voting rights among members of the governing body, or if the governing				<u> </u>		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					× ×.	, į
b	Enter the number of voting members included in line 1a, above, who are independent	1b		10	3		1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other			š	<u></u>
	officer, director, trustee, or key employee?			L	2		X
3	Did the organization delegate control over management duties customarily performed by or under th	e dıre	ct supervision				
	of officers, directors, or trustees, or key employees to a management company or other person?				3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 w	as filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	sets?			5		X
6	Did the organization have members or stockholders?			L	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or approximation of the power to elect or	point	one or				
	more members of the governing body?				7a	_X_	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockh	olders, or	1			
	persons other than the governing body?				7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by tl	ne following:	,	1	* x x . S.	
а	The governing body?			L	8a	<u> </u>	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	-		ļ.	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	iched	at the	ŀ			l
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		<u> </u>
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenu	e Code )				
				_		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?				10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such cl	napte	rs, affiliates,	ł			
	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b	77	
	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y befo	ore filing the fo	m <sup>7</sup>	11a	X	
	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			F	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			-	12b	Х	<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es, " a	escnbe	ŀ		х	
40	In Schedule O how this was done			⊦	12c		X
13	Did the organization have a written whistleblower policy?			-	13	X	<u> </u>
14	Did the organization have a written document retention and destruction policy?	_1		}	14	<u> </u>	<del> </del>
15	Did the process for determining compensation of the following persons include a review and approve	•	naepenaent				
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					Х	
a	The organization's CEO, Executive Director, or top management official			ŀ	15a 15b	X	$\vdash$
b	Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			F	AND A	3	<del>                                     </del>
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	ment :	with a				
iva	taxable entity during the year?	nem	wiii a	ľ	16a	`	X
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua	to ite	narticination	1	V, 19		<del> </del> -
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization to evaluation to ev				> 1		
	exempt status with respect to such arrangements?	i iiZatii	) i i		16b	1	
Sec	tion C. Disclosure				100		<u></u>
17	List the states with which a copy of this Form 990 is required to be filed ▶VA						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-1	(Sec	tion 501(c)(3)s	only) av	/ailah	le	
	for public inspection. Indicate how you made these available. Check all that apply	,500		2 u			
	Own website Another's website X Upon request Other (explain	ın Sa	hedule O)				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co		•	cv. and	fınan	cial	
	statements available to the public during the tax year			_ ,ru		J	
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks a	nd records				
-	MIKE MARRONE - (703) 841-9707		<del></del>				
	1501 LEE HIGHWAY, #202, ARLINGTON, VA 22209				,		
53200	3 12.16.15				Form	990	(2015)

Form 990 (2015)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
   Enter -0- in columns (D), (E), and (F) if no compensation was paid
   List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

1 .	l .		Posi	) ition	ı		(D)	(E)	(F)
Average hours per week	box	not cl unle:	heck i ss pei	more	than s	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensaled employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
5.00	,,		,					•	0
F 00	X	L	X	L_	_		0.	0.	0
5.00	٠,,							0	•
F 00	A			<u> </u>	ļ		0.	υ.	0
3.00	Į.							0	0
5 00	^	_		┝	⊢	┢	0.	0.	
J.00	x						<b>1</b> 0.1	n	0
5.00	<u> </u>						•	•	
	x		х	ŀ			0.	0.	0
5.00	<del></del>			H					
	X			1			0.	0.	0
5.00									
	Х						0.	0.	0
5.00									
	Х			L		L	0.	0.	0
5.00	]						_ `	_	_
	X	_	_	_	<u> </u>	_	0.	0.	0
5.00		l							
	X	L		<u> </u>	_	_	0.	0.	0
25.00	1					1	100 004	_	22 672
	_	<u> </u>	X	<u> </u>	┡	<u> </u>	183,884.	0.	33,679
<u> </u>	┨				l				
	┢	_	$\vdash$	$\vdash$	⊢	├			
	1		1						
	$\vdash$	$\vdash$	$\vdash$	$\vdash$	H	$\vdash$			
	1								
	T		<del>                                     </del>		T				
	1		ļ						
			Ι_	1					
		L_	L.,	L		L	1		
	week (list any hours for related organizations below line)  5.00  5.00  5.00	week (list any hours for related organizations below line)  5.00  X  5.00  X  5.00  X  5.00  X  5.00  X  5.00  X  5.00  X  5.00  X  5.00  X  5.00  X  5.00  X  5.00  X	week (list any hours for related organizations below line)  5.00  X  5.00  X  5.00  X  5.00  X  5.00  X  5.00  X  5.00  X  5.00  X  5.00  X  5.00  X  5.00  X  5.00  X	Week (list any hours for related organizations below line)	Week (list any hours for related organizations below line)	Week (list any hours for related organizations below line)	Week (list any hours for related organizations below line)	Week (list any hours for related organizations below line)	Week (list any hours for related organizations below line)

532007 12-16-15

	Section A. Officers, Directors, Tru	_	pioy	ees			yne:	st C			<del>- ,</del>			
	(A)	(B)			(C				(D)	(E)	- 1		(F)	
	Name and title	Average hours per		not c	Posi heck i	more	than		Reportable	Reportable	1		timated	
		week			ss per id a di				compensation	compensation	- 1		nount of	
		(list any	ă						from the	from related organizations			other pensati	'n
		hours for	director				P		organization	(W-2/1099-MIS			om the	"
		related	se or	stee			nsate		(W-2/1099-MISC)	(11 27 1000 11110	· ,		anizatio	1
		organizations	trust	al tru		yee	educ		(** = * * * * * * * * * * * * * * * * *			_	related	
		below	Individual trustee or	nstitutional trustee	Ja	Key employee	esi co loyee	JG.				orga	ınızatıor	s
		line)	盲	ılst	Officer	Key	Highest compensated employee	Former						
			$\frac{1}{1}$											
	· · · · · · · · · · · · · · · · · · ·													
	<del></del>													_
											$\dashv$			_
			-								_			
			<u> </u>						<del> </del>				· · -	
1h	Sub-total								183,884.		0.	3	3,67	<u>a</u> .
	Total from continuation sheets to Part	VII Section A							0.		0.			Ō.
	Total (add lines 1b and 1c)	VII, Section A							183,884.		<del>0.</del> 1	3	3,67	
2	Total number of individuals (including but	not limited to the	nose	liste	ed at	oove	e) wh	o re		0,000 of reportable			3,01	
	compensation from the organization											1	Yes I	1 10
3	Did the organization list any former office			e, ke	y en	nplo	yee,	or I	highest compensated e	mployee on	ſ			× 1
_	line 1a? If "Yes," complete Schedule J for										L	3		X
4	For any individual listed on line 1a, is the								•	the organization	ě	9.7	3.5	
_	and related organizations greater than \$1											4	X	
5	Did any person listed on line 1a receive o	•				-		elat	ed organization or indiv	idual for services		_	3	
	rendered to the organization? If "Yes," co	mpiete Schedui	e J 1	or s	ıch j	oers	on					5		X
202												t.o. 6	rom	_
_		compensated in	dene	ande	nt c	ontr	acto	re t	hat received more than	\$100,000 of com	nones		IUIII	
_	Complete this table for your five highest of	=	-								pensa	illori i		
_		=	-								pensa		;)	_
_	Complete this table for your five highest of the organization. Report compensation for	or the calendar y	ear		ng w				the organization's tax	year		(C	s) nsation	_
Sector 1	Complete this table for your five highest of the organization Report compensation (A)	or the calendar y	ear	endı	ng w				the organization's tax (B)	year		(C		
	Complete this table for your five highest of the organization Report compensation (A)	or the calendar y	ear	endı	ng w				the organization's tax (B)	year		(C		
_	Complete this table for your five highest of the organization Report compensation (A)	or the calendar y	ear	endı	ng w				the organization's tax (B)	year		(C		
_	Complete this table for your five highest of the organization Report compensation (A)	or the calendar y	ear	endı	ng w				the organization's tax (B)	year		(C		
_	Complete this table for your five highest of the organization Report compensation (A)	or the calendar y	ear	endı	ng w				the organization's tax (B)	year		(C		
1	Complete this table for your five highest of the organization. Report compensation for (A).  Name and business	or the calendar y	N(	ONI	ng w	vith (	or w	thir	n the organization's tax (B) Description of s	year		(C		
_	Complete this table for your five highest of the organization Report compensation (A)	or the calendar y	N(	ONI	ng w	tho	or w	thir	n the organization's tax (B) Description of s	year		(C		

Form 990 (2015) LABOR - M.
| Part VIII | Statement of Revenue

<u> </u>		Check if Schedule O contain:	s a response	or note to any lir	ne in this Part VIII			
* * * *					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
इइ	1 a	Federated campaigns	1a				` *	
ts, Grant Amount		Membership dues	1b		1.5			3
υĔ		Fundraising events	1c		<b>.</b>	<u>^</u>	×K.	
Gifts llar A		Related organizations	1d		<u> </u>	****		
a;≣		Government grants (contribution	<del></del>				. 8 266	
Sig		All other contributions, gifts, grants, a	<i>'</i>			<b>2</b>	***	, ° , ° ,
돌힐	f	similar amounts not included above	1f		/*	ĺ,	· 🦓 · · · · ·	
불리							*	
Contributions, Gif and Other Similar	-	Noncash contributions included in lines 1a-	11 \$			* *		[
<del>= " </del>	n n	Total. Add lines 1a-1f		Business Code	* ;			1
.	2 a	ADMINISTRATIVE F		900099	2,317,179.	2 317 179	: All	ك سم ، ه د لم شم
Š	2 a b			300033	<u> </u>	2,31,17.		
is si								
Εğ	G							
Pag Bag	a							
Program Service Revenue	e	All all all and an analysis						
-	f	All other program service revenue	e		2,317,179.	<u> </u>		
$\rightarrow$	9	Total. Add lines 2a-2f			2,311,113.	*		
1	3	Investment income (including div	viaenas, intere	est, and				
		other similar amounts)			401,638.			401,638.
	4	Income from investment of tax-ex	xempt bona p	roceeas	401,030.			401,030.
	5	Royalties	(2 D1	(1) Dament				
	•		(i) Real	(II) Personal	. N			1
	6 a	Gross rents	<del>_</del>			<i>13</i> 4 .	t	
-		Less rental expenses						
1		Rental income or (loss)				, ,	, 7.233	
	d	Net rental income or (loss)	() Convertion	(i) Other		<u> </u>		
	/ a	——————————————————————————————————————	i) Securities	(ii) Other	k X	* ,		
		assets other than inventory		1		* '3' \	M.	
	D	Less. cost or other basis			<b>*</b>		, ·	
	_	and sales expenses			1			1
		Gain or (loss)		<u> </u>	********* *	K .a		
		Net gain or (loss)	wanta (nat		1.5	; ## · .	> *	* × .> ^
en l	ва	Gross income from fundraising e				≪,ő -		
Revenue		including \$	of	ļ	ļ., .		, 3	
		contributions reported on line 10	s) See					'
Other		Part IV, line 18	a		1			
ŏ		Less: direct expenses	b bana anata			, ,		: '.
		Net income or (loss) from fundral				* * * * * * * * * * * * * * * * * * *		
	э а	Gross income from gaming activ					, ,	,
į	L	Part IV, line 19	а		<b>'</b>	,		,
- 1		Less direct expenses  Net income or (loss) from gaming	b	L	,			
								-
	io a	Gross sales of inventory, less ret and allowances						ļ
			a b		1.	*		′, ,
		Less: cost of goods sold		L	ĺ		*	" 'Y"
}	<u>c</u>	Net income or (loss) from sales of	ninventory	Business Code	-			· · ·
	44 -	Miscellaneous Revenue SPONSORSHIP		900099	195,000.			195,000.
		MISC INCOME		900099	45,984.	45,984.		122,000.
	b	HISC INCOME		700099	33,704.	33,304.	-	<del> </del>
	C	All other revenue				<del> </del>		
	d	All other revenue			240,984.	<u> </u>		<del> </del>
	e	Total. Add lines 11a-11d  Total revenue. See instructions.			2,959,801.	2 363 163	0.	596,638.
	12	TOTAL FEVERNA C. OCC 1113B UCTIONS.			-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u>-,555,165.</u>	·	Form <b>990</b> (2015)

Part IX Statement of Functional Expenses

Secu	ion 501(c)(3) and 501(c)(4) organizations must com			complete column (A)	<del></del>
	Check if Schedule O contains a respon not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	(C) Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				* '
	and domestic governments. See Part IV, line 21			i i	<u> </u>
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				lankei 18 a
	individuals. See Part IV, lines 15 and 16				? W
4	Benefits paid to or for members			¥ 👯 🖰	* · · · · · · · · · · · · · · · · · · ·
5	Compensation of current officers, directors,	217 562			
•	trustees, and key employees	217,563.			
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		603,422.		<u> </u>	<u> </u>
7 8	Other salaries and wages Pension plan accruals and contributions (include	003,422.		<del>                                     </del>	
0	section 401(k) and 403(b) employer contributions)	110,231.			
9	Other employee benefits	68,687.			
10	Payroll taxes	52,664.		<u> </u>	
11	Fees for services (non-employees)	32,0010		· · · · · · · · · · · · · · · · · · ·	
···					•
b	Legal	42,145.		<del>                                     </del>	
c	Accounting	30,000.		<del>                                     </del>	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17			· 🌺 - ¾,	
f	Investment management fees			A*** - 3/A	
g	Other (If line 11g amount exceeds 10% of line 25,				
_	column (A) amount, list line 11g expenses on Sch O.)	36,553.			
12	Advertising and promotion		· · · · · · · · · · · · · · · · · · ·		
13	Office expenses	106,120.			
14	Information technology				
15	Royalties				
16	Occupancy	186,834.			
17	Travel		<u></u>		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	000 451	· · · · <u></u>		
19	Conferences, conventions, and meetings	283,471.			
20	Interest			ļ	
21	Payments to affiliates	5,220.	<del></del>		-
22	Depreciation, depletion, and amortization	20,536.			
23	Insurance	20,330.		3 18 1	73 ,
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	SAFETY AWARDS PROGRAM	212,150.		**************************************	* # # # # # # # # # # # # # # # # # # #
b	MARKETING PROGRAM	108,374.	<del></del>		
	CONTRIBUTIONS	100,000.		<del>                                     </del>	
d	SOFTWARE DEVELOPMENT &	98,653.		<del> </del>	
e	All other expenses	127,755.			
25	Total functional expenses. Add lines 1 through 24e	2,410,378.			
26	Joint costs. Complete this line only if the organization			1	-
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

532010 12-16-15

Form 990 (2015)

art )	X∛	Balance Sheet					
		Check if Schedule O contains a response or no	te to any	/ line in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash · non-interest-bearing			0 240 220	1	1 774 064
1	2	Savings and temporary cash investments			2,348,229.	2	1,774,861.
- 1	3	Pledges and grants receivable, net			16.000	3	F 450
	4	Accounts receivable, net			16,008.	4	5,450
5	5	Loans and other receivables from current and for			4.	1	
		trustees, key employees, and highest compensa	ated em	ployees Complete			
.	_	Part II of Schedule L			<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	5	2. 2.4
۱ ۹	6	Loans and other receivables from other disquali	-			l "	
		section 4958(f)(1)), persons described in section		• • • • • • • • • • • • • • • • • • • •	, %	, jê	
		employers and sponsoring organizations of sec			&		·
.	_	employees' beneficiary organizations (see instr)	ete Part II of Sch L		6		
<b>4</b>	7	Notes and loans receivable, net				7	
- 1	8	Inventories for sale or use			8	10,256	
. I	9	Prepaid expenses and deferred charges	1 1			9	10,230
"	0a	Land, buildings, and equipment cost or other	400	268,248.	13,366.		
	<b>L</b>	basis Complete Part VI of Schedule D	10a 10b	250,428.	13 366		17,820
11	b •	Less accumulated depreciation Investments - publicly traded securities	TOD	250, 420.	4,946,670.	10c	5,184,898
12		Investments - other securities. See Part IV, line	11		4,540,070.	12	3,104,000
13		Investments - program-related See Part IV, line				13	
14		Intangible assets	• •			14	
15		Other assets. See Part IV, line 11				15	<u> </u>
16		Total assets. Add lines 1 through 15 (must equ	al line 3	4)	7,324,273.	16	6,993,285
17		Accounts payable and accrued expenses		7	958,624.	17	844,360
18		Grants payable		18	<u> </u>		
19	9	Deferred revenue	430,650.	19	122,770		
20	0	Tax-exempt bond liabilities				20	
21	1	Escrow or custodial account liability. Complete	Part IV o	of Schedule D		21	
22	2	Loans and other payables to current and former	r officers	s, directors, trustees,	The state of the s		* ? * .
		key employees, highest compensated employee	es, and	disqualified persons		 	
22		Complete Part II of Schedule L				22	
23	3	Secured mortgages and notes payable to unrela	ated thir	d parties		23	
24	4	Unsecured notes and loans payable to unrelate	d third p	parties		24	
25	5	Other liabilities (including federal income tax, pa	yables 1	o related third			
		parties, and other liabilities not included on lines	s 17-24).	Complete Part X of			
		Schedule D				25	
26	6	Total liabilities. Add lines 17 through 25			1,389,274.	26	967,130
		Organizations that follow SFAS 117 (ASC 958		k here 🕨 🔼 and	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		complete lines 27 through 29, and lines 33 ar	nd 34.		· · · · · · · · · · · · · · · · · · ·	ŀ	006 155
27		Unrestricted net assets			5,934,999.	27	6,026,155
28		Temporarily restricted net assets				28	
29	9	Permanently restricted net assets			λ. & *	29	Mu Z
		Organizations that do not follow SFAS 117 (A		,			
	_	and complete lines 30 through 34.			<sup>3</sup> .32	Š	- &
30		Capital stock or trust principal, or current funds		A 5 d		30	<del> </del>
31		Paid-in or capital surplus, or land, building, or ed				31	<b> </b>
27 28 29 30 31 32 33		Retained earnings, endowment, accumulated in Total net assets or fund balances	icome, c	or other tunus	5,934,999.	32	6,026,155
34		Total liabilities and net assets/fund balances			7,324,273.	34	6,993,285
	_	Total liabilities and fiet assets/fullo Dalances			,,344,413.	<u>. 34</u>	Form <b>990</b> (2015

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### NATIONAL MAINTENANCE AGREEMENT

	1990 (2015) LABOR - MANAGEMENT POLICY COMMITTEE	J 4 1	4090 <i>44</i>	Pac	le 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
	Tabel		2 050	. 0	n 1
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,959 2,410	7,0	70
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1	3			23.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,934		
5	Net unrealized gains (losses) on investments	5	<458	3,2	67.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
0	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	6,026	5,1	55.
<u>Pa</u>	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_	* 4	,
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.	-	33	(
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			l (g. ;
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		<u> </u>		3
b	Were the organization's financial statements audited by an independent accountant?		2b	x	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs,		<b>\</b> "	<u> </u>
	consolidated basis, or both:	•		:	Ŕ.
	X Separate basis Consolidated basis Both consolidated and separate basis				27
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt.	<u>á</u> à		,
	review, or compilation of its financial statements and selection of an independent accountant?	,	2c	$\mathbf{x}$	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O	<del></del> -	7.	ì
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii			٠,	(3)
	Act and OMB Circular A-133?	.g.c / louit	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired audit	"		
_	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	ca audit	3b		

Form **990** (2015)

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

NATIONAL MAINTENANCE AGREEMENT

LABOR-MANAGEMENT POLICY COMMITTEE

**Employer identification number** 52-1289622

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts.Complete if the			
	organization answered "Yes" on Form 990, Part IV, Iir		·			
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised fu	inds			
	are the organization's property, subject to the organization's		Yes No			
6	Did the organization inform all grantees, donors, and donor a	*				
	for charitable purposes and not for the benefit of the donor of	<u> </u>	•			
	impermissible private benefit?	, , ,	Yes No			
Pai	Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, Part I	V, line 7			
1	Purpose(s) of conservation easements held by the organizat					
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a historical	ly important land area			
	Protection of natural habitat	Preservation of a certified i	•			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a c	conservation easement on the last			
	day of the tax year		Held at the End of the Tax Year			
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c			
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure				
	listed in the National Register		2d			
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the orga	anization during the tax			
	year ▶					
4	Number of states where property subject to conservation ea	sement is located >				
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of				
	violations, and enforcement of the conservation easements i	t holds?	Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conserva-	tion easements during the year			
	<b>&gt;</b>					
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation $\epsilon$	easements during the year			
	<b>▶</b> \$					
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4)	(B)(i)			
	and section 170(h)(4)(B)(ii)?		└─ Yes └─ No			
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense state	ement, and balance sheet, and			
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for					
_	conservation easements					
Pai	rt III Organizations Maintaining Collections o	· · · · · · · · · · · · · · · · · · ·	Similar Assets.			
	Complete if the organization answered "Yes" on Form	1 990, Part IV, line 8				
1a	If the organization elected, as permitted under SFAS 116 (AS	•	•			
	historical treasures, or other similar assets held for public ext	hibition, education, or research in furtherance o	of public service, provide, in Part XIII,			
	the text of the footnote to its financial statements that descri					
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement and	balance sheet works of art, historical			
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public s	ervice, provide the following amounts			
	relating to these items					
	(i) Revenue included on Form 990, Part VIII, line 1		<b>▶</b> \$			
	(ii) Assets included in Form 990, Part X		<b>\$</b>			
2	If the organization received or held works of art, historical tre		, provide			
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items				
а	Revenue included on Form 990, Part VIII, line 1		<b>▶</b> \$			
b	Assets included in Form 990, Part X		<b>▶</b> \$			

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### NATIONAL MAINTENANCE AGREEMENT

		ANAGEMENT							89622	
Pai	rt III. Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures, e	or Othe	er Simil	ar Asse	ts(continu	ıed)
3	Using the organization's acquisition, access	ion, and other record	ds, chec	k any of the	following tha	at are a s	ignificant	use of its	collection	ıtems
	(check all that apply)									
а	Public exhibition	C	<u> </u>	Loan or exc	hange progra	ams				
b	Scholarly research	•		Other	J. J					
С	Preservation for future generations									
4	Provide a description of the organization's c	ollections and expla	in how th	ev further t	he organizati	ınn's exe	mnt nurn	nse in Par	+ YIII	
5	During the year, did the organization solicit of							000 u.		
-						ioi oii iiia	. 455015		Yes	☐ No
Pai	to be sold to raise funds rather than to be maintained as part of the organization's collection?  Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or									
<u> </u>	reported an amount on Form 990, Part X, line 21.									
10			d							
ıa	Is the organization an agent, trustee, custod	lian or other intermed	diary for	contribution	is or other as	ssets not	incluaea	_	٦.,	
	on Form 990, Part X?									
D	b If "Yes," explain the arrangement in Part XIII and complete the following table									
							$\vdash$		Amount	
	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						_1f			
	2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?									
	b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII									
Pai	t V Endowment Funds. Complete	f the organization ar	nswered	"Yes" on Fo	rm 990, Parl	t IV, line	10			
		(a) Current year	(b) P	rior year	(c) Two year	rs back	(d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance		<u> </u>							
b	Contributions									
С	Net investment earnings, gains, and losses				,,					
d	Grants or scholarships									
е	Other expenditures for facilities					ĺ				
	and programs		ļ							
f	Administrative expenses					Î				
g	End of year balance									
2										
а										
b										
	c Temporarily restricted endowment > %									
•	The percentages on lines 2a, 2b, and 2c should equal 100%									
32	The percentages on lines 2a, 2b, and 2c should equal 100%  Ba Are there endowment funds not in the possession of the organization that are held and administered for the organization									
- Ou										
	by: (i) unrelated organizations  Yes No (ii) 4 (iii) 4 (iii) 5 (iiii) 5 (iiii) 6 (iiii) 7 (iiii) 7 (iiii) 7 (iiii) 8 (iiii) 7 (iiii) 8 (ii									
	(ii) related organizations								3a(i)	
<b>h</b>	If "Yes" on line 3a(ii), are the related organizations	ations listed as result		ahadula DO					3a(ii)	
_		•							3b	
	4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.									
T ai			0 D- 4 II		. F 000	. D . V				
	Complete if the organization answere									
	Description of property	(a) Cost or o		(b) Cost			ccumulate		(d) Book	value
<del></del>	<del> </del>	basis (investi	nent)	basis	(other)	de	preciation			
	Land						. 4	<u> </u>		
	Buildings									
	Leasehold improvements							لــ		
	Equipment			26	8,248.		250,4	28.	17	,820.
_	Other									
Tota	. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	X, colun	nn (B), line 1	0c)			<b>&gt;</b>	17	,820.

LABOR-MANAGEMENT POLICY COMMITTEE

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or	end-of-year market value
(1) Financial derivatives			<del></del>
(2) Closely-held equity interests			
(3) Other			
(A)	··-		
(B)			
(C)	- <u></u>		
(D)			
(E) (F)			
(G)			<del> </del>
(H)			<del></del>
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		1	<b>₹</b> ♦
Part VIII Investments - Program Related.	1		· · · · · · · · · · · · · · · · · · ·
Complete if the organization answered "Yes"	on Form 990. Part IV	line 11c See Form 990. Part X. line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation. Cost or	end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			<u>.</u>
(8)			· · · · · · · · · · · · · · · · · · ·
(9)			<del></del>
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 000 Dort IV	line 11d Coe Form 000 Best V line 15	
	Description	, line 11d See Form 990, Fart X, line 15	(b) Book value
(1)		<del></del>	(b) Book value
(2)			
(3)			
(4)			***
(5)			
(6)			
(7)			
(8)			
(9)		-	
Total. (Column (b) must equal Form 990, Part X, col (B) lin	e 15)		<u> </u>
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV		
1. (a) Description of liability		(b) Book value	, <b>,</b> , , , , , , , , , , , , , , , , ,
(1) Federal income taxes			
(2)			
(3)			
(4)	<del>-</del>		
(5)	<del></del>		**,
(6) (7)			(1) (1)
(8)	<del>-</del>		, *
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) lin	e 25)		
Liability for uncertain tax positions. In Part XIII, provide		ote to the organization's financial stateme	nts that reports the

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

LABOR-MANAGEMENT POLICY COMMITTEE Schedule D (Form 990) 2015

רנא ון Reconciliation of Revenue per Audited Financial Statem	ents With I	Revenue per Ro	eturn	-
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	<u> </u>			
Total revenue, gains, and other support per audited financial statements		-	1	2,959,801.
Amounts included on line 1 but not on Form 990, Part VIII, line 12				
Net unrealized gains (losses) on investments	2a		- [	
Donated services and use of facilities	2b		- 1	
Recoveries of prior year grants	2c		.	
Other (Describe in Part XIII )	2d		<u></u>	
Add lines 2a through 2d			2e	0.
Subtract line 2e from line 1			3	2,959,801.
Amounts included on Form 990, Part VIII, line 12, but not on line 1.			36.39% 36.39%	
Investment expenses not included on Form 990, Part VIII, line 7b	4a		* 1	
Other (Describe in Part XIII.)	4b		·	
Add lines 4a and 4b		- <u>-</u>	4c	0.
Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	2,959,801.
rtXII Reconciliation of Expenses per Audited Financial Staten	nents With	Expenses per	Retu	rn.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	١.			
Total expenses and losses per audited financial statements			1	2,410,378.
Amounts included on line 1 but not on Form 990, Part IX, line 25				
Donated services and use of facilities	2a			
Prior year adjustments	2b			
Other losses	2c			
Other (Describe in Part XIII.)	2d			
Add lines 2a through 2d			2e	0.
Subtract line 2e from line 1			3	2,410,378.
Amounts included on Form 990, Part IX, line 25, but not on line 1				
Investment expenses not included on Form 990, Part VIII, line 7b	4a		j	
Other (Describe in Part XIII )	4b		~ ~	
Add lines 4a and 4b			4c	0.
Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	2,410,378.
rt XIII  Supplemental Information.	-			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a  Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12  Net unrealized gains (losses) on investments Donated services and use of facilities Recoveries of prior year grants Other (Describe in Part XIII )  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part VIII, line 12, but not on line 1.  Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)  Add lines 4a and 4b  Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  TIXII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a  Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1  Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)  Add lines 4a and 4b	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a  Total revenue, gains, and other support per audited financial statements  Amounts included on line 1 but not on Form 990, Part VIII, line 12  Net unrealized gains (losses) on investments  Donated services and use of facilities  Recoveries of prior year grants  Other (Describe in Part XIII)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part VIII, line 12, but not on line 1.  Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIII.)  Add lines 4a and 4b  Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  TixIII Reconciliation of Expenses per Audited Financial Statements With  Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  2a  Prior year adjustments  Other (Describe in Part XIII.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1  Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIII.)  Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a  Total revenue, gains, and other support per audited financial statements  Amounts included on line 1 but not on Form 990, Part VIII, line 12  Net unrealized gains (losses) on investments  Donated services and use of facilities  Eccoveries of prior year grants  Other (Describe in Part XIII )  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part VIII, line 12, but not on line 1.  Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIII.)  Add lines 4a and 4b  Total revenue Add lines 3 and 4c. (This must equal Form 990, Part II, line 12)  Total expenses and losses per audited financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other losses  2a  Other (Describe in Part XIII.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1  Investment expenses not included on Form 990, Part VIII, line 7b  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1  Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIII.)  Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	Total revenue, gains, and other support per audited financial statements  Amounts included on line 1 but not on Form 990, Part VIII, line 12  Net unrealized gains (losses) on investments  Donated services and use of facilities  2b  Cher (Describe in Part XIII)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part VIII, line 12, but not on line 1.  Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIII.)  Add lines 4a and 4b  Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  Total expenses and losses per audited financial Statements With Expenses per Reture Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  Total expenses and losses per audited financial statements  1 Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other (Describe in Part XIII.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1  Investment expenses not included on Form 990, Part IV, line 12  Total expenses and losses per audited financial statements  1 Amounts included on Form 990, Part IX, line 25, but not on line 1  Investment expenses not included on Form 990, Part IV, line 10  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1  Investment expenses not included on Form 990, Part IV, line 7b  Other (Describe in Part XIII.)  Add lines 4a and 4b  Other (Describe in Part XIII.)

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information.

### PART X, LINE 2:

THE COMMITTEE ACCOUNTS FOR INCOME TAXES IN ACCORDANCE WITH THE ACCOUNTING STANDARDS CODIFICATION (ASC) TOPIC INCOME TAXES. THESE PROVISIONS PROVIDE CONSISTENT GUIDANCE FOR THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND PRESCRIBE A THRESHOLD OF "MORE LIKELY THAN NOT" FOR RECOGNITION AND DERECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE COMMITTEE PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE AN EFFECT ON ITS TAX-EXEMPT STATUS. AS OF DECEMBER 31, 2015, THE STATUTE OF LIMITATIONS FOR FISCAL YEARS 2012 THROUGH 2014 REMAINS OPEN WITH THE U.S.

# NATIONAL MAINTENANCE AGREEMENT LABOR-MANAGEMENT POLICY COMMITTEE 52-1289622 Page 5 Schedule D (Form 990) 2015 Part XIII Supplemental Information (continued) FEDERAL JURISDICTION. IT IS THE COMMITTEE'S POLICY TO RECOGNIZE INTEREST AND/OR PENALTIES RELATED TO UNCERTAIN TAX POSITIONS, IF ANY, IN UNRELATED BUSINESS INCOME TAX EXPENSE.

### **SCHEDULE J** (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

### 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.

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

Inspection -Employer identification number

OMB No 1545-0047

Open to Public

LABOR-MANAGEMENT POLICY COMMITTEE Part I Questions Regarding Compensation

Yes No ta Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence X Health or social club dues or initiation fees Tax indemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, X trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract X Compensation survey or study Independent compensation consultant X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? 4a b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of. a The organization? 5a 5b b Any related organization? If "Yes" to line 5a or 5b, describe in Part III 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of a The organization? 6a b Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J (Form 990) 2015

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52-1289622

NATIONAL MAINTENANCE AGREEMENT

Page 2

LABOR-MANAGEMENT POLICY COMMITTEE

Schedule J (Form 990) 2015

52-1289622

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

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	otner deferred compensation	Denemis	(a)-(i)(a)	in column (b) reported as deferred on prior Form 990
(1) STEPHEN R LINDAUER	Ξ	183,88	0	0	21,438.	12,241.	217,563.	0
IMPARTIAL SECRETARY	(ii)	0	0	0.	0	0.	0	0.
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# NATIONAL MAINTENANCE AGREEMENT LABOR-MANAGEMENT POLICY COMMITTEE

52-1289622

Page 3

Schedule J (Form 990) 2015

Part III | Supplemental Information

Schedule J (Form 990) 2015	
STEVE LINDAUER.	STEVE L
CLUB DUES IN THE AMOUNT OF \$125 PER MONTH ARE PAID ON BEHALF OF	неастн
, LINE 1A:	PART I,
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	Provide the ini

### SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

2015
Open to Public Inspection

OMB No 1545-0047

Name of the organization

NATIONAL MAINTENANCE AGREEMENT LABOR-MANAGEMENT POLICY COMMITTEE

Employer identification number 52-1289622

FORM 990, PART VI, SECTION A, LINE 6:

THE ORGANIZATION HAS MEMBERS. MEMBERSHIP IN THE CORPORATION CONSISTS OF

ONE REGULAR MEMBER AND ONE ALTERNATE MEMBER FROM EACH INTERNATIONAL UNION

AND A LIKE NUMBER OF MEMBERS FROM EMPLOYERS SIGNATORY TO THE NATIONAL

MAINTENANCE AGREEMENTS.

FORM 990, PART VI, SECTION A, LINE 7A:

THE INTERNATIONAL UNION MEMBERS SHALL ELECT AN INTERNATIONAL UNION MEMBER

TO BE LABOR CO-CHAIRMAN AND A MEMBER OF THE BOARD OF DIRECTORS. THE LABOR

CO-CHAIRMAN SHALL APPOINT FOUR OTHER INTERNATIONAL UNION MEMBERS TO SERVE

AS MEMBERS OF THE BOARD OF DIRECTORS.

THE EMPLOYER MEMBERS SHALL ELECT AN EMPLOYER MEMBER TO BE THE EMPLOYER

CO-CHAIRMAN AND A MEMBER OF THE BOARD OF DIRECTORS. THE EMPLOYER

CO-CHAIRMAN SHALL APPOINT FOUR OTHER EMPLOYER MEMBERS TO SERVE AS MEMBERS

OF THE BOARD OF DIRECTORS.

THE ELEVENTH MEMBER OF THE BOARD OF DIRECTORS SHALL BE THE IMPARTIAL SECRETARY.

FORM 990, PART VI, SECTION B, LINE 11:

EACH BOARD MEMBER RECIEVES A COPY OF THE RETURN. ANY QUESTIONS AND CONCERNS ARE SUBSEQUENTLY ADDRESSED BY THE CPA PRIOR TO FILING A FINAL RETURN.

FORM 990, PART VI, SECTION B, LINE 12C:

COPY OF POLICY IS PROVIDED TO EACH OFFICER, BOARD MEMBER, AND ALL EMPLOYEES

ANNUALLY. POLICY MANDATES THAT ANY CONFLICT BE REPORTED TO THE BOARD. ANY

CONFLICT OF INTEREST BROUGHT TO THE ATTENTION OF THE BOARD IS REVIEWED AND

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2015)

Name of the organization NATIONAL MAINTENANCE AGREEMENT
LABOR-MANAGEMENT POLICY COMMITTEE

Employer identification number 52-1289622

APPROPRIATE ACTION TAKEN.

FORM 990, PART VI, SECTION B, LINE 15:

CURRENT SALARY SURVEY INFORMATION ON CEO AND OTHER STAFF POSITIONS IS

GATHERED USING APPROPRIATE CRITERIA SUCH AS LOCATION, ASSOCIATION TYPE,

SIZE, ETC. COMPILED INFORMATION IS PROVIDED TO THE BOARD OF DIRECTORS FOR

THEIR REVIEW PRIOR TO DETERMINING APPROPRIATE SALARY CHANGES FOR THE CEO.

SURVEY INFORMATION IS PROVIDED TO THE CEO TO BE USED IN CONJUNCTION WITH

PERFORMANCE APPRAISALS TO DETERMINE APPROPRIATE SALARY CHANGES FOR THE

REMAINDER OF STAFF.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.

FORM 990, PART XI, LINE 2C

THE BYLAWS MANDATE THAT AN AUDIT OF THE CORPORATION'S ACCOUNTS AND

FUNDS SHALL BE MADE BY A CERTIFIED PUBLIC ACCOUNTANT AT LEAST ONCE

ANNUALLY. WITH THE APPROVAL OF THE BOARD OF DIRECTORS, THE IMPARTIAL

SECRETARY IS RESPONSIBLE FOR EMPLOYING OR RETAINING SUCH PERSONS,

INCLUDING ATTORNEYS, ACCOUNTANT, AND PUBLIC RELATIONS PERSONNEL, AS HE

DEEMS NECESSARY TO CARRY ON THE FUNCTIONS OF THE NMAPC.

FORM 990, PART I & III, LINE 1

THE NATIONAL MAINTENANCE AGREEMENTS POLICY COMMITTEE NEGOTIATES AND

ADMINISTERS THE NATIONAL MAINTENANCE AGREEMENTS, A SERIES OF COLLECTIVE

BARGAINING AGREEMENTS UTILIZED BY MORE THAN 2,000 INDUSTRIAL

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Name of the organization NATIONAL MAINTENANCE AGREEMENT LABOR-MANAGEMENT POLICY COMMITTEE	Employer identification number 52-1289622						
CONTRACTORS WHO EMPLOY MEMBERS OF FOURTEEN BUILDING TRADE	S						
INTERNATIONAL UNIONS. ALTHOUGH THERE ARE 14 SEPARATE AGREEMENTS, THEY							
ARE 99% SIMILAR. THE AGREEMENTS PROVIDE A COST-EFFECTIVE	VEHICLE FOR						
CONTRACTORS AND SKILLED BUILDING TRADES WORKERS TO PERFOR	М						
CONSTRUCTION, MAINTENANCE AND REPAIR WORK FOR THE COUNTRY	'S INDUSTRIAL						
AND MANUFACTURING BASE.							