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# $\mathsf{Form}\, 990.$

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

OMB No 1545-0047

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.lrs.gov/form990.

Open to Public Inspection

<u> </u>	For the	2015 calendar year, or tax year beginning JUL 1, 2015 and	ل ending	<u>UN 30, 2016</u>						
В	Check if applicable	C Name of organization		D Employer identific	cation number					
•	-	I UNITED BROTHERHOOD OF CARPENTERS AND								
	Addre chang	JOINERS OF AMERICA LOCAL UNION NO. 12	43							
	Name Chang			92-0	013107					
	Initial		Room/suite	E Telephone number						
	Final	25 TIMPERIAND DRIVE	1100111/30110	· '	452 <u>-3</u> 862					
	return. termin									
	ated Amen	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	217,591.					
H	iretum ∏Applic	FAIRBANKS, AK 99701		H(a) Is this a group re						
L	tion pendii	P Name and address of principal officer LATED GRANTHAM		for subordinates						
		SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No					
<u> 1</u>	Tax-exempt status: 501(c)(3) X 501(c) ( 5 ) ◀ (insert no.) 4947(a)(1) or 527 If "No," attach a list (see instructions)									
<u>J 1</u>	Website: ► N/A H(c) Group exemption number ► 0143									
<u>K (</u>	orm of	organization: Corporation Trust Association X Other ► LAB	OR L Year	of formation: 1969 N	State of legal domicile: AK					
P	art I	Summary	-							
	1	Briefly describe the organization's mission or most significant activities. LABO	R UNIC	N						
.∜ <i>୯୯</i> ୦ Governance		, <u>====</u>								
ි grna	2	Check this box In the organization discontinued its operations or dispose	sed of more	than 25% of its net as	sets					
5 S		Number of voting members of the governing body (Part VI, line 1a)		3	10					
	1	Number of independent voting members of the governing body (Part VI, line 1b)			0					
o Celivities & o			•	. 4						
Ę.		Total number of individuals employed in calendar year 2015 (Part V, line 2a)		5	2					
j <b>:</b>		Total number of volunteers (estimate if necessary)		6	10					
		Total unrelated business revenue from Part VIII, column (C), line 12		<u>7a</u>	0.					
<u> </u>	b	Net unrelated business taxable income from Form 990-T, line 34	<del></del>	7b	0.					
3				Prior Year	Current Year					
	8	Contributions and grants (Part VIII, line 1h)		0.	<u> </u>					
ָ בֻּ בַּי	9	Program service revenue (Part VIII, line 2g)		201,798.	199,020.					
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	1.					
5 =	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		19,020.	18,570.					
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		220,818.	217,591.					
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.					
		Benefits paid to or for members (Part IX, column (A), line 4)		Ŏ.	0.					
(0	l	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		45,860.	46,911.					
Expenses	160	Professional fundraising fees (Part IX, column (A), line 11e)		0.						
ĕ	loa		<u>^</u> ⊢	<u> </u>	0.					
X	J D	Total fundraising expenses (Part IX, column (D), line 25)	0.	155 104	120 050					
_	17/	Other expenses (Part IX, column (A), lines 11a-11d, 1 1240 F	<u> </u>	166,194.	132,079.					
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)  Revenue less expenses Subtract line 18 from Fe 12 0110 0 F 2013		212,054.	<u> 178,990.</u>					
- 0				8,764.	38,601.					
Soci		AUG Z D ZUID	Be	ginning of Current Year	End of Year					
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		588,534.	627,161.					
A A	21	Total liabilities (Part X, line 26)		0.	26.					
컐	22	Net assets or fund balances Subtract line 21 from line 20		588,534.	627,135.					
Pi	art II	Signature Block								
Und	er pena	ilties of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the best of m	v knowledge and belief, it is					
		et, and complete, Declaration of preparer (other than officer) is based on all information of wi			, , ,					
		Acid Ham		8-11-	-2016					
Sig	n	Sugnature of office		Date	<u> </u>					
Hei		LAIRD GRANTHAM, FINANCIAL SECRETARY								
1101	-	Type or print name and title	<del> </del>							
				Date Check	PTIN					
De!		Print/Type preparer's name Preparer's signature			<b>一</b> !					
Paid		DON A CURTIS DON A CURTIS		8/08/16 self-employe						
	parer	Firm's name DON A CURTIS & ASSOCIATES PLLC		Firm's EIN	26-4388619					
Use	Use Only Firm's address ▶ P.O. BOX 7359									
	COVINGTON, WA 98042 Phone no. 253.631.2106									
Ma	y the II	RS discuss this return with the preparer shown above? (see instructions)			Yes No					
5000		s 15 LHA For Paperwork Reduction Act Natice and the concrete instruction		1	21 Form 990 (0015)					

Form 990 (2015)

92-0013107 Form 990 (2015) JOINERS OF AMERICA LOCAL UNION NO. 1243 **Checklist of Required Schedules** Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? X If "Yes," complete Schedule A X 2 Is the organization required to complete Schedule B. Schedule of Contributors? 2 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 3 X 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 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 X Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to 6 X provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? X If "Yes," complete Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent 10 X endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IXI, or X 11 a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X Part VI 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total Х assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c 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 X Part X, line 16? If "Yes," complete Schedule D, Part IX 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X X 11e | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a X Schedule D, Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? X If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Х Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 X or more? If "Yes," complete Schedule F, Parts I and IV 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any 15 X foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3. more than \$5,000 of aggregate grants or other assistance to 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 X Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 X column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18

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1c and 8a? If "Yes," complete Schedule G, Part II

complete Schedule G, Part III

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."

Form 990 (2015) JOINERS OF AMERICA LOCAL UNION NO. 1243

Part IV Checklist of Required Schedules (continued)

20a Dd the organization operate one or more hospital facilities? If "Yes", complete Schedule I bit "Yes" to the PQs, did the organization of the organization attach a copy of its audited financial statements to this return? 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 17 II "Yes," complete Schedule I, Parts I and II 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 II "Yes," complete Schedule I, Parts I and II 23 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 I. If "Yos", or line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24a Did the organization maintain an ascrow account other than a refunding ascrow at any time during the year to defease any tax-exempt bonds? 35 Section 501(38), 501(49), and 501(4), and 501(4)				Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), then \$7 // IVes, "complete Schedule I, Parts I and III 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), then \$2^{\circ} If "Yes," complete Schedule I, Parts I and III 22 Zimin All 19 Did the organization answer Yes* to Part IVI (aschoul A), In 84, 4 or 3 about compensation of the organization's current and former officiers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule Is Schedule Is It IVI (as III) and IVI (as	20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
domestic government on Part IX, column (A), line 1? If "res," complete Schedule I, Parts I and II  21 Did the organization report mere 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 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 compensation developes (If "Yes," complete Schedule I, Parts I and III  23 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 III and the Organization mises 25h through 24d and complete Schedule III and the organization mises and proceeds of tax-exempt bonds beyond a temporary period exception?  24d Did the organization mises and proceeds of tax-exempt bonds beyond a temporary period exception?  24d Did the organization mises and proceeds of tax-exempt bonds beyond a temporary period exception?  24d Did the organization mises and an escrive account other than a refunding escrive at any time during the year?  24d Did the organization analytic and 5010(290) organizations. Did the organization engage in an excess benefit transaction with a disqualified person of uning the year? If "Yes," complete Schedule L, Part II  25d Section 5016(3), 501(6)(4), 4nd 501(6)(29) organizations. Did the organization engage 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 special person in a prior year, and that the transaction export and excess benefit transaction with a disqualified persons? If "Yes," complete Schedule L, Part II  25d by the organization report any amount on Part X, line 5.6, or 22 for recevables from or payables to any current or former officer, directo	ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, couring the "Yes," complete Schedule I. Part I is and III 2d the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officiers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule Is and the year, that was issued after December 31, 2002 If "Yes," answer intex 24b through 24d and complete Schedule K. If "No", go to line 25a Did the organization maintain an escrew account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  did the organization maintain an escrow account other than a refunding escrow at any time during the year?  did the organization maintain an escrow account other than a refunding escrow at any time during the year?  did the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year?  did the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d Legal Saction 50 1(c)(3), 50 1(c)(4), and 50 1(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person of any of the organization is professional organization and any of the organization is professional organization and that the transaction has not been reported on any of the organization is professional organization and that the transaction is any of the organization is professional organization and the stransaction and the any of the organization is professional organization and professional organization organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, organization is professional organization organization provide a g	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
Part IX. column (A), line 2? if "Yes," complete Schedule I, Parts I and III  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 I, Part III list of 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 III list in the Schedule III list in Schedule III list in Organization and as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
23 Did the organization answer "Yes" to Part VII, Section A, Inio 3. 4, or 5 about compensation of the organization's current and former officers, directors, frustees, key employees, and highest compensated employees? If "Yes," complete Schedule J but 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	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
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Schedule J  24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b (through 24d and complete Schedule K. If "No", go to line 25a.  24a X  24b Did the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax-exempt bonds.  25b Did the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax-exempt bonds.  25c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I., Part I 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 spinor forms 900 or 9905-271 if "Yes," complete Schedule I., Part I is the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persone? If "Yes," complete Schedule I., Part IV is a through the part of th	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
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  5 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  5 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  5 Did the organization invest an an escores benefit transaction with a disqualified person of the organization acts as an "on behalf of" issuer for bonds outstanding at any time during the year?  5 Section 501(k3), 501(k4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person unique the year?  5 Section 501(k3), 501(k4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part II  5 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, director, trustees, key employees, inghest complete schedule to remote year thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV  5 Did the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV  6 A nentity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  7 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV  8 Did the organization includate, terminate, or dissolve and cease operations?  8 Did the organization includate, terminate, or dissolve and cease operations?  9 Did the orga		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
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d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? "I"vs; "complete Schedule L, Part I   25a    b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a pnor year, and that the transaction has not been reported on any of the organization's pnor Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II   25b    25b   27b	C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustess, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 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 IV instructions for applicable filing thresholds, conditions, and exceptions):  27		any tax-exempt bonds?	24c		
transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization pror Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I  25b  25b  25b  25c  25c  25c  25c  25c	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? // "Yes," complete Schedule L, Part I    25b		transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II  26			25b		
26	26				
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					
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			_26_		<u> </u>
of any of these persons? If "Yes," complete Schedule L, Part III  Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  28b	27				
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  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  28b				!	v
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b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  c 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 or indirect owner? If "Yes," complete Schedule L, Part IV  28c	9		282		x
c 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  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  31 Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32 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 Did 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 Was the organization have a controlled entity within the meaning of section 512(b)(13)?  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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 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 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 Section 501(c)(3) organizations of federal income tax purposes? If "Yes," complete Schedule R, Part VI  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization  38 Did the organization conduct mo					X
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Note. All Form 990 filers are required to complete Schedule O	35		31		
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	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	0				
b	Enter the number of Forms W-2G included in line 1a Enter -0 if not applicable 1b	Ō				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	7				
	(gambling) winnings to prize winners?	10	:			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			T		
	filed for the calendar year ending with or within the year covered by this return	2				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u> </u>		
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	<b>3</b> b				
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		
b	If "Yes," enter the name of the foreign country: ▶	_				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	1	<u> </u>		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u> </u>		
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	50	-	┼		
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		<u> </u>		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts					
_	were not tax deductible?	6b		+-		
7	Organizations that may receive deductible contributions under section 170(c).			\ <b>v</b>		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor of "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		<u>X</u>		
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	-/6	<del>'  </del>	+-		
·	to file Form 8282?	70	.	x		
d	If "Yes," indicate the number of Forms 8282 filed during the year	1.0		<del> </del>		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		.			
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C	? 7h		$\perp$		
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		<del> </del>		
9	Sponsoring organizations maintaining donor advised funds.					
	Did the sponsoring organization make any taxable distributions under section 4966?	<u>9</u> a		+-		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	<del>                                     </del>			
10	Section 501(c)(7) organizations. Enter		-			
a	Initiation fees and capital contributions included on Part VIII, line 12	_				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section FO4(AV40) agreement from Fotor	$\dashv$				
11	Section 501(c)(12) organizations. Enter					
a	Gross income from members or shareholders  Cross income from other courses (Do not not amounts due or paid to other courses against	$\dashv$				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	1				
122	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12				
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	.2	-	+		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	$\dashv$				
	Is the organization licensed to issue qualified health plans in more than one state?	13	a -	+		
_	Note. See the instructions for additional information the organization must report on Schedule O.			<del>                                     </del>		
ь	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans					
С	Enter the amount of reserves on hand			1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14	a	X		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14				
		Fo	rm <b>99</b> (	(2015)		

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

	Check if Schedule O contains a response or note to any line in this Part VI									
Sec	tion A. Governing Body and Management									
					_		Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	$\perp$		10					
	If there are material differences in voting rights among members of the governing body, or if the governing					l				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1	4					i		
b	Enter the number of voting members included in line 1a, above, who are independent	1b			0	1				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with	h an	y other						
	officer, director, trustee, or key employee?				L	2		_X_		
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ect s	supervision	1					
	of officers, directors, or trustees, or key employees to a management company or other person?				L	3		X		
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 w	vas 1	filed?	L	4		X		
5	Did the organization become aware during the year of a significant diversion of the organization's ass					5		_X		
6	Did the organization have members or stockholders?					6	X	<u></u>		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoir	nt or	e or						
	more members of the governing body?				L	7a	X			
b										
	persons other than the governing body?									
8	D. I.I									
а	The second head of									
ь	The state of the state of the second probability of the second probabi									
9	and the second has been assessed as the second has been as th									
	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 R	even	ue (	Code.)						
					_		Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?					10a		X		
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapte	ers,	affiliates,						
	and branches to ensure their operations are consistent with the organization's exempt purposes?				L	10b	Х			
11a	11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?									
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				<u> </u>	12a		X		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	e to co	onfli	ts?		12b		ļ		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	⁄es, "	des	cnbe						
	in Schedule O how this was done				1	12c				
13	Did the organization have a written whistleblower policy?					13		X		
14	Did the organization have a written document retention and destruction policy?				Ļ	14		X		
15	Did the process for determining compensation of the following persons include a review and approve	al by	ınd	ependent				1		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•								
а	The organization's CEO, Executive Director, or top management official				1	15a		X		
b	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 arrange	ment	wit	h a						
	taxable entity during the year?				1	16a		X		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its	s pa	rticipation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	ınızat	ion'	S	ļ					
	exempt status with respect to such arrangements?				!	16b		<u></u>		
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 (Se	ctio	n 501(c)(3)s (	only) a	vailab	le			
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website X Upon request Other (explain									
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	onflic	t of	nterest polic	y, and	fınan	cıal			
	statements available to the public during the tax year									
20	State the name, address, and telephone number of the person who possesses the organization's be	ooks	and	records.						
	LAIRD GRANTHAM - 907 452-3862									
	25 TIMBERLAND DRIVE, FAIRBANKS, AK 99701									

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

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

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

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

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

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

(A)	(B)	d organization compensate (C)						(D)	(E)	(F) '	
Name and Title	Average	(do	not c	Pos heck	more	than	one	Reportable	Reportable	Estimated	
	hours per week	box,	unle cer an	ss pe d a d	rson irecto	ıs bot or/trus	h an tee)	compensation from	compensation from related	amount of other	
	(list any	ector						the	organizations	compensation	
	hours for	or dir	92			ated		organization	(W-2/1099-MISC)	from the	
	related organizations	rustee	trust		eg eg	ubeus		(W-2/1099-MISC)		organization and related	
	below	individual trustee or director	nstitutional trustee	<u>.</u>	Key employee	Highest compensated employee	<b>a</b>			organizations	
·	line)	Indiv	Instit	Officer	Key e	H H	Former				
(1) EDWARD PUGLIESE	2.00										
PRESIDENT		Ш		Х		<u> </u>		0.	0.	0.	
(2) DONALD EVANS	2.00									_	
VICE PRESIDENT		Ш	<u> </u>	Х				0.	0.	0.	
(3) ARTHUR SUTTON	2.00										
RECORDING SECRETARY		$\vdash$		X	ļ	<u> </u>	<b> </b>	0.	0.	0.	
(4) LAIRD GRANTHAM	2.00									•	
FINANCIAL SECRETARY	2 00	$\vdash\vdash$		Х				0.	0.	0.	
(5) AARON EMERICK	2.00			x				0.		•	
TREASURER	2.00		-	Λ		$\vdash$		0.	0.	0.	
(6) CHRIS STANKIEWICZ	2.00			х		ļ		0.	0.	0.	
CONDUCTOR (7) MATTHEW HACKENMILLER	2.00	H	<u> </u>	Λ		$\vdash$	<del> </del>	0.	0.	<u> </u>	
WARDEN	2.00			х		l	ļ	0.	0.	0.	
(8) JOSHUA BOLTON	2.00					t			<u> </u>	<u></u>	
TRUSTEE				X			ł	0.	0.	0.	
(9) JESSE PEARSON	2.00										
TRUSTEE				X		<u> </u>		0.	0.	0.	
(10) WILLIAM WOOD	2.00	]									
TRUSTEE		Ш		X		<u> </u>		0.	0.	0.	
		. !									
		H				<u> </u>	_				
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		-									
									l	L	

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	Section A. Onicers, Directors, Trus	lees, Ney Em	hioa	ees	aile	u <u>ni</u>	gne	<u> </u>	ompensateu Employe	es (continued)				
	(A)	(B)	1		-	C)			(D)	(E)			(F)	
	Name and title	Average	(do		Pos heck		than	one	Reportable	Reportable			imate	_
		hours per week					is bot or/trus		compensation	compensatio	- 1		ount o	of
		(list any	<del></del>	Γ		Γ		, 	from the	from related organizations	- 1		other oensat	hon
		hours for	direct				_		organization	(W-2/1099-MIS			om the	
		related	ee or	stee			nsate		(W·2/1099-MISC)	(** =/ *********************************	~		ınızatı	
		organizations	) trus	nad tr		oyee	m o					and	relate	ed
		below	Individual trustee or director	Institutional trustee	Officer	Key emptoyee	Highest compensated employee	Former			ļ	orga	nızatıc	ons
		line)	르	Ĕ	₽	ş	운통	훈		<del></del>				
											i			
						_	<del> </del>	<u> </u>						
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		-	_	_			<del>                                     </del>	╁						
			1						1					
1h	Sub-total	1					٠	<u> </u>	0.		0.			0.
	Total from continuation sheets to Part V	I Section A							0.		0.		-	0.
	Total (add lines 1b and 1c)	ii, occuoii A							0.		0.			0.
	Total number of individuals (including but n	ot limited to th	nose	liste	ed al	bove	e) wł	ho re		1.000 of reportable	1			
	compensation from the organization						<b>-,</b>			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•			0
						•							Yes	No
3	Did the organization list any former officer,	director, or tru	uste	e, ke	y en	nplo	yee	, or	highest compensated e	mployee on	ſ			
	line 1a? If "Yes," complete Schedule J for s				•	•	•			. ,		3		X
	For any individual listed on line 1a, is the su			omp	ensa	ation	n and	d otl	her compensation from	the organization	Ī			
	and related organizations greater than \$15									•		4		X
	Did any person listed on line 1a receive or a									dual for services	[			
	rendered to the organization? If "Yes," com	plete Schedul	e J f	or si	uch	pers	son					5		Х
Sect	ion B. Independent Contractors													
	Complete this table for your five highest co										pensa	ation fi	om	
	the organization Report compensation for	the calendar y	ear (	endı	ng v	vith	or w	<u>ıthır</u>	n the organization's tax	year				
	(A)								(B)		_	(C		
	Name and business	address	N	INC	3			_	Description of s	services		omper	nsation	า ——
		_						_						
								$\dashv$				-	_	
									-					
								$\dashv$						
2	Total number of independent contractors (i	neludina but n	not lu	mite	d to	the	برا می	sted	l above) who received a	ore than			_	
	\$100,000 of compensation from the organi	-	iot III	mie	u 10		0 0	o (CU	a above) who received if	IOIE UIAII		L		
	wise, oce of compensation from the organi	-unon											200 4	2045

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Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections 512 - 514 (C) Unrelated Related or Total revenue exempt function business revenue revenue Federated campaigns 1a Membership dues 1b c Fundraising events 10 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f **Business Code** 105,627. 105,627 Program Service 2 a REBATES/REIMB - PNRCC 900099 **b** CONTINGENCY FUND INCOM 900099 3,087 3,087. c REIMBURSED EXPENSES 900099 445. 445. 900099 89,861 89,861 f All other program service revenue 199,020. g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds 4 5 Royalties (i) Real (II) Personal 18,570 6 a Gross rents 0. **b** Less rental expenses 18,570 Rental income or (loss) 18,570 18,570. d Net rental income or (loss) (II) Other 7 a Gross amount from sales of (i) Securities assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue Total, Add lines 11a-11d 217,591 0 Total revenue, See instructions.

Form 990 (2015)

Statement of Revenue

Part VIII

Form 990 (2015) JOINERS OF AMERICA LOCAL UNION NO. 1243 92-0013107 Page 10
Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must com			ompiete column (A)	
	Check if Schedule O contains a respon			(C)	(D)
	ot include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	ındıvıduals. See Part IV, line 22	_			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	ındıvıduals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,			'	
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	22,208.			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	6,070.			
9	Other employee benefits	16,284.			
10	Payroll taxes	2,349.			
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	5,800.			
d	Lobbying .				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	5,434.			
13	Office expenses	8,414.			
14	Information technology				
15	Royalties				
16	Occupancy	23,860.			
17	Travel				
18	Payments of travel or entertainment expenses				,
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	23,243.			
20	Interest				
21	Payments to affiliates	35,813.			
22	Depreciation, depletion, and amortization	14,441.			
23	Insurance	2,824.			
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	DONATIONS	12,250.			
b					
С					
d			_		
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	178,990.			
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined	1			
	educational campaign and fundraising solicitation.				
	Check here			l	

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Form 990 (2015)

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year 166,964. 219,402. 1 Cash · non-interest-bearing 1 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment, cost or other 626,222. basis. Complete Part VI of Schedule D 10a 218,463. 421,570. 407,759. b Less, accumulated depreciation 10b 10c Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 Investments · program-related. See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 627,161 588,534 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons 22 Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of 26. 0. 25 Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances Unrestricted net assets 27 27 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 🗓 and complete lines 30 through 34. 0. 30 Capital stock or trust principal, or current funds 30 0. 31 0. Paid-in or capital surplus, or land, building, or equipment fund 31 588,534. 627,135. Retained earnings, endowment, accumulated income, or other funds 32 32 588,534. 627,135. 33 Total net assets or fund balances 33 588,534. 627,161. Total liabilities and net assets/fund balances

Form **990** (2015)

Form	990 (2015) JOINERS OF AMERICA LOCAL UNION NO. 1243	92-	<u> </u>	Pa	ge IZ				
Pa	t XI Reconciliation of Net Assets	,							
	Check if Schedule O contains a response or note to any line in this Part XI								
1	Total revenue (must equal Part VIII, column (A), line 12)	1		7,5					
2	Total expenses (must equal Part IX, column (A), line 25)	2			90.				
3	Revenue less expenses. Subtract line 2 from line 1	_3	3	8,6	01.				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	58	8,5	34.				
5	Net unrealized gains (losses) on investments	5							
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	Prior period adjustments	8							
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,								
	column (B))	10	62	7, <u>1</u>	<u>.35.</u>				
Part XII Financial Statements and Reporting  Check if Schedule O contains a response or note to any line in this Part XII									
Check if Schedule O contains a response or note to any line in this Part XII									
1	Accounting method used to prepare the Form 990. X Cash Accrual Other		'						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a							
	separate basis, consolidated basis, or both.								
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?		2b	X					
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basıs,							
	consolidated basis, or both.								
	Separate basis Consolidated basis Both consolidated and separate basis			l					
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,									
review, or compilation of its financial statements and selection of an independent accountant?									
За	ıt								
	Act and OMB Circular A-133?		3a	Ļ	X				
	If "Voc." did the organization undergo the required sudit or audits? If the organization did not undergo the requi	urad aud		1	1				

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

Form **990** (2015)

# 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.

2015
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.			
		BROTHERHOOD OF C	CARPENTERS A	ND En	ployer identification number
	JOINERS	OF AMERICA LOCA	AL UNION NO.	1243	92-0013107
Pa	ort I-A Complete if the org	janization is exempt und	der section 501(c)	or is a section 527	organization.
2	Provide a description of the organize Political expenditures Volunteer hours	zation's direct and indirect politic	cal campaign activities		*\$
Pa	art I-B Complete if the ord	ganization is exempt und	der section 501(c)	)(3).	
	Enter the amount of any excise tax				\$
	Enter the amount of any excise tax				<b>\$</b>
	If the organization incurred a section				Yes No
<b>4</b> a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV				
Pa	art I-C Complete if the org	ganization is exempt und	der section 501(c)	), except section 50	1(c)(3).
1	Enter the amount directly expended	d by the filing organization for se	ection 527 exempt fund	ction activities	<b>\$</b>
2	Enter the amount of the filing organ	ization's funds contributed to o	ther organizations for s	section 527	
	exempt function activities			•	* \$
3	Total exempt function expenditures	s. Add lines 1 and 2 Enter here	and on Form 1120-POI		
	line 17b			•	*\$
4	Did the filing organization file Form	1120-POL for this year?			└─ Yes └─ No
5	Enter the names, addresses and er	• •	•	_	
	made payments For each organiza				
	contributions received that were pr				arate segregated fund or a
	political action committee (PAC) If	additional space is needed, pro		<del>-                                    </del>	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fror filing organization's funds If none, enter	contributions received and

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

Schedule C (Form 990 or 990-EZ) 2015

	dule C (Form 990 or 990-EZ) 2015  t II-A   Complete if the org	<u>JOINE</u>	RS OF	AMERICA LOC	AL UNION NO	. 1243 92-0	0013107 Page 2				
1 di	section 501(h)).	jai ii Zati	JII IS EXC	inpi under sectio			cicotion dilaci				
A Ch	<del></del>	tion belon	as to an affi	liated group (and list in	Part IV each affiliated	group member's nar	ne, address, EIN,				
	expenses, and share		•	• , ,		•	, ,				
3 Ch	. — .		, ,	nd "limited control" pro	visions apply						
	Limi	ts on Lob	bying Expe	<u> </u>		(a) Filing organization's totals	(b) Affiliated group totals				
1a	Total lobbying expenditures to infli	ience pub	dic opinion (	grass roots lobbying)							
	Total lobbying expenditures to infli	•			·	-	-				
	T (111)										
	Other exempt purpose expenditure		<u> </u>		İ	<del></del>	-				
e	Total exempt purpose expenditure		s 1c and 1c	1)	Ì	· · · · · · · · · · · · · · · · · · ·	1				
f	Lobbying nontaxable amount. Enter										
Ĭ	If the amount on line 1e, column (a) of			bying nontaxable am							
- 1	Not over \$500,000	1 (5) 10.		the amount on line 1e.	· · · · · · · · · · · · · · · · · · ·						
ŀ	Over \$500,000 but not over \$1,000	0.000									
- 1	Over \$500,000 but not over \$1,000,000         \$100,000 plus 15% of the excess over \$500,000.           Over \$1,000,000 but not over \$1,500,000         \$175,000 plus 10% of the excess over \$1,000,000.										
ŀ	Over \$1,500,000 but not over \$17,			00 plus 5% of the exce							
ŀ	Over \$17,000,000	,000,000	\$1,000,0		33 3401 \$1,000,000.						
	<u> </u>		Ψί,οοο,	<u> </u>							
	Grassroots nontaxable amount (er	ter 25% o	f line 1f)								
h Subtract line 1g from line 1a If zero or less, enter -0-											
	Subtract line 1f from line 1c. If zero										
	If there is an amount other than ze	•		line 1. did the organiza	ation file Form 4720						
,	reporting section 4911 tax for this			mio ii, ala liio organizi			Yes No				
	(Some organizations the	hat made Sec	a section 5 the separa	ate instructions for lin	have to complete all ones 2a through 2f.)	of the five columns	below.				
		Lobi	oying Expe	nditures During 4-Yea	ar Averaging Period						
	Calendar year (or fiscal year beginning in)	(a)	2012	<b>(b)</b> 2013	(c) 2014	( <b>d</b> ) 2015	(e) Total				
2a	Lobbying nontaxable amount										
	Lobbying ceiling amount										
	(150% of line 2a, column(e))										
С	Total lobbying expenditures										
	Crossroots pontovehla emerit										
	Grassroots nontaxable amount Grassroots ceiling amount						<del> </del>				
е	(150% of line 2d, column (e))										
	(	1.					<del>                                     </del>				
	Graceroots Johnwan expenditures										

Schedule C (Form 990 or 990-EZ) 2015

Schedule C (Form 990 or 990-EZ) 2015 JOINERS OF AMERICA LOCAL UNION NO. 1243 92-0013107 Page 3

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

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	<u> </u>	(b	)
of the lobbying activity	Yes	No	Amo	
During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of				
a Volunteers?				
<ul><li>b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</li><li>c Media advertisements?</li></ul>				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912		}		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), s 501(c)(6).	ection 501(c)(	5), or se	ction	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1	Х	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	.X	_
3 Did the organization agree to carry over lobbying and political expenditures from the prior year's	•	3		X
answered "Yes."  1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of	political			
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year		2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du	es	3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	ne excess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying	and political			
expenditure next year?		4		
5 Taxable amount of lobbying and political expenditures (see instructions)		.5		
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	group list); Part II-/	A, lines 1 a	and 2 (see	
instructions), and Part II-B, line 1 Also, complete this part for any additional information				
				-
	-			
				_
				_

# SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

UNITED BROTHERHOOD OF CARPENTERS AND

Employer identification number 92-0013107

Pa	Part I Organizations Maintaining Donor Advised Fun								
<u> </u>	organization answered "Yes" on Form 990, Part IV, line 6	as or other similar rands	or Accounts. Complete if the						
		(a) Donor advised funds	(b) Funds and other accounts						
_		(a) bonor advised fands	(b) t and and other accounts						
1	· ———								
2	, , ,								
3	,								
4			- d 6 - d-						
5	5								
_	are the organization's property, subject to the organization's exclusive	<u> </u>	└ Yes						
6	5, ,		•						
	for charitable purposes and not for the benefit of the donor or donor	advisor, or for any other purpose	· — —						
Pa	impermissible private benefit?  Part II   Conservation Easements. Complete if the organization	on answered "Ves" on Form 900 J	Yes No						
			raitiv, mie /						
1	Preservation of land for public use (e.g., recreation or education		orically important land area						
	Preservation of land for public use (e.g , recreation or education)  Protection of natural habitat  Preservation of a historically important land area  Preservation of a certified historic structure								
	Preservation of open space	r reservation of a cert	med historic structure						
2		servation contribution in the form	of a consequation easement on the last						
_	day of the tax year	servation contribution in the form	Held at the End of the Tax Year						
9	a Total number of conservation easements		2a						
b	·		2b						
-	c Number of conservation easements on a certified historic structure i	2c							
d									
_	listed in the National Register		2d						
3		extinguished, or terminated by the							
	year <b>&gt;</b>	g,,	a digan mananan alam ng ama tan						
4	4 Number of states where property subject to conservation easement	is located							
5	5 Does the organization have a written policy regarding the periodic m	onitoring, inspection, handling of							
	violations, and enforcement of the conservation easements it holds?		Yes No						
6	Staff and volunteer hours devoted to monitoring, inspecting, handlin	g of violations, and enforcing con-	servation easements during the year						
	<b>&gt;</b>								
7	7 Amount of expenses incurred in monitoring, inspecting, handling of	violations, and enforcing conserva	tion easements during the year						
	<b>&gt;</b> \$								
8	B Does each conservation easement reported on line 2(d) above satisf	y the requirements of section 170	(h)(4)(B)(i)						
	and section 170(h)(4)(B)(ii)?		Yes No						
9	9 In Part XIII, describe how the organization reports conservation ease	ments in its revenue and expense	statement, and balance sheet, and						
	include, if applicable, the text of the footnote to the organization's fir	nancial statements that describes	the organization's accounting for						
_	conservation easements								
Ра	Part III Organizations Maintaining Collections of Art,		ther Similar Assets.						
	Complete if the organization answered "Yes" on Form 990, Pa	<del></del>	<del></del>						
1a	1a If the organization elected, as permitted under SFAS 116 (ASC 958),								
	historical treasures, or other similar assets held for public exhibition,		ince of public service, provide, in Part XIII,						
	the text of the footnote to its financial statements that describes the								
b	b If the organization elected, as permitted under SFAS 116 (ASC 958),	·							
	treasures, or other similar assets held for public exhibition, education	n, or research in furtherance of pu	blic 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								
2	_ , , , , , , , , , , , , , , , , , , ,		ai gain, provide						
	the following amounts required to be reported under SFAS 116 (ASC	ੁ ਬਹਲ) relating to these items	<b>.</b>						
a	a Revenue included on Form 990, Part VIII, line 1		\$						
-	m accore includad in Form UNII HAM Y								

		OF AMERIC							13107	
Par	3									
3	Using the organization's acquisition, accessi	on, and other record	ls, checi	k any of the	following tha	t are a sı	gnificant i	use of its	collection i	tems
	(check all that apply).	_								
а	Public exhibition	d			hange progra					
b	Scholarly research	е		Other					<del></del>	
С	Preservation for future generations							_		
4	Provide a description of the organization's co							se in Par	t XIII	
5	During the year, did the organization solicit of					er sımılar	assets		٦.,	<b>┌</b> ┐
П	to be sold to raise funds rather than to be many						<b>5</b>	\	<u>Yes</u>	No_
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		ete if the	organizatio	n answered	'Yes" on	Form 990	), Part IV,	line 9, or	
та	Is the organization an agent, trustee, custod	ian or other intermed	liary for	contribution	is or other as	sets not	inciuaea	_	Yes	□ No
	on Form 990, Part X?			tabla				<u> </u>	⊥ res	NO
D	If "Yes," explain the arrangement in Part XIII	and complete the to	llowing	table.					A	
	S halamaa						4-	-	Amount	
		Beginning balance 1c								
	Additions during the year						1d			
е.	Distributions during the year						1e 1f			
7-	Ending balance	orm 000 Dort V line	O1 for		untadial agas	unt liabil			Yes	No
	Did the organization include an amount on F If "Yes," explain the arrangement in Part XIII.						ıty r		_ res	
Par							<u> </u>			<u></u>
ı uı	E la complete la c	(a) Current year		Prior year	(c) Two year			eare hack	(e) Four y	pare hack
4.	Beginning of year balance	(a) Current year	(6)	TIOI year	(C) Two year	3 Dack	(u) Tillee y	cais back	(e) roury	cai 3 Dack
1a _	Contributions									
b			_			+				
C	Net investment earnings, gains, and losses Grants or scholarships					+				
	·								-	
е	Other expenditures for facilities	-				1			•	-
	and programs	·			-	-				
	Administrative expenses End of year balance									
g	Provide the estimated percentage of the cur	rent year and halane	l (line 1	a column (	a)) hold as					
2	Board designated or quasi-endowment	rent year end balanc	%	g, column (	a)) Helu as					
	Permanent endowment	%	<b>–</b> ′°							
	Temporarily restricted endowment									
C	The percentages on lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the posse		ation tha	at are held a	and administe	red for t	ne organiz	ation		
00	by								Гу	es 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	•								
Pai	t VI Land, Buildings, and Equipn									
	Complete if the organization answere	d "Yes" on Form 990	), Part I	V, line 11a. S	See Form 990	), Part X,	line 10.			
	Description of property	(a) Cost or o	ther	(b) Cost	t or other	(c) A	ccumulate	ed	(d) Book	value
		basis (investr	nent)	basis	(other)		oreciation		<b>\-</b> -,	
1a	Land	-		8	8,903.		-		88	,903.
b	Buildings			<del></del>	8,702.		200,4	13.		,289.
	Leasehold improvements							Ì		
d	Equipment							İ		
	Other			1	8,617.		18,0	50.		567.
	. Add lines 1a through 1e (Column (d) must e	equal Form 990. Part	X. colur						407	,759.

	AMERICA LOCA	AL UNION NO.	1243	92-0013107	Page 3
Part VII Investments - Other Securities.		-		<del></del>	
Complete if the organization answered "Yes"	on Form 990, Part IV, II	ne 11b. See Form 990,	Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation. Cost or	r end-of-year market va	alue
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other			·		
(A)					
(B)					_
(C)					
(D)					
(E)					
(F)	<del> </del>	_			
(G)				<del></del> _	
(H)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	J				
Part VIII Investments - Program Related.					
Complete if the organization answered "Yes"		ne 11c. See Form 990,	Part X, line 13		
(a) Description of investment	(b) Book value	(c) Method of V	aluation. Cost or	r end-of-year market v	aiue
				<del></del>	
(2)					
(3)					
(4)					<del></del>
(5)	-,				
(6)					
(7)	·				
(8)	<del> </del>	-		·	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)					
Part IX Other Assets.			<del></del>	<del></del>	
Complete if the organization answered "Yes"	on Form 990 Part IV II	ne 11d. See Form 990	Part X line 15		
	Description	no 114 CCC 1 Gill 550,	Tarra, into 10	(b) Book val	ue .
(1)		<del> </del>		(-,	
(2)	· · · · · · · · · · · · · · · · · · ·	-			
(3)		. • •			
(4)					
(5)		· · · · · · · · · · · · · · · · · · ·		,	
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities.	ne_15.)				
Complete if the organization answered "Yes"	on Form 990. Part IV li	ne 11e or 11f. See Forn	n 990, Part X. lin	e 25.	
1. (a) Description of liability		(b) Book value	, , a, , , , , , , , , , , , , , ,		
(1) Federal income taxes					
(2) WITHHELD BENEFITS		26.			
(3)	*				
(4)	,				

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

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

(5) (6) (7) (8) UNITED BROTHERHOOD OF CARPENTERS AND JOINERS OF AMERICA LOCAL UNION NO. 1243

		leçonciliation of Revenue per Audited Financial Stateme	nts with	nevenue per m			
		omplete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total rev	enue, gains, and other support per audited financial statements			1	2	<u> 25,607.</u>
2	Amounts	s included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unre	alized gains (losses) on investments	2a				
b	Donated	services and use of facilities	2b				
C	Recover	es of prior year grants	2c				
d	Other (D	escribe in Part XIII)	2d	8,016.			
e	Add line	s 2a through 2d			2e		$\frac{8,016.}{17,591.}$
3	Subtract	line 2e from line 1			3	2	<u>17,591.</u>
4	Amounts	s included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investme	ent expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (D	escribe in Part XIII.)	4b				
_		s 4a and 4b			4c		0.
		enue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	. 107.1		_5_		17,591.
Par		leconciliation of Expenses per Audited Financial Stateme	ents With	n Expenses per	Retu	m.	
	C	omplete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total exp	penses and losses per audited financial statements			1	1	<u>88,490.</u>
2		s included on line 1 but not on Form 990, Part IX, line 25	1 1				
а	Donated	services and use of facilities	2a				
þ	Prior year	r adjustments	2b				
С	Other los	sses	2c				
d	Other (D	escribe in Part XIII )	2d	9,500.			
е	Add line	s 2a through 2d			2e		9,500.
3	Subtract	line 2e from line 1			3	1	78,990.
4		s included on Form 990, Part IX, line 25, but not on line 1	1 1				
		ent expenses not included on Form 990, Part VIII, line 7b	4a				
	,	escribe in Part XIII.)	4b				
_		s 4a and 4b			4c		0.
		penses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	1	78,990.
		supplemental Information.		<u></u> -			
		scriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part	•	•	4, Part	X, line 2, l	Part XI,
lines :	2d and 4	o, and Part XII, lines 2d and 4b Also complete this part to provide any addi	tional inforr	nation			
			_				•
							•
PAR	RT XI	, LINE 2D - OTHER ADJUSTMENTS:					
	•						
	T XI						8,016.
	•					-	8,016.
	•						8,016.
PAC	INC	OME					8,016.
PAC	INC						8,016.
PAC	C INC	OME I, LINE 2D - OTHER ADJUSTMENTS:					
PAC	C INC	OME					8,016. 9,500.
PAC	C INC	OME I, LINE 2D - OTHER ADJUSTMENTS:					
PAC	C INC	OME I, LINE 2D - OTHER ADJUSTMENTS:			-		
PAC	C INC	OME I, LINE 2D - OTHER ADJUSTMENTS:		,	-		
PAC	C INC	OME I, LINE 2D - OTHER ADJUSTMENTS:					
PAC	C INC	OME I, LINE 2D - OTHER ADJUSTMENTS:					
PAC	C INC	OME I, LINE 2D - OTHER ADJUSTMENTS:					
PAC	C INC	OME I, LINE 2D - OTHER ADJUSTMENTS:					
PAC	C INC	OME I, LINE 2D - OTHER ADJUSTMENTS:					
PAC	C INC	OME I, LINE 2D - OTHER ADJUSTMENTS:					
PAC	C INC	OME I, LINE 2D - OTHER ADJUSTMENTS:					

Schedule D (Form 990) 2015

92-0013107 Page 4

### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Open to Public

OMB No 1545-0047

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

Inspection

Name of the organization

UNITED BROTHERHOOD OF CARPENTERS AND JOINERS OF AMERICA LOCAL UNION NO. 1243

**Employer identification number** 92-0013107

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