

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



Change of Accounting Period

EXTENDED TO FEBRUARY 15,2017

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A F	or the	e 2015 calendar year, or tax year beginning $$	nd ending	MAR 3	31, 2016	
В	heck if	C Name of organization		D Em	ployer identific	ation number
a 		UNITED BROTHERHOOD OF CARPENTERS &				
	Addre:	• JOINERS OF AMERICA SW REGIONAL COUNC	:IL			
	Name	Doing business as			95-1	318135
Ļ	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/si	ute E Tele	ephone number	
_	Final return/ termin		501		213-	385-1457
_	ated Amend	City or town, state or province, country, and ZIP or foreign postal code			ss receipts \$	111,949,282.
<u> </u>	return	LOS ANGELES, CA 900/1-1/12	,	_	s this a group re	
L	tion pendir	F Name and address of principal officer ROBERT F. NEWRIKE			or subordinates	
		SAME AS C ABOVE	(4)		re all subordinates in	
		empt status 501(c)(3)X 501(c)(5) ◀ (insert no.) 4947(a)(te: ▶ WWW • SWCARPENTERS • ORG	(1) or			list (see instructions)
		organization: Corporation Trust X Association Other			Group exemption	State of legal domicile CA
	art I	Summary		cai ui iuilia	uon. TOOTIN	State of legal doffliche C21
····		Briefly describe the organization's mission or most significant activities A L	ABOR	ORGANI	ZATION	FOR THE
Activities & Governance	١.	BETTERMENT AND ADVANCEMENT OF ITS MEMBE	RS.			
rnai	1	Check this box If the organization discontinued its operations or dis		ore than 2	5% of its net as	sets.
Ne.		Number of voting members of the governing body (Part VI, line 1a)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		3	0
Ğ		Number of independent voting members of the governing body (Part VI, line 1	b)		4	0
es &	1	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	•		5	1729
V.	6	Total number of volunteers (estimate if necessary)			6	0
\cti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			7a	0.
_	b	Net unrelated business taxable income from Form 990-T, line 34			7b	0.
				Pric	or Year	Current Year
ē	8	Contributions and grants (Part VIII, line 1h)		54	0.	0.
ēn	9	Program service revenue (Part VIII, line 2g)			352,066.	47,150,308.
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)			392,236.	-1,808,452.
_		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			137,378.	1,743,180.
	 	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12	2)	01,1	181,680. 0.	47,085,036.
	I	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0.	0.
	1	Benefits paid to or for members (Part IX, column (A), line 4)	10)	17 (007,525.	14,762,435.
ses	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-1	10)	1,,	0.	0.
Expenses	1	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)	0.			
X	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		37.9	986,577.	26,004,508.
	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)			994,102.	40,766,943.
	1	Revenue less expenses Subtract line 18 from line 12			187,578.	6,318,093.
or			R		of Gurrent Year	End of Year
sets	20	Total assets (Part X, line 16)	·	244,	349,698.	250,058,946.
ASS	21	Total liabilities (Part X, line 26)	OO FE	1)	397,223.	5,966,364.
Net Assets Fund Baland	22	Net assets or fund balances Subtract line 21 from line 20		237,9	952,475.	244,092,582.
Pa	art II			GDEN.	UT	
		alties of perjury, I declare that I have examined this return, including accompanying sched				y knowledge and belief, it is
true	, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information o	f which prep	arer has any		
		Plul Newberk			2/6/2017 Data	
Sig	n	Signe Aug of the er			Date	
Hei	re	ROBERT P. NEWKIRK, SUPERVISOR Type or print name and title				
_				T Date	Chash	PTIN
Da!	_	PrintType preparer's name RICHARD THIERMANN Preparer's signature RICHARD THIERMANN PrintType preparer's signature Preparer's signature		2/6/20)17 Check L	m00074304
Pai		The court of the c		Ш	self-employ	52-2385296
	parer Only		300		Firm's EIN	J2 2303270
U36	Only	ORANGE, CA 92868	, , ,		Phone no 71	4-257-0100
Mar	v the !!	RS discuss this return with the preparer shown above? (see instructions)	·····		Ti none no. / I	X Yes No
	001 12-		ictions.			Form 990 (2015)

Form 990 (2015)

JOINERS OF AMERICA SW REGIONAL COUNCIL 95-1318135 Part III | Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: A LABOR ORGANIZATION FOR BETTERMENT AND ADVANCEMENT OF ITS MEMBERS. Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported) (Expenses \$ including grants of \$ ORGANIZED ALL WORKERS IN THE CARPENTRY INDUSTRY FOR THEIR MORAL, ECONOMIC AND SOCIAL ADVANCEMENT. TO THAT END, THE OFFICERS AND BUSINESS AGENTS OF THE COUNCIL COLLECTIVELY BARGAINED WITH EMPLOYERS ON BEHALF OF THE COUNCIL'S MEMBERS. ______ including grants of \$ ______) (Revenue \$ _____) (Expenses \$ 4d Other program services (Describe in Schedule O)) (Revenue \$ (Expenses \$ including grants of \$ Total program service expenses Form 990 (2015) 532002 12-16-15

UNITED BROTHERHOOD OF CARPENTERS &

JOINERS OF AMERICA SW REGIONAL COUNCIL 95-1318135 Page 3 Form 990 (2015) JOINERS OF A
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	х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5	ĺ	Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	ļ	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	l]	
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		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		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable		ĺ	İ
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	x	
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		х
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	-	х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	ĺ
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	1	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b				
	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		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any]
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	 	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
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		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		х
		Earn	990	(2015

Form 990 (2015) JOINERS OF AMERICA
Part IV Checklist of Required Schedules (continued) JOINERS OF AMERICA SW REGIONAL COUNCIL 95-1318135 Page 4

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	,		
	Schedule K If "No", go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	j		1
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
þ	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			1
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	ŀ		}
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	00		X
07	complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			 -
	instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	<u> </u>	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			ļ
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31	<u> </u>	_X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	20		х
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	l	x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			╁╧
•	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	L.	L
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u>L</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197			}
	Note. All Form 990 filers are required to complete Schedule O	38	X	L
		Form	990	(2015)

	UNITED BROTHERHOOD OF CARPENTERS &			
	990 (2015) JOINERS OF AMERICA SW REGIONAL COUNCIL 95-1318:	L35	Pa	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	İ		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		ļ	
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 1729		1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	ĺ		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3ь		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
ь	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	- (
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			}
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			}
	were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			}
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			ļ
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 <u>e</u>		ļ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 <u>f</u>		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	<u></u>	L
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			ł
	sponsoring organization have excess business holdings at any time during the year?	8_		
9	Sponsoring organizations maintaining donor advised funds.	!		l
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			ł
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			1
	amounts due or received from them.)			1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		—-
þ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			↓
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		└
	Note, See the instructions for additional information the organization must report on Schedule O.		J	J

532005 12-16-15

b Enter the amount of reserves the organization is required to maintain by the states in which the

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

organization is licensed to issue qualified health plans

c Enter the amount of reserves on hand

13b

13c

X

Form 990 (2015)

14a

Form 990 (2015) JOINERS OF AMERICA SW REGIONAL COUNCIL

95-1318135

Page 6

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

	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			
	If there are material differences in voting rights among members of the governing body, or if the governing	1 1		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		- 1	
ь	Enter the number of voting members included in line 1a, above, who are independent 1b 0			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		.]	
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	_5		X
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
ь	Each committee with authority to act on behalf of the governing body?	8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9_		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
		-	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			1
а	The organization's CEO, Executive Director, or top management official	15a	ŀ	Х
ь	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	j	}	Į
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	ĺ	ĺ	ĺ
	exempt status with respect to such arrangements?	16b	}	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	ole .	
	for public inspection Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d fınan	cial	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	LORI ZISKA - (702)667-2246			
	533 SOUTH FREMONT AVENUE, LOS ANGELES, CA 90071-1712		_	_
53200	6 12-16-15	Forn	1990	(2015)

JOINERS OF AMERICA SW REGIONAL COUNCIL

95-1318135

Part VIII 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

X

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

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

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

Check this box if neither the organiz		orga I	anıza			nper	nsat			(E)
(A)	(B)	ł)) Pos	C) ition	ı		(D)	(E)	(F)
Name and Title	Average hours per	(do	not c	heck	more	than o	one h an	Reportable compensation	Reportable compensation	Estimated amount of
	week	offi	cer an	d a d	recto	r/trus	tee)	from	from related	other
	(list any	į						the	organizations	compensation
	hours for	a a a	ļ	ļ.,		pa:		organization	(W-2/1099-MISC)	from the
	related	stee o	ustee			eusa		(W-2/1099-MISC)		organization
	organizations	a ti	nal t		lg ge	S S		<u> </u>		and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key emplayee	Highest compensated employee	Former			organizations
(1) DANIEL CURTIN	40.00	Ē	=	5	1 2	로 등	윤			
BUSINESS REPRESENTATIVE	20.00	1	•			x		170,474.	0.	58,448.
(2) JOHN HANNA	40.00	\vdash	<u> </u>				\vdash			
BUSINESS REPRESENTATIVE		1				х		213,725.	0.	67,001.
(3) PATRICK MCGINN	40.00									
BUSINESS REPRESENTATIVE		<u> </u>				X		183,355.	0.	60,738.
(4) JAMES SALA	40.00	1	}]				4.60 -00		
BUSINESS REPRESENTATIVE	40.00	<u> </u>	<u> </u>	_		X	 	168,500.	0.	57,549.
(5) RANDY THORNHILL	40.00	-	ļ)	x		105 720	0.	63,164.
BUSINESS REPRESENTATIVE		-	┝		⊢	^	├	195,738.	0.	03,104.
		┨	ļ	}	ļ]		
	-	╁╌	┢╌	-	 	┢	-			
		1	Ì		ļ]]			
		1	T							
		1_								
]				ļ				
		 		▙	_	╙		ļ	ļ	
		4		}						
		╀─	├	⊬	-	├-	-	ļ		
		┨		1		l				
		✝	 			-	 	<u> </u>		
		1		}			1			
		1	\vdash	\Box						
		1_	<u> </u>				<u>_</u>		<u> </u>	
		Γ					}			
		ــــــــــــــــــــــــــــــــــــــ	<u> </u>	<u> </u>		<u> </u>	<u> </u>	<u> </u>	ļ	
	<u> </u>	┨		{				1	{	
		╀-	\vdash	\vdash	-	\vdash	-			 -
	 	+		Ì		1		}	1	
		\vdash	一	┢╌	\vdash	\vdash	-	 	 	
		1	1	ì	1	1	Ì	1	1	
		٠	Щ.		_	Ь.	٠			

Form 990 (2015)

Form 990 (2015)

Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees	, and	d Hi	ghe	st C	ompensated Employee	es (continued)			
	(A)	(B)			(0)			(D)	(E)		(F)	
	Name and title	Average hours per week	box	not cl	ss pe	more rson	than s bot or/trus	h an	Reportable compensation from	Reportable compensation from related	an	timate nount o other	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	com fr org and	pensar om the anizati d relate anizatio	e on ed
						}	_					- .	
			-	-				-					
				_		-		-		· <u>-</u>	-	_	
								-					
											-		
													
	Sub-total								931,792.	0.	30	6,9	
	Total from continuation sheets to Part V	II, Section A							931,792.	0.	3.0	6,9	0.
2	Total (add lines 1b and 1c) Total number of individuals (including but n	not limited to th	ose	liste	ed al	bov	e) wl	no r				0,5	5
	compensation from the organization				_							Yes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s	· · · · · · · · · · · · · · · · · · ·	ıste	e, ke	ey er	nplo	oyee	, or	highest compensated e	mployee on	3		х
4	For any individual listed on line 1a, is the su	um of reportab		•					•	the organization	4	x	

and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
BRADY SOCAL INC.		
1010 NORTH OLIVE, ANAHEIM, CA 92801	CONSTRUCTION	3,012,625.
THE CALVERT COMPANY INC		
735 W TAFT AVENUE, ORANGE, CA 92865	PROMOTION	495,228.
MKB CONSTRUCTION INC.		
450 E WATKINS, PHOENIX, AZ 85004	CONSTRUCTION	490,814.
KHS & S CONTRACTORS INC., 5109 EAST LA PALMA AVENUE, #A, ANAHEIM, CA 92807	CONSTRUCTION	446,000.
SUTHERLAND GLOBAL SERVICES INC., 1160	,	
PITTSFORD-VICTOR ROAD, PITTSFORD, NY 14534	ACCOUNTING SERVICES	420,336.
 Total number of independent contractors (including but not limited to those lister \$100,000 of compensation from the organization \$\infty\$ 	ed above) who received more than	

Form 990 (2015)

95~1318135 JOINERS OF AMERICA SW REGIONAL COUNCIL

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (**D**) Revenue excluded from tax under Unrelated Total revenue Related or exempt function business revenue revenue Grants 1 a Federated campaigns , Gifts, Grant illar Amount 1b b Membership dues 1c c Fundraising events d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f Business Code 2 a MEMBER DUES 900099 42,045,903. 42,045,903 Program Service Revenue RENT REVENUE 900099 5,104,405 5,104,405 All other program service revenue 47,150,308. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 1,598,402 1,598,402. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other 50,883,766. 10,573,626. assets other than inventory b Less. cost or other basis 51,425,192. 13,439,054 and sales expenses -541,426. -2,865,428. c Gain or (loss) -3,406,854 -3,406,854. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 900099 907,156 SETTLEMENT INCOME 907,156 836,024 900099 836,024 REIMBURSEMENT INCOME d All other revenue 1,743,180 Total. Add lines 11a-11d 47,085,036. -1,808,452. 48,893,488, Total revenue. See instructions. 12

532009 12-16-15

Page 9

Form 990 (2015)

UNITED BROTHERHOOD OF CARPENTERS &

95-1318135 Page 10 JOINERS OF AMERICA SW REGIONAL COUNCIL

Part IX | Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (A) (B) Do not include amounts reported on lines 6b, Fundraising Total expenses Program service Managèment and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 10,019,788. Other salaries and wages Pension plan accruals and contributions (include 2,316,309 section 401(k) and 403(b) employer contributions) 1,430,033. Other employee benefits 996,305. 10 Payroll taxes Fees for services (non-employees) a Management 1,475,549. **b** Legal 586,208. c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 129,026. f Investment management fees q Other, (If line 11g amount exceeds 10% of line 25, 89,934. column (A) amount, list line 11g expenses on Sch O.) 569,495. 12 Advertising and promotion 976,484. 13 Office expenses 53,394. 14 information technology 15 Royalties 4,426,122. 16 Occupancy 1,448,592. 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 2,004,472. 19 Conferences, conventions, and meetings 20 10,231,535. 21 Payments to affiliates 3,391,149. 22 Depreciation, depletion, and amortization 437,631. 23 Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e, If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 135,242. SETTLEMENT EXPENSE 49,675. CONTRIBUTIONS AND GRANT C ď e All other expenses 40,766,943. Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ______ if following SOP 98-2 (ASC 958-720)

532010 12-16-15

UNITED BROTHERHOOD OF CARPENTERS & JOINERS OF AMERICA SW REGIONAL COUNCIL 95-1318135 Page 11

Par	tΧ	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	18,443,151.	1	20,260,044.
	2	Savings and temporary cash investments	103,269.	2	103,269.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete		ļ	
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
S		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net	506,154.	7	354,670.
Ř	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 159,059,303.	141,621,488.		
	ь	Less accumulated depreciation 10b 33,697,144.	141,621,488.	10c	125,362,159.
	11	Investments - publicly traded securities	76,987,534.	11	97,729,134.
	12	Investments - other securities See Part IV, line 11	287,880.	12	287,880.
	13	Investments · program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	6,400,222.	15	5,961,790.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	244,349,698.	16	250,058,946.
	17	Accounts payable and accrued expenses	<u> </u>	17	
	18	Grants payable	<u> </u>	18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D	· · · · · · · · · · · · · · · · · · ·	21	
es	22	Loans and other payables to current and former officers, directors, trustees,			
Ħ		key employees, highest compensated employees, and disqualified persons			
Liabilities		Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X of	6,397,223.	25	5,966,364.
		Schedule D	6,397,223.	26	5,966,364.
_	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and	0,337,2231	20	3/300/3021
	1				
ĕ	07	complete lines 27 through 29, and lines 33 and 34.	237,952,475.	27	244,092,582.
<u>la</u>	27	Unrestricted net assets Temporarily restricted net assets	2011202121	28	
å	28	Permanently restricted net assets		29	
Ē	29	Organizations that do not follow SFAS 117 (ASC 958), check here		<u> </u>	
Ē		and complete lines 30 through 34.		ļ	
S.	20	•		30	
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund		31	
t As	31	Retained earnings, endowment, accumulated income, or other funds		32	
Se	32	Total net assets or fund balances	237,952,475.	33	244,092,582.
	34	Total liabilities and net assets/fund balances	244,349,698.		250,058,946.
_	J-4	Total natinues and net assets/fully paidiffes	, =, ,		Form 990 (2015

Form **990** (2015)

UNITED BROTHERHOOD OF CARPENTERS & 95-1318135 Page **12** Form 990 (2015) JOINERS OF AMERICA SW REGIONAL COUNCIL Part XI Reconciliation of Net Assets X Check if Schedule O contains a response or note to any line in this Part XI 47,085,036. Total revenue (must equal Part VIII, column (A), line 12) 1 40,766,943. 2 2 Total expenses (must equal Part IX, column (A), line 25) 6,318,093. Revenue less expenses Subtract line 2 from line 1 3 237,952,475. Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 -296,409. Net unrealized gains (losses) on investments 5 Donated services and use of facilities 6 Investment expenses 7 Prior period adjustments 8 118,423. Other changes in net assets or fund balances (explain in Schedule O) 9 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, 244,092,582. 10 Part XII Financial Statements and Reporting $[\mathbf{X}]$ Check if Schedule O contains a response or note to any line in this Part XII Yes No Accounting method used to prepare the Form 990 Cash Cash Other MODIFIED CASH If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. X 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Consolidated basis Separate basis Both consolidated and separate basis Х b Were the organization's financial statements audited by an independent accountant? 2b If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Both consolidated and separate basis X Separate basis Consolidated basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, Х review, or compilation of its financial statements and selection of an independent accountant? 2c

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

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

Form 990 (2015)

За

X

Act and OMB Circular A-133?

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

_ ● Section 501(c)(4), (5), or (6) organiza	tions Complete Part III			
Name of organization UNITED	BROTHERHOOD OF CA	RPENTERS &	Emple	oyer identification number
	OF AMERICA SW RE			95-1318135
Part I-A Complete if the org	ganization is exempt unde	r section 501(c) o	r is a section 527 o	rganization.
 Provide a description of the organiz Political expenditures Volunteer hours 	zation's direct and indirect political	campaign activities in		0.
Part I-B Complete if the org	anization is exempt unde	r section 501(c)(3		
1 Enter the amount of any excise tax	incurred by the organization unde	r section 4955	▶\$	
2 Enter the amount of any excise tax	incurred by organization managers	s under section 4955	▶\$	
3 If the organization incurred a section	n 4955 tax, did it file Form 4720 fo	or this year?		Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV				
Part I-C Complete if the org	janization is exempt unde	r section 501(c), (
 Enter the amount directly expended 	d by the filing organization for sect	ion 527 exempt function	on activities > \$	
2 Enter the amount of the filing organ	ization's funds contributed to othe	er organizations for sec		
exempt function activities			▶\$	
3 Total exempt function expenditures	s Add lines 1 and 2 Enter here and	d on Form 1120-POL,	_	
line 17b			▶\$	Yes No
4 Did the filing organization file Form	•			
5 Enter the names, addresses and er made payments For each organiza contributions received that were pr political action committee (PAC) If	ation listed, enter the amount paid comptly and directly delivered to a	from the filing organiza separate political orgai	ition's funds Also enter th nization, such as a separa	e amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
			filing organization's funds If none, enter -0	contributions received and promptly and directly delivered to a separate political organization If none, enter -0
	LOS ANGELES, CA			
COUNCIL OF CARPE	90071	95-4468779	0.	364,038.
T				ļ
				•

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

Schedule C (Form 990 or 990-EZ) 2015

LHA 532041 10-05-15

SEE PART IV FOR CONTINUATION

Schedule C (Form 990 or 990-EZ) 2015 JOJ Part II-A Complete if the organiz section 501(h)).	NERS OF zation is exe	AMERICA SW mpt under section	REGIONAL COU on 501(c)(3) and file	NCIL 95- ed Form 5768 (1318135 Page 2 election under
A Check ► ☐ if the filing organization t	pelongs to an aff	iliated group (and list i	n Part IV each affiliated	group member's na	me, address, EIN,
expenses, and share of				5 1	
B Check ► ☐ if the filing organization of	hecked box A a	nd "limited control" pr	ovisions apply		
Limits on (The term "expenditure	Lobbying Expe)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence	e public opinion	(grass roots lobbying)	·		
b Total lobbying expenditures to influence	•		F		
c Total lobbying expenditures (add lines	-	-, (,9,	Ţ		
d Other exempt purpose expenditures				 	
e Total exempt purpose expenditures (ad	d lines 1c and 1	d)	<u> </u>		
f Lobbying nontaxable amount Enter the			th columns		
If the amount on line 1e, column (a) or (b)		bying nontaxable arr			
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,000,000					
Over \$1,000,000 but not over \$1,500,000		00 plus 15% of the exc			
		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,000,		00 plus 5% of the exce	ess over \$ 1,500,000		
Over \$17,000,000	\$1,000	,000			
 g Grassroots nontaxable amount (enter 2 h Subtract line 1g from line 1a. If zero or le i Subtract line 1f from line 1c. If zero or le j If there is an amount other than zero or reporting section 4911 tax for this year 	ess, enter -0- ess, enter -0- either line 1h or				Yes No
(Some organizations that n	nade a section (eraging Period Under 501(h) election do not rate instructions for li	have to complete all o	of the five columns	below.
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2015

Schedule C (Form 990 or 990-EZ) 2015 JOINERS OF AMERICA SW REGIONAL COUNCIL 95-1318135 Page 3

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

or each "Yes," response on lines 1a through 11 below, provide in Part IV a detailed description	(a)		(b	<u>) </u>
the lobbying activity	Yes	No	,	Amo	unt
1 During the year, did the filing organization attempt to influence foreign, national, state or		<u> </u>			
local legislation, including any attempt to influence public opinion on a legislative matter		l			
or referendum, through the use of					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?		ļ <u>.</u>			
f Grants to other organizations for lobbying purposes?			\rightarrow		
g Direct contact with legislators, their staffs, government officials, or a legislative body?		ļ	.		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?		ļ	_		
j Total Add lines 1c through 1i					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	<u> </u>		\perp		
b If "Yes," enter the amount of any tax incurred under section 4912			L		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912		1			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		<u> </u>			
art III-A Complete if the organization is exempt under section 501(c)(4), sec	tion 501(c	:)(5), o	r se	ction	
501(c)(6).					
		_		Yes	No
Were substantially all (90% or more) dues received nondeductible by members?		L	1		
		⊢	2		-
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	tion 501(c)(5), o PR (b)	r se	ction	ne 3,
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), sec	tion 501(c ed "No," O	e)(5), o PR (b)	r se	ction III-A, lii	ne 3,
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members	ed "No," O	s)(5), o OR (b)	r sed Part	ction III-A, lii	ne 3,
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members	ed "No," O	e)(5), o PR (b)	r sed Part	ction III-A, lii	ne 3,
Did the organization agree to carry over lobbying and political expenditures from the prior year? Tart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures).	ed "No," O	PR (b)	r sed Part	ction III-A, lii	ne 3,
Did the organization agree to carry over lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pol expenses for which the section 527(f) tax was paid).	ed "No," O	PR (b)	r sec Part	ction III-A, lii	ne 3,
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid). a Current year	ed "No," O	PR (b)	r sec Part	ction III-A, lii	ne 3,
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexipenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total	ed "No," O	PR (b)	r sec Part	ction III-A, lii	ne 3,
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pol expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total	ed "No," O	PR (b)	3 r sec Part 1 2a 2b 2c	ction III-A, lii	ne 3,
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	ed "No," O	PR (b)	3 r sec Part 1 2a 2b 2c	ction III-A, lii	ne 3,
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditures (do not include amount on line 3).	ed "No," O	PR (b)	3 r sec Part 1 2a 2b 2c	ction III-A, lii	ne 3,
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues lif notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	ed "No," O	PR (b)	r sec Part 1 2a 2b 2c 3	ction III-A, lii	ne 3,
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year?	ed "No," O	PR (b)	r sec Part 1 2a 2b 2c 3	ction III-A, lii	ne 3,
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information	ed "No," O itical excess d political	PR (b)	3 r see Part 1 2a 2b 2c 3 4 5	III-A, liu	ne 3,
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues lif notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	ed "No," O itical excess d political	OR (b)	3 r see Part 1 2a 2b 2c 3 4 5	III-A, liu	ne 3,
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Tovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated great structions), and Part II-B, line 1. Also, complete this part for any additional information	ed "No," O itical excess d political oup list), Part	II-A, line	3 r sec Part 1 2a 2b 2c 3 4 5	III-A, liu	ne 3,
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information rovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grostructions), and Part II-B, line 1 Also, complete this part for any additional information ART I-A, LINE 1:	ed "No," O itical excess d political oup list), Part	II-A, line	3 r sec Part 1 2a 2b 2c 3 4 5	III-A, liu	ne 3,
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Tovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grostructions), and Part II-B, line 1 Also, complete this part for any additional information ART I-A, LINE 1: THE LOCAL SPONSORS PAC ACCOUNTS TO ACCEPT CONTRIBUTE	ed "No," O itical excess d political oup list), Part	II-A, line	3 r sec Part 1 2a 2b 2c 3 4 5	nd 2 (see	ne 3,
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grostructions), and Part II-B, line 1 Also, complete this part for any additional information ART I - A, LINE 1: THE LOCAL SPONSORS PAC ACCOUNTS TO ACCEPT CONTRIBUTION. OLITICAL EXPENDITURES, OR BOTH, TO INFLUENCE THE SE	ed "No," O itical excess d political oup list), Part	II-A, line	3 r sec Part 1 2a 2b 2c 3 4 5	nd 2 (see	ne 3,

Schedule C (Form 990 or 990-EZ) 2015

Schedu Part	ile C (IV]	Form Sup	990 or 9	90·EZ) 2 ntal in	015 form	JOINI ation	ERS C	OTHE F AM	ERHO ERI	CA SW	REGI	ONAL	COU	NCIL	95-	13181	35 Page 4
											/ADDR				ON:		
SOU	HWI	EST	REG	ONA:	L C	OUNC:	IL OF	CAR	RPEN	rers_	PAC						
533	s.	FR	EMON	r av	Ε.,	LOS	ANGE	ELES,	CA	9007	1						
																- .	
																	.
																<u></u>	
										<u>.</u>	_						
																<u> </u>	
					-												
			·	-						•					-		
				-		<u></u>		_									
																	
										·						-	
																-	
							-1-2										
							<u>. </u>	<u> </u>									,
	_										***						-
								<u> </u>						<u>.</u>			

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.

► Attach to Form 990.

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

2015
Open to Public Inspection

UNITED BROTHERHOOD OF CARPENTERS & Name of the organization Employer identification number JOINERS OF AMERICA SW REGIONAL COUNCIL 95-1318135 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds _ Yes . ∐ No are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure 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 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, 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 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 532051 11-02-15

Schedule D (Form 990) 2015

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

UNITED	BROTHERHOOD	OF	CARPENTERS	æ

_		OF AMERIC							<u>318135</u>	
Par	t III Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures,	or Oth	er Sim	<u>ilar Ass</u>	ets(continu	ıed)
3	Using the organization's acquisition, access	on, and other record	ls, chec	k any of the	following that	at are a s	ignificar	nt use of it	s collection	rtems
	(check all that apply)									
а	Public exhibition	d		Loan or exc	hange progr	ams				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how t	hey further t	he organızat	ion's exe	mpt pur	pose in Pa	art XIII	
5	During the year, did the organization solicit of	or receive donations	of art, h	istorical trea	sures, or oth	er sımıla	r assets			
	to be sold to raise funds rather than to be m	aintained as part of t	he orga	nization's co	ollection?				Yes	No_
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the	e organizatio	n answered	"Yes" or	Form 9	90, Part I\	/, line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21								
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for	contribution	ns or other as	sets no	t include	d		
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table:					_	
									Amount	
С	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 F	orm 990, Part X, line	21, for	escrow or co	ustodial acco	ount liab	lity?		Yes	No
b	If "Yes," explain the arrangement in Part XIII	Check here if the ex	kplanati	on has been	provided on	Part XII	ı			
Par									_	
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back	(d) Three	e years bac	k (e) Four	years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities							-		
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur	rent year end baland	e (line 1	g, column (a	a)) held as					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment >	%								
С	Temporarily restricted endowment ▶	— <u> </u>								
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.								
3a	Are there endowment funds not in the posse	ession of the organiz	ation th	at are held a	ind administe	ered for t	the orga	nization		
	by								Γ.	Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requi	red on S	Schedule R?					_3b	
_4	Describe in Part XIII the intended uses of the		wment	funds			_			
Par	t VI Land, Buildings, and Equipn	nent.								
	Complete if the organization answere	d "Yes" on Form 990	D, Part I	V, line 11a S	See Form 99	0, Part X	, line 10.			
	Description of property	(a) Cost or o		(b) Cost	or other		ccumula		(d) Book	value
		basis (investr	nent)		(other)	de	preciation			
1a	Land				3,121.				51,323	
b	Buildings			99,10	6,754.	27,	198,	372.	71,908	,382.
C	Leasehold improvements									
d	Equipment				1,828.		112,			820.
	Other				7,600.	<u>3,</u>	386 <u>,</u>			836.
Total	. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	X, colui	mn (B), line 1	10c)			<u> 1</u>	25,362	<u>,159.</u>

Schedule D (Form 990) 2015

•	UNITED BROT							
Schedule D (Form 990) 2015	JOINERS OF	AMERICA :	SW RE	GIONAL	COUNCIL	95-	1318135	Page 3
Part VII Investments - O								
	ization answered "Yes"						 	
(a) Description of security or categor	y (including name of security)	(b) Book va	llue	(c) Metho	od of valuation: C	cost or end-c	of-year market v	alue
(1) Financial derivatives				_	· · · · · · · · · · · · · · · · · · ·			
(2) Closely-held equity interests								
(3) Other								
(A)								
(B)		1						
(C)								
(D)								
<u>(E)</u>								
(F)	-							
(G)								
(H)	Part V and (P) line 12 \							
Total. (Col. (b) must equal Form 990, F		<u> </u>	.	<u> </u>				
	-	on Form 000 Da	et IV Juna	11a Cas Forn	n 000 Bart V lin	^ 12		
(a) Description of in	ization answered "Yes"	(b) Book va			od of valuation (of-vear market v	alue
(1)		()		(0)			,	
(2)							· · · · · · · · · · · · · · · · · · ·	
(3)								
(4)				l	*	-	<u>_</u>	
(5)								
(6)								
(7)								
(8)								
(9)								
Total. (Col. (b) must equal Form 990, F	Part X, col. (B) line 13.)							
Part IX Other Assets.						•		
Complete if the organ	nization answered "Yes"	on Form 990, Pa	art IV, line	11d. See Form	m 990, Part X, lın	e 15		
	(a)	Description					(b) Book va	lue
(1)								
(2)				į.				
(3)								
(4)								
(5)	· ·							
(6)								
(7)								
(8)								
(9)								
Total. (Column (b) must equal Fort		e 15)						
Part X Other Liabilities								
	nization answered "Yes"	on Form 990, Pa				rt X, line 25		
<u>"</u>	cription of liability			(b) Book valu	e			
(1) Federal income taxes	TTMTEC			55 4	7.0			
(2) PAYROLL LIABI		שדד.דשע		55,6 5,895,1				
CECUPTEL DEDO		TOTULI		15,5				
	DII			15,5	, , , , ,			
(5)								
(6)			1					

(7) (8)

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

5,966,364.

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. X.

Schedule D (Form 990) 2015

UNITED BROTHERHOOD OF CARPENTERS & 95-1318135 Page 4 JOINERS OF AMERICA SW REGIONAL COUNCIL Schedule D (Form 990) 2015 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a 46,659,601. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 -296,409 a Net unrealized gains (losses) on investments 2a b Donated services and use of facilities 2b c Recoveries of prior year grants 2c d Other (Describe in Part XIII) 2d -296,409. e Add lines 2a through 2d 46,956,010. Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1: 129,026. a Investment expenses not included on Form 990, Part VIII, line 7b 4h **b** Other (Describe in Part XIII) 129,026. c Add lines 4a and 4b ,085,036. Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a 40,637,917. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities 2a **b** Prior year adjustments 2b c Other losses 2c d Other (Describe in Part XIII) 2d e Add lines 2a through 2d 40,637,917. Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: 129,026 a Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b **b** Other (Describe in Part XIII) 129,026. c Add lines 4a and 4b 40,766,943. Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIII Supplemental Information. 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: MANAGEMENT OF THE COUNCIL HAS ANALYZED THE TAX POSITIONS TAKEN BY THE COUNCIL AND HAS CONCLUDED THAT, AS OF MARCH 31, 2016, THERE ARE NO UNCERTAIN POSITIONS TAKEN, OR EXPECTED TO BE TAKEN, THAT WOULD REQUIRE RECOGNITION OF A LIABILITY OR DISCLOSURE IN THE FINANCIAL STATEMENTS. COUNCIL IS SUBJECT TO ROUTINE AUDITS BY THE TAXING JURISDICTIONS; HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS. MANAGEMENT BELIEVES IT IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR THE FISCAL YEARS PRIOR TO 2013.

•		UNITED BROT	PHERHOOD	OF.	CARPENTERS &	
Schedule D	(Form 990) 2015	JOINERS OF ormation (continued)	AMERICA	SW	REGIONAL COUNCIL	95-1318135 Page
Part XIII	Supplemental Inf	ormation (continued)				
						
			-			
						<u></u>
						
						
						
						
	·					
		~				
						
						
						
						
	··-					· · · · · · · · · · · · · · · · · · ·
	·					
						
	·····					
						

532055 09-21-15

SCHEDULE J (Form 990)

Part I

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.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Information about Schedule J (Form 990) and its instructions is at www.lrs.gov/form990. UNITED BROTHERHOOD OF CARPENTERS &

Employer identification number JOINERS OF AMERICA SW REGIONAL COUNCIL 95-1318135 **Questions Regarding Compensation**

Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed 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 Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes 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 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee 4 During the year, did any person listed on Form 990, 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 b Any related organization? 5h 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 7 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 69 If "Yes," describe in Part III 7 8 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

Docu Sign Envelope ID D4BA156F-7110-481E-957A-8C69FEC8F593

95-1318135 UNITED BROTHERHOOD OF CARPENTERS & JOINERS OF AMERICA SW REGIONAL COUNCIL

Schedule J (Form 990) 2015

JOINERS OF AMERICA SW REGIONAL COUNCIL 95-1318135

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.

		the manufacture (a)	Contraction Coll 1000 to 20 to	octoo C	Doctoromont and	(A) Mostachia	(C) Total of column	(E) Composition
		(b) Dreamdowil of	W'z aliu/ur iubb-iviik	oc compensation	other deferred			in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation		(a) (a)(a)	reported as deferred on prior Form 990
(1) DANIEL CURTIN	©	170,474.	0	0	44,712.	13,736.	228,922.	0
BUSINESS REPRESENTATIVE	€	0	0	0	0	0	0	0.
(2) JOHN HANNA	ε	211,20		2,524.	53,265.	13,736.	280,72	
BUSINESS REPRESENTATIVE	€		0	0		0	0	
(3) PATRICK MCGINN	ε	182,02		1,330.	47,05	13,683.	244,093.	0
BUSINESS REPRESENTATIVE	≘			0		0	0	
(4) JAMES SALA	ε	167,970.		530	43,813.	13,736.	226,049.	
BUSINESS REPRESENTATIVE	(ii)							0.
(5) RANDY THORNHILL	(1)	193,104.		2,634.	43,428	13,736.	258,90	0
BUSINESS REPRESENTATIVE	(ii)	• 0	0	0.	• 0	0	0	0
	Θ							
!	€							
	Ξ							
	(ii)							
	(0)							
	⊞							
	(i)							
	(ii)							
	(1)							
	(ii)							
	Ξ							
	Ξ							ļ
	Ξ							
	(ii)							
	Ξ							
	(1)							
	Ξ							
	<u> </u>							
	Ξ							
	Ξ							
	ε							ļ
	₫							

Schedule J (Form 990) 2015

UNITED BROTHERHOOD OF CARPENTERS & JOINERS OF AMERICA SW REGIONAL COUNCIL Schedule J (Form 990) 2015

| Part III | Supplemental Information

)					
Scheduk	Schedule J (Form 990) 2015	JOINERS OF AMERIC	OF	AMERICA	SW	ICA SW REGIONAL COUNCIL	COO	NCIL 95-1318135	18135	Page 3
Part III	Part III Supplemental Information	_						į		
Provide	Provide the information, explanation, or descriptions required for Part I	or descriptions	require	d for Part I, line	s 1a, 1	b, 3, 4a, 4b, 4c, 5a	a, 5b, 6	11, 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.	additional information.	•

Schedule J (Form 990) 2015

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.

Open to Public Inspection

OMB No 1545-0047

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. UNITED BROTHERHOOD OF CARPENTERS & Name of the organization

JOINERS OF AMERICA SW REGIONAL COUNCIL

Employer identification number 95-1318135

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

THE EXECUTIVE SECRETARY-TREASURER, PRESIDENT, VICE PRESIDENT AND SEVEN EXECUTIVE COMMITTEE MEMBERS HAVE VOTING RIGHTS. IN ADDITION, THE MEMBER LOCALS ELECT MEMBERS TO SERVE AS DELEGATES TO THE COUNCIL TO REPRESENT THE DELEGATES ARE ELIGIBLE TO VOTE ON THEIR RESPECTIVE HOME LOCALS. COUNCIL MATTERS. EFFECTIVE JULY 19, 2013, THE COUNCIL WAS PLACED INTO TRUSTEESHIP AND A SUPERVISOR WAS DESIGNATED TO ATTEND TO THE AFFAIRS OF THE COUNCIL. AS A RESULT, ALL OFFICERS OF THE COUNCIL WERE RELINQUISHED OF THEIR POSITION. WHILE THE COUNCIL IS IN TRUSTEESHIP, ALL VOTING RIGHTS HAVE BEEN SUSPENDED, WITH FULL DECISION-MAKING AUTHORITY BEING EXERCISED BY THE DESIGNATED SUPERVISOR.

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

IN ACCORDANCE WITH THE ORGANIZATION'S BYLAWS, OFFICERS OF THE COUNCIL (PRESIDENT, VICE PRESIDENT, EXECUTIVE SECRETARY-TREASURER, SEVEN EXECUTIVE COMMITTEE MEMBERS, WARDEN, CONDUCTOR AND THREE TRUSTEES) ARE NOMINATED AND ELECTED BY THE DELEGATES OF THE COUNCIL, AND MUST BE WORKING WITHIN THE BARGAINING UNIT REPRESENTED BY THEIR LOCAL UNION, OR EMPLOYED FULL TIME WITHIN THE FRAMEWORK OF THE UNITED BROTHERHOOD OF CARPENTERS TO BE ELIGIBLE.

FORM 990, PART VI, SECTION A, LINE 8B:

THE COUNCIL DOES NOT HAVE ANY COMMITTEES WITH THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 532211 09-02-15

Schedule O (Form 990 or 990-EZ) (2015)

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization UNITED BROTHERHOOD OF CARPENTERS & JOINERS OF AMERICA SW REGIONAL COUNCIL	Employer identification number 95-1318135
THE ORGANIZATION DID NOT PROVIDE ALL MEMBERS OF THE GOVE	ERNING BODY WITH A
COPY OF THE FORM 990. THE FORM 990 WAS REVIEWED BY THE	AUDIT COMMITTEE AND
THE CONTROLLER PRIOR TO FILING WITH THE IRS.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES THEIR GOVERNING DOCUMENTS AND FIR	NANCIAL STATEMENTS
AVAILABLE TO THE PUBLIC UPON REQUEST.	
FORM 990, PART VII:	
EFFECTIVE JULY 19, 2013, THE COUNCIL WAS PLACED INTO TRU	JSTEESHIP AND A
SUPERVISOR WAS DESIGNATED TO ATTEND TO THE AFFAIRS OF THE	HE COUNCIL. AS A
RESULT, ALL OFFICERS OF THE COUNCIL WERE RELINQUISHED OF	F THEIR
POSITION. THE COUNCIL WAS REMOVED FROM TRUSTEESHIP EFFE	ECTIVE MARCH 31,
2016.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
TRANSFER OF NET ASSETS FROM DISSOLVED LOCAL.	118,423.
FORM 990, PART XII, LINE 1:	
THE ORGANIZATION USES THE MODIFIED CASH BASIS OF ACCOUNT	ring to prepare
THEIR FORM 990.	
FORM 990, PART XII, LINE 2C:	
IN ACCORDANCE WITH THE ORGANIZATION'S BYLAWS, THE TRUST	EES ARE
RESPONSIBLE FOR OVERSEEING THE AUDIT OF THE FINANCIAL ST	TATEMENTS AND
THE SELECTION OF AN INDEPENDENT ACCOUNTANT. THIS PROCES	SS HAS NOT
CHANGED FROM THE PRIOR YEAR. WHILE UNDER TRUSTEESHIP, TI	HE DESIGNATED hedule O (Form 990 or 990-EZ) (2015)
	, ,,

Schedule O (Form 99	<u>90 or 9</u>	90-EZ) (20	1 <u>5)</u>										Page 2
Name of the organiza		UNITI	ED BROT	HERI	IOOL	OF	CARP	ENTE	RS &			Employer identification	
		JOIN	ERS OF	AME	RICA	A SV	/ REGI	ONAL	COU	NCIL	Ī	95-1318135	
													
SUPERVISOR	IS	RESPO	ONSIBLE	FOR	R OV	ERS	SEEING	THE	AUD	IT OF	THE	FINANCIAL	
											_===		
STATEMENTS	ΔΝΤ	מאית ו	SELECT	TON	ΟF	ΔM	TNDEP	FNDF	א ידיז∧	CCOIIN	ייזא גאייי		
DITTIBITED	71111		DDDDCI	1011		7111	THUUL	יהנדעום	NI A	CCCOIN	TANI	•	
			-										
											-		-
												 	_
				·									
													
	,												
	-								_				· -
												· ·	
				_									
								_					
												· · · · · · · · · · · · · · · · · · ·	
				_			_				,		

DocuSign Envelope ID D4BA156F-7110-481E-957A-8C69FEC8F593

SCHEDULE R

(Form 990)

OMB No 1545-0047

2015

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

Related Organizations and Unrelated Partnerships

Schedule R (Form 990) 2015 (g) Section 512(b)(13) controlled entity? Employer identification number 95-1318135 ž Open to Public Inspection × Direct controlling entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. ε REGIONAL COUNCIL Direct controlling OF CARPENTERS entity SOUTHWEST End-of-year assets status (if section 501(c)(3)) **e** Public charity ► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. UNITED BROTHERHOOD OF CARPENTERS & Total income Exempt Code € section 527 Legal domicile (state or Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Legal domicile (state or foreign country) foreign country) ► Attach to Form 990. CALIFORNIA SW REGIONAL COUNCIL 28 POLITICAL ACTION FUND Primary activity Primary activity 9 For Paperwork Reduction Act Notice, see the Instructions for Form 990. JOINERS OF AMERICA CAPITOL MALL, SACRAMENTO, CA 95814-4602 SOUTHWEST REGIONAL COUNCIL OF CARPENTERS POLITICAL ACTION FUND - 95-4468779, 555 Name, address, and EIN (if applicable) Name, address, and EIN of related organization of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service 532161 09-08-15 LHA Part Part

DocuSign Envelope ID D4BA156F-7110-481E-957A-8C69FEC8F593

UNITED BROTHERHOOD OF CARPENTERS &

Schedule R (Form 990) 2015 JOINERS OF AMERICA SW REGIONAL COUNCIL

Part III

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

Page 2

95-1318135

Seneral or Percentage identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year 乏 managing partner? Yes Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Disproportionate Yes No allocations? Ξ Share of end-of-year assets Share of total income Predominant income (related, unrelated, excluded from tax under sections 512-514) e (d)
Direct controlling entity (c)
Legal
domicile
(state or
foreign Primary activity Name, address, and EIN of related organization Part IV

Yes Section Section 512(b)(13) controlled entity? Percentage ownership Ξ Share of end-of-year assets <u>6</u> Share of total income $\boldsymbol{\varepsilon}$ Type of entity (C corp, S corp, or trust) <u>e</u> Direct controlling entity 9 Legal domicile (state or foreign country) છ Primary activity 9 Name, address, and EIN of related organization

Schedule R (Form 990) 2015

532162 09-08-15

Page 3 95-1318135

UNITED BROTHERHOOD OF CARPENTERS & Schedule R (Form 990) 2015 JOINERS OF AMERICA SW REGIONAL COUNCIL

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			!!		Yes No	اه
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	lated organizations listed	ın Parts II·IV?			١.
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1 9	<u>ا</u> ۲	اہ
b Gift, grant, or capital contribution to related organization(s)				ę	×	اہ
c Gift, grant, or capital contribution from related organization(s)				10	×	اہ
				1d	×	ای
				16	X	
Loans or loan guarantees by related organization (s)				2	<u> </u> -	
f Dividends from related organization(s)				#	×	ایر
				19	×	M
Gaic of about the form valeted organization(s)				÷	×	
				÷	×	
 Exchange of assets with related organization(s) 				= ;	*	. .
j Lease of facilities, equipment, or other assets to related organization(s)				7	4	اہ
k Lease of facilities, equipment, or other assets from related organization(s)				¥	×	ابر
I Performance of services or membership or fundraising solicitations for related organization(s)	nızatıon(s)			=	×	ا ہے
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			Ē	×	ا ـ
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	(s)uc			Ę	×	ا ہـ
o Sharing of paid employees with related organization(s)				9	×	اہ
b Reimbilicement haid to related organization(s) for exhanses				6	×	L.
				₽	×	,,
				+	<u>×</u>	.
Control transfer of cash or property to related organization(s)				. 4	×	
Source transfer of cast of property from reaction of the instructions for information on who mist complete this line, including covered relationships and transaction thresholds.	ho must complete th	is line including covered	relationships and transaction thresholds.		}	I
1	(b) Transaction	(c) Amount involved	(d) Method of determining amount involved	nvolved		
י ביינים פושמייבים פושמיים פושמייבים פושמיים פושמים פושמיים פושמיים פושמיים פושמיים פושמיים פושמיים פושמיים פושמיים פושמים פושמיים פושמיים פ	type (a-s)					
(1)						
A.7						
(2)						-
(3)						
(4)				į	,	ļ
(2)						
(9)	3.0		Inbados	Schedule R (Form 990) 2015	990) 20-	15
532163 09-08-15))				1000	?

DocuSign Envelope ID. D4BA156F-7110-481E-957A-8C69FEC8F593

UNITED BROTHERHOOD OF CARPENTERS &

SW REGIONAL COUNCIL JOINERS OF AMERICA

Page 4

95-1318135

Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37 Schedule R (Form 990) 2015

Part VI

Schedule R (Form 990) 2015 General or Percentage managing ownership Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships ड Yes No 9 | Disproportion | Code V-UBI | Generations | Code V-UBI | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispressions | Dispress \equiv end-of-year Share of assets Share of ıncome total Predominant income parties sections 512-514)

(e) Reall parties sections 512-514)

(e) Predominant income parties sections 512-514)

(e) Areall parties sections 512-514) (state or foreign Legal domicile country) Primary activity 9 Name, address, and EIN of entity

31

	•		UNITED	BRO	THERHOOD	OF	CARPENTERS &	05 4040405
Schedul	le R	(Form 990) 2015 Supplemental Infor	JOINERS	OF	AMERICA	SW	REGIONAL COUNCIL	95-1318135 Page 5
Part	VII	Supplemental Infor	mation					
		Provide additional informa	ition for respon	ses to	questions on Sc	hedule	e R (see instructions)	
	_							
								
								
_								
_					-			
								
								
							 	
		 						
	_							
								
					<u> </u>			
		 						
								
			 ·					