

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2018
Open to Public Inspection

A For the **2019** calendar year, or tax year beginning **07-01-2018**, and ending **06-30-2019**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
UNITED ASSOCIATION OF JOURNEYMEN & APPRENTICES OF THE PLUMBING & PIPE

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
THREE PARK PLACE

City or town, state or province, country, and ZIP or foreign postal code
ANNAPOLIS, MD 21401

D Employer identification number
53-0159020

E Telephone number
(410) 269-2000

G Gross receipts \$ 187,112,988

F Name and address of principal officer:
PATRICK KELLETT
3 PARK PLACE
ANNAPOLIS, MD 21401

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) (5) ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ UA.ORG

K Form of organization: Corporation Trust Association Other ▶
INTERNATIONAL LABOR UNION

L Year of formation: 1889

M State of legal domicile:
MD

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
LABOR ORGANIZATION GENERAL OFFICE

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	7
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	0
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	132
6 Total number of volunteers (estimate if necessary)	6	0
7a 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

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	0	0
9 Program service revenue (Part VIII, line 2g)	97,843,761	102,581,556
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,663,760	5,211,475
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	5,192,351	9,340,753
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	110,699,872	117,133,784

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	5,814,923	8,112,663
14 Benefits paid to or for members (Part IX, column (A), line 4)	10,653,120	10,704,493
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	35,255,322	35,261,575
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	31,634,514	41,899,455
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	83,357,879	95,978,186
19 Revenue less expenses. Subtract line 18 from line 12	27,341,993	21,155,598

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	270,076,009	323,131,598
21 Total liabilities (Part X, line 26)	21,202,968	15,505,358
22 Net assets or fund balances. Subtract line 21 from line 20	248,873,041	307,626,240

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here
Signature of officer: *****
Date: 2020-07-10
PATRICK KELLETT GENERAL SECRETARY-TREASURER
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name: _____ Preparer's signature: _____ Date: 2020-07-10
Check if self-employed PTIN: P01236267
Firm's name: ▶ CALIBRE CPA GROUP PLLC Firm's EIN: ▶ 47-0900880
Firm's address: ▶ 7501 WISCONSIN AVENUE
BETHESDA, MD 20814 Phone no. (202) 331-9880

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

PROVIDING SERVICES AND BENEFITS TO MEMBERS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 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.

4a (Code:) (Expenses \$ including grants of \$) (Revenue \$)
See Additional Data

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 22 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 23 through 38 regarding compensation, bond issues, escrow accounts, 501(c)(3) organizations, and other IRS filings.

Part 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 []

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

<p>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</p>	2a	132			
<p>b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</p>	2b		Yes		
<p>3a Did the organization have unrelated business gross income of \$1,000 or more during the year?</p>	3a			No	
<p>b If "Yes," has it filed a Form 990-T for this year?<i>If "No" to line 3b, provide an explanation in Schedule O</i></p>	3b				
<p>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)?</p>	4a		Yes		
<p>b If "Yes," enter the name of the foreign country: ▶CA See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).</p>					
<p>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</p>	5a			No	
<p>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</p>	5b			No	
<p>c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?</p>	5c				
<p>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?</p>	6a			No	
<p>b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</p>	6b				
7 Organizations that may receive deductible contributions under section 170(c).					
<p>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?</p>	7a				
<p>b If "Yes," did the organization notify the donor of the value of the goods or services provided?</p>	7b				
<p>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</p>	7c				
<p>d If "Yes," indicate the number of Forms 8282 filed during the year</p>	7d				
<p>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p>	7e				
<p>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</p>	7f				
<p>g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</p>	7g				
<p>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</p>	7h				
<p>8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?</p>	8				
<p>9a Did the sponsoring organization make any taxable distributions under section 4966?</p>	9a				
<p>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</p>	9b				
10 Section 501(c)(7) organizations. Enter:					
<p>a Initiation fees and capital contributions included on Part VIII, line 12</p>	10a				
<p>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</p>	10b				
11 Section 501(c)(12) organizations. Enter:					
<p>a Gross income from members or shareholders</p>	11a				
<p>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)</p>	11b				
<p>12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</p>	12a				
<p>b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.</p>	12b				
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
<p>a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.</p>	13a				
<p>b 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</p>	13b				
<p>c Enter the amount of reserves on hand</p>	13c				
<p>14a Did the organization receive any payments for indoor tanning services during the tax year?</p>	14a			No	
<p>b If "Yes," has it filed a Form 720 to report these payments?<i>If "No," provide an explanation in Schedule O</i></p>	14b				
<p>15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N</p>	15			No	
<p>16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O</p>	16			No	

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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

Section 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 body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
1b	Enter the number of voting members included in line 1a, above, who are independent		
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?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?	Yes	
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?	Yes	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
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		No

Section 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?	Yes	
10b	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?	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		No
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done		
13	Did the organization have a written whistleblower policy?		No
14	Did the organization have a written document retention and destruction policy?	Yes	
15a	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?		No
15b	The organization's CEO, Executive Director, or top management official		No
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	Yes	
16b	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 exempt status with respect to such arrangements?	Yes	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 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: PATRICK KELLETT 3 PARK PLACE ANNAPOLIS, MD 21401 (410) 269-2000	

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

1b Sub-Total									
1c Total from continuation sheets to Part VII, Section A									
1d Total (add lines 1b and 1c)						13,032,304	0	4,740,675	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 47

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

Section B. Independent Contractors

1 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
O'DONOGHUE & O'DONOGHUE 5301 WISCONSIN AVENUE NW WASHINGTON, DC 20016	LEGAL SERVICES	3,849,836
KELLY PRESS INC 1701 CABIN BRANCH ROAD CHEVERLY, MD 20785	PRINTING SERVICES	1,968,493
BUCH CONSTRUCTION INC 11292 BUCH WAY LAUREL, MD 20725	BUILDING RENOVATIONS	991,199
PRINT MANAGEMENT INC 36523 MOUNTVILLE ROAD MIDDLEBURG, VA 20117	EDITORIAL SERVICES	934,594
VISION TECHNOLOGY SERVICES PO BOX 678231 DALLAS, TX 75267	IT COMPANY	637,937

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 5

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f				
	g Noncash contributions included in lines 1a - 1f: \$ _____					
h Total. Add lines 1a-1f						
Program Service Revenue			Business Code			
	2a MEMBERSHIP DUES & ASSESSMENTS		900099	102,367,141	102,367,141	
	b SALE OF JEWELRY, DECALS		900099	214,415	214,415	
	c _____					
	d _____					
	e _____					
	f All other program service revenue.					
9 Total. Add lines 2a-2f			102,581,556			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			5,413,452		5,413,452
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real	(ii) Personal			
		1,670,345				
		b Less: rental expenses	0			
		c Rental income or (loss)	1,670,345			
	d Net rental income or (loss)			1,670,345		1,670,345
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
		69,777,227				
		b Less: cost or other basis and sales expenses	69,979,204			
		c Gain or (loss)	-201,977			
	d Net gain or (loss)			-201,977	-201,977	
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
		b Less: direct expenses	b			
c Net income or (loss) from fundraising events						
9a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code				
11a CANADIAN OPERATIONS		900099	5,047,555	5,047,555		
b REIMBURSEMENTS		900099	2,622,853	2,622,853		
c _____						
d All other revenue						
e Total. Add lines 11a-11d			7,670,408			
12 Total revenue. See Instructions.			117,133,784	110,049,987	0	

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	7,662,333			
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	450,330			
4 Benefits paid to or for members	10,704,493			
5 Compensation of current officers, directors, trustees, and key employees	15,955,152			
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	9,820,788			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	2,868,316			
9 Other employee benefits	5,555,896			
10 Payroll taxes	1,061,423			
11 Fees for services (non-employees):				
a Management	144,584			
b Legal	4,113,216			
c Accounting	280,596			
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	592,004			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,564,342			
12 Advertising and promotion	2,997,417			
13 Office expenses	1,429,036			
14 Information technology	936,229			
15 Royalties				
16 Occupancy	1,561,881			
17 Travel	2,206,304			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,091,073			
20 Interest	908,121			
21 Payments to affiliates	3,989,467			
22 Depreciation, depletion, and amortization	1,275,620			
23 Insurance	224,994			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a DONATIONS	5,913,050			
b CANADIAN OPERATIONS	4,811,026			
c UA JOURNAL	3,296,442			
d ORGANIZING EXPENSES	717,798			
e All other expenses	1,846,255			
25 Total functional expenses. Add lines 1 through 24e	95,978,186			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	250	1	250
	2 Savings and temporary cash investments	52,283,547	2	93,272,848
	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 Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	4,440,109	7	4,999,971
	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	55,532,674		
	b Less: accumulated depreciation	12,670,358		
	11 Investments—publicly traded securities	152,445,300	11	152,753,612
	12 Investments—other securities. See Part IV, line 11	19,412,935	12	29,231,448
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	18,971	15	11,153
16 Total assets. Add lines 1 through 15 (must equal line 34)	270,076,009	16	323,131,598	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	20,080,546	23	15,351,833
	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 Schedule D	1,122,422	25	153,525
	26 Total liabilities. Add lines 17 through 25	21,202,968	26	15,505,358
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	248,873,041	30	307,626,240
	31 Paid-in or capital surplus, or land, building or equipment fund	0	31	0
	32 Retained earnings, endowment, accumulated income, or other funds	0	32	0
33 Total net assets or fund balances	248,873,041	33	307,626,240	
34 Total liabilities and net assets/fund balances	270,076,009	34	323,131,598	

Part 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	117,133,784
2	Total expenses (must equal Part IX, column (A), line 25)	2	95,978,186
3	Revenue less expenses. Subtract line 2 from line 1	3	21,155,598
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	248,873,041
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	37,597,601
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	307,626,240

Part XII Financial Statements and Reporting

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: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 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 Act and OMB Circular A-133?
- 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.

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 53-0159020

Name: UNITED ASSOCIATION OF JOURNEYMEN &
APPRENTICES OF THE PLUMBING & PIPE

Form 990 (2018)

Form 990, Part III, Line 4a:

PROVIDING SERVICES AND BENEFITS TO MEMBERS

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MARK MCMANUS GENERAL PRESIDENT	40.00			X				450,212	0	166,745
PATRICK KELLETT GENERAL SECY TREASURER	40.00			X				396,799	0	149,055
MICHAEL PLEASANT ASST GENERAL PRESIDENT	40.00			X				397,137	0	149,095
JAMES MOSS EXECUTIVE VICE PRESIDENT	40.00			X				354,271	0	134,192
MARK BUSS ADMINISTRATIVE ASSISTANT	40.00			X				335,733	0	103,075
BRADLEY KARBOWSKY ADMINISTRATIVE ASSISTANT	40.00			X				321,720	0	124,722
CHRIS HASLINGER ADMINISTRATIVE ASSISTANT	40.00			X				302,078	0	119,378
STEVE MORRISON DIR CANADIAN AFFAIRS	40.00			X				361,240	0	103,662
TERRENCE SNOOKS ADMIN ASST/CANADA	40.00			X				269,022	0	75,074
JAMES MACDONALD ADMIN ASST/CANADA	40.00			X				323,094	0	91,388

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID BARNETT DIR PIPELINE & GAS DISTRI	40.00			X				304,207	0	119,339
THOMAS BIGLEY DIR PLUMBING SVCS	40.00			X				306,207	0	119,378
VIRGIL BOONE DIR TRADE JURISDICTION	40.00			X				318,495	0	123,102
ROBERT LAMB DIR INFORMATION TECHNOLOGY	40.00			X				268,914	0	108,042
BRETT MCCOY DIR METAL TRADES DEPT	40.00			X				321,959	0	127,676
MICHAEL MULVANEY DIE ENERGY & INFRASTRUCTURE	40.00			X				306,187	0	119,378
MARTIN NASEEF DIR HVACR SERVICE	40.00			X				307,215	0	119,378
JAMES TUCKER DIR OF ORGANIZING	40.00			X				317,703	0	123,102
KENNETH BROADBENT VICE PRESIDENT	40.00			X				128,598	0	32,052
STEVEN BRETTLOW VICE PRESIDENT	40.00			X				115,375	0	34,997

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PATRICK DOLAN VICE PRESIDENT	40.00			X				128,621	0	34,462
DANNY HENDRIX VICE PRESIDENT	40.00			X				133,734	0	35,248
STANLEY SMITH VICE PRESIDENT	40.00			X				109,250	0	30,835
LANCE ALBIN INTL REP	40.00			X				269,302	0	108,042
RICHARD ALLEN INTL REP	40.00			X				269,398	0	104,942
SHAWN BROADRICK INTL REP	40.00			X				269,398	0	108,042
KEVIN CARDEN INTL REP	40.00			X				269,638	0	108,042
DAVID DONATO INTL REP	40.00			X				269,914	0	108,042
DARREN JONES INTL REP	40.00			X				269,302	0	108,002
WILLIAM MEYERS JR INTL REP	40.00			X				269,914	0	18,042

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ROGER MORGAN INTL REP	40.00			X				269,638	0	108,042
JOHN MURPHY INTL REP	40.00			X				269,122	0	108,042
BRUCE MYLES INTL REP	40.00			X				269,022	0	75,074
MICHAEL O'MARA INTL REP	40.00			X				266,987	0	108,002
RICHARD OLIVER INTL REP	40.00			X				269,914	0	108,042
KENNY RUGGLES INTL REP	40.00			X				269,638	0	108,042
GREG SAYLES INTL REP	40.00			X				269,914	0	108,042
RUSSELL SHELTON INTL REP	40.00			X				269,302	0	108,042
SCOTT SMITH INTL REP	40.00			X				269,914	0	108,042
KURT STEENHOEK INTL REP	40.00			X				269,122	0	108,042

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHARLES WATTS INTL REP	40.00			X				270,646	0	108,042
HEIKO WIECHERN INTL REP	40.00			X				269,022	0	74,683
LARRY BULMAN SPECIAL REPRESENTATIVE	40.00					X		269,388	0	108,042
PHILLIP MARTIN SPECIAL REPRESENTATIVE	40.00					X		269,723	0	107,755
JOSEPH ROHRER SPECIAL REPRESENTATIVE	40.00					X		269,398	0	108,042
MIKE MIKICH SPECIAL REPRESENTATIVE	40.00					X		257,895	0	105,096
LARRY SLANEY SPECIAL REPRESENTATIVE	40.00					X		269,022	0	75,074

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.
▶Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018
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) organizations: Complete Part III.

Name of the organization UNITED ASSOCIATION OF JOURNEYMEN & APPRENTICES OF THE PLUMBING & PIPE	Employer identification number 53-0159020
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")

2 Political campaign activity expenditures (see instructions) ▶ \$ 5,053,550

3 Volunteer hours for political campaign activities (see instructions)

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No

4a Was a correction made? Yes No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b..... ▶ \$ _____

4 Did the filing organization file **Form 1120-POL** for this year? Yes No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1 See Additional Data Table				
2				
3				
4				
5				
6				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(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					

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 of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
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?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1 Yes	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	No
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	No

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a	
a Current year	2b	
b Carryover from last year	2c	
c Total	3	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	4	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	5	
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 group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
PART I-A, LINE 1:	PROVIDED CONTRIBUTIONS TO FEDERAL AND NON-FEDERAL CANDIDATES THROUGHOUT THE UNITED STATES.

Additional Data**Software ID:****Software Version:****EIN:** 53-0159020**Name:** UNITED ASSOCIATION OF JOURNEYMEN &
APPRENTICES OF THE PLUMBING & PIPE**Form 990, Schedule C, Part 1-C, Line 5**

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
21ST CENTURY FUND	606 TOWNSEND STREET LANSING, MI 48933		30000	
ANDREA STEWART COUSINS	28 WELLS AVENUE YONKERS, NY 10701		7000	
BLUE GREEN ALLIANCE	2701 UNIVERSITY AVENUE SE MINNEAPOLIS, MN 55414		100000	
BOLD COLORADO	512 CLAYTON STREET DENVER, CO 80206		10000	
BUILD A BETTER MICHIGAN	PO BOX 15056 LANSING, MI 48901		50000	
COLORADANS FOR FAIRNESS	PO BOX 102766 DENVER, CO 80205		15000	
DAVID CARLUCCI FOR NEW YORK	PO BOX 833 NYACK, NY 10954		7000	
DEFENDING MAIN STREET	325 7TH ST NW WASHINGTON, DC 20004		300000	
DEMOCRATIC ASSOC OF SECRETARIES	1414 K STREET SACRAMENTO, CA 95814		50000	
DEMOCRATIC LEGISLATIVE CAMPAIGN	1225 I ST NW WASHINGTON, DC 20005		100000	
DEMOCRATIC PARTY OF GEORGIA	501 PULLIAM ST ATLANTA, GA 30312		200000	
DEMOCRATIC GOVERNORS ASSOCIATION	1225 I ST NW WASHINGTON, DC 20005		211800	
DIANE SAVINO NY	36 RICHMOND TERRACE STATEN ISLAND, NY 10301		7000	
EDWARD KENNEDY INSTITUTE	210 MORISSEY BLVD BOSTON, MA 02125		400000	
FAIR FIGHT PAC	1270 CAROLINE ST NE ATLANTA, GA 30307		100000	
FAYETTE COUNTY DEMOCRATIC COMMITTEE	72 EAST FAYETTE ST UNIONTOWN, PA 15401		5000	
FORWARD FLORIDA	1427 PIEDMONT DR TALLAHASSEE, FL 32308		100000	
GREATER WISCONSIN COMMITTEE	PO BOX 861 MADISON, WI 53701		50000	
HOGAN RUTHERFORD INAUGURAL	100 STATE CIRCLE ANNAPOLIS, MD 21401		25000	
HOUSE MAJORITY PAC	100 13TH STREET WASHINGTON, DC 20005		250000	
JEFFREY KLEIN NY	1250 WATERS PLACE BRONX, NY 70461		7000	
JESSE HAMILTON NY	1669 BEDFORD AVENUE BROOKLYN, NY 11225		7000	
JIM HOOD FOR GOVERNOR	PO BOX 16647 JACKSON, MS 39236		100000	
JOSE PERALTA NY	32-37 JUNCTION BLVD EAST ELMHURST, NY 11369		7000	
KENTUCKY FAMILY VALUES	642 SOUTH 4TH ST LOUISVILLE, KY 40202		150000	
MAINE HOUSE DEMOCRATIC	320 WATER STREET AUGUSTA, ME 04338		30000	
MARYLAND REPUBLICAN PARTY	69 FRANKLIN STREET ANNAPOLIS, MD 21401		165000	
MARISOL ALCANTARA NY	5030 BROADWAY NEW YORK, NY 10034		7000	
MARYLAND STATE PIPE TRADES	5891 ALLENTOWN ROAD CAMP SPRINGS, MD 20746		112500	
MICHIGAN PIPE TRADES	5500 W PIERSON ROAD FLUSHING, MI 48433		290000	

Form 990, Schedule C, Part 1-C, Line 5

(a)Name	(b)Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
MINNESOTA DFL	PO BOX 75424 ST PAUL, MN 55175		75000	
NEVADA FAMILIES FIRST	1225 I ST NW WASHINGTON, DC 20005		75000	
NEW JERSEY UNITED	12 NORTH STATE ROUTE 17 PARAMUS, NJ 07652		100000	
NEW JERSEY STATE AFL-CIO	106 WEST STATE ST TRENTON, NJ 08608		10000	
OUR COLORADO VALUES	7920 CREST DRIVE LAKEWOOD, CO 80214		10000	
PRIORITIES USA ACTION	1150 18TH ST NW WASHINGTON, DC 20036		300000	
REBUILD USA LLC	PO BOX 35522 WASHINGTON, DC 20036		500000	
REPUBLICAN MAIN STREET	325 7TH ST NW WASHINGTON, DC 20004		35000	
SENATE MAJORITY PAC	700 13TH ST NW WASHINGTON, DC 20005		100000	
SOUTH CENTRAL PIPE TRADES	249 MCKEITHEN DRIVE ALEXANDRIA, LA 71301		101250	
SOUTHWEST PIPE TRADES	2811 S EXPRESSWAY 83 HARLINGEN, TX 78550		175000	
STRONG WISCONSIN	1750 NEW YORK AVENUE NW WASHINGTON, DC 20006		50000	
THE PRIMARY PAC	PO BOX 6331 WASHINGTON, DC 20015		10000	
TONY AVELLA NY	238-50 BELL BLVD BAYSIDE, NY 11361		7000	
UNITE ALASKA FOR WALKER MALLOTT	PO BOX 92113 ANCHORAGE, AK 99509		200000	
VALESKY FOR SENATE	PO BOX 44 CAMILLUS, NY 13031		7000	
VICTORY FOR LOUISIANA	PO BOX 4385 BATON ROUGE, LA 70821		100000	
VOTE FOR HOOSIER VALUES	240 N FIFTH ST COLUMBUS, OH 43215		25000	
WASHINGTON STATE DEMOCRATIC ASSOC	615 2ND AVENUE SEATTLE, WA 98194		10000	
WE ARE MISSOURI	227 JEFFERSON STREET JEFFERSON CITY, MO 65101		100000	
WISCONSIN PIPE TRADES ASSOCIATION	11175 W PARKLAND AVENUE MILWAUKEE, WI 53223		125000	
WOMENS CONGRESSIONAL POLICY INSTITUTE	409 12TH ST NW WASHINGTON, DC 20024		5000	
WASHINGTON STATE ASSOCIATION	7030 TACOMA MALL BLVD TACOMA, WA 98409		40000	

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047
2018
Open to Public Inspection

▶ **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.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

Name of the organization
UNITED ASSOCIATION OF JOURNEYMEN & APPRENTICES OF THE PLUMBING & PIPE

Employer identification number
53-0159020

Part I 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
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 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? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 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 an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	2a
b 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 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 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 ▶ \$ _____

8 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)? Yes No

9 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 ▶ \$ _____

2 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:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|---------------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		11,590,442		11,590,442
b Buildings		41,313,652	10,480,900	30,832,752
c Leasehold improvements				
d Equipment		1,397,118	1,197,285	199,833
e Other		1,231,462	992,173	239,289
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				42,862,316

Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) AFL-CIO HIT	899,413	C
(B) WTC CIF SMALL CAP 2000 FUND	18,617,776	C
(C) BELL INTERNATIONAL TRUST	9,714,259	C
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	29,231,448	

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
PAYROLL DEDUCTIONS	153,525
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	153,525

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

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.

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
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		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

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.

Return Reference	Explanation	
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Part XIII **Supplemental Information (continued)**

Return Reference	Explanation
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**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2018
Open to Public Inspection

Name of the organization
UNITED ASSOCIATION OF JOURNEYMEN &
APPRENTICES OF THE PLUMBING & PIPE

Employer identification number
53-0159020

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
NORTH AMERICA	1	12	PROVIDING SERVICES AND BENEFITS TO MEMBERS	N/A	3,884,503
3a Sub-total	1	12			3,884,503
b Total from continuation sheets to Part I					0
c Totals (add lines 3a and 3b)	1	12			3,884,503

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	ORGANIZING GRANT	450,330	CHECK			BOOK

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

3 Enter total number of other organizations or entities ▶ _____

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

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

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2:	THE GRANTEES PROVIDE THE ORGANIZATION WITH WEEKLY UPDATES OF THEIR EXPENDITURES. THE ORGANIZATION MAINTAINS AND MONITORS THE GRANTEES EXPENDITURES AND THE AMOUNTS OF THE GRANTS.

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

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

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

Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization UNITED ASSOCIATION OF JOURNEYMEN & APPRENTICES OF THE PLUMBING & PIPE

Employer identification number 53-0159020

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3 Enter total number of other organizations listed in the line 1 table.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	THE GRANTEES PROVIDE THE ORGANIZATION WITH WEEKLY UPDATES OF THEIR EXPENDITURES. THE ORGANIZATION MAINTAINS AND MONITORS THE GRANTEES EXPENDITURES AND THE AMOUNTS OF THE GRANTS.

Additional Data

Software ID:
Software Version:
EIN: 53-0159020
Name: UNITED ASSOCIATION OF JOURNEYMEN &
APPRENTICES OF THE PLUMBING & PIPE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FLORIDA PIPE TRADES 13185 NW 45TH AVENUE OPA LOCKA, FL 33054	59-6209635	5	350,000		BOOK		ORGANIZING GRANT
GULF COAST DISTRICT COUNCIL #1 1237 PASS ROAD GULFPORT, MS 39501	14-1876884	5	273,333		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GEORGIACAROLINAS PIPE TRADES 2566 OSCAR JOHNSON DR N CHARLESTON, SC 29405	58-6054909	5	301,667		BOOK		ORGANIZING GRANT
ILLINOIS PIPE TRADES 45 NORTH OGDEN AVENUE CHICAGO, IL 60607	36-6080375	5	310,000		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INDIANA PIPE TRADES 2930 W LUDWIG ROAD FORT WAYNE, IN 46818	35-0312151	5	237,500		BOOK		ORGANIZING GRANT
MARYLAND PIPE TRADES 7050 OAKLAND MILLS ROAD COLUMBIA, MD 21046	52-2081390	5	257,500		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MICHIGAN PIPE TRADES 5500 W PIERSON ROAD FLUSHING, MI 48433	23-7352117	5	228,333		BOOK		ORGANIZING GRANT
MINNESOTA PIPE TRADES 4402 AIRPARK BLVD DULUTH, MN 55811	41-6033705	5	487,500		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW ENGLAND PIPE TRADES 1250 E MAIN STREET MERIDEN, CT 06450	22-2921877	5	342,917		BOOK		ORGANIZING GRANT
OHIO STATE ASSOCIATION 947 GOODALE BOULEVARD COLUMBUS, OH 43212	31-1270975	5	250,000		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TENNESSEE PIPE TRADES 3746 JACKSON AVENUE MEMPHIS, TN 38108	62-1538616	5	61,000		BOOK		ORGANIZING GRANT
KENTUCKY PIPE TRADES 1332 BROADWAY PADUCAH, KY 42001	31-1542217	5	308,333		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON STATE ASSOCIATION 7030 TACOMA MALL BLVD TACOMA, WA 98409	91-0462121	5	70,833		BOOK		ORGANIZING GRANT
WEST VIRGINIA PIPE TRADES 177 29TH STREET WHEELING, WV 26003	55-0582055	5	91,667		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WISCONSIN PIPE TRADES 11175 WEST PARKLAND AVENUE MILWAUKEE, WI 53224	39-1606922	5	101,333		BOOK		ORGANIZING GRANT
SOUTH CENTRAL PIPE TRADES 1211 RAPIDES AVENUE ALEXANDRIA, LA 71301	64-0889191	5	518,333		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTHWEST PIPE TRADES 2811 S HWY 83 HARLINGEN, TX 78550	20-3465106	5	358,333		BOOK		ORGANIZING GRANT
ROCKY MOUNTAIN PIPE TRADES 6350 N BROADWAY DENVER, CO 80216	27-4198952	5	425,000		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UA DISTRICT COUNCIL #16 501 SHATTO PLACE LOS ANGELES, CA 90020	95-1664056	5	248,333		BOOK		ORGANIZING GRANT
UA LOCAL UNION 9 2 IRON ORE ROAD ENGLISHTOWN, NJ 07726	22-0583720	5	75,000		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UA LOCAL UNION 12 1240 MASSACHUSETTS AVENUE BOSTON, MA 02125	04-1106780	5	152,500		BOOK		ORGANIZING GRANT
UA LOCAL UNION 8 5950 MANCHESTER TRAFFICWAY KANSAS CITY, MO 64130	44-0393595	5	44,167		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UA LOCAL UNION 120 6305 HALLE DRIVE CLEVELAND, OH 44125	34-0553590	5	73,333		BOOK		ORGANIZING GRANT
UA LOCAL UNION 27 1040 MONTOUR W INDUSTRIAL BLVD CORAOPOLIS, PA 15108	25-0849580	5	63,333		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UA LOCAL UNION 51 11 HEMINGWAY DRIVE E PROVIDENCE, RI 02915	06-1475010	5	31,000		BOOK		ORGANIZING GRANT
UA LOCAL UNION 104 168 CHICOPEE STREET CHICOPEE, MA 01013	04-2705589	5	25,500		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UA LOCAL UNION 140 2261 SOUTH REDWOOD ROAD SALT LAKE CITY, UT 84119	20-2498482	5	17,500		BOOK		ORGANIZING GRANT
UA LOCAL UNION 178 2501 WEST GRAND SPRINGFIELD, MO 65802	44-0377546	5	39,167		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UA LOCAL UNION 296 575 N RALSTIN MARTINEZ, ID 83642	82-0198631	5	86,667		BOOK		ORGANIZING GRANT
UA LOCAL UNION 322 534 STATE ROUTE 73 WINSLOW, NJ 08095	21-0538170	5	27,917		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UA LOCAL UNION 354 271 ARMBRUST ROAD YOUNGWOOD, PA 15697	25-1234320	5	91,667		BOOK		ORGANIZING GRANT
UA LOCAL UNION 367 610 W 54TH AVENUE ANCHORAGE, AK 99518	92-0013284	5	62,500		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UA LOCAL UNION 475 136 MT BETHEL ROAD WARREN, NJ 07059	22-1305230	5	32,000		BOOK		ORGANIZING GRANT
UA LOCAL UNION 449 1517 WOODRUFF STREET PITTSBURGH, PA 15220	25-0817615	5	59,167		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UA LOCAL UNION 483 2525 BARRINGTON COURT HAYWARD, CA 94545	94-1011692	5	35,667		BOOK		ORGANIZING GRANT
UA LOCAL UNION 520 7193 JONESTOWN ROAD HARRISBURG, PA 17112	23-1173154	5	50,000		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UA LOCAL UNION 550 46 ROCKLAND STREET BOSTON, MA 02132	04-1859910	5	59,167		BOOK		ORGANIZING GRANT
UA LOCAL UNION 648 456 N ARTHUR POCATELLO, ID 83204	82-0196579	5	108,333		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UA LOCAL UNION 669 7050 OAKLAND MILLS ROAD COLUMBIA, MD 21046	23-7152443	5	291,667		BOOK		ORGANIZING GRANT
UA LOCAL UNION 777 1250 E MAIN STREET MERIDEN, CT 06450	06-1390416	5	90,000		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UA LOCAL UNION 30 317 WASHINGTON ST BILLINGS, MT 59101	81-0201347	5	108,333		BOOK		ORGANIZING GRANT
UA LOCAL UNION 73 705 E SENECA ST OSWEGO, NY 13126	16-1311364	5	50,000		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UA LOCAL UNION 486 8100 SANDPIPER CIRCLE BALTIMORE, MD 21236	52-1908936	5	105,000		BOOK		ORGANIZING GRANT
UA LOCAL UNION 716 21 GABRIEL DRIVE AUGUSTA, ME 04330	04-3390229	5	86,667		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UA LOCAL UNION 281 11900 SOUTH LARAMIE AVE ALSIP, IL 60803	36-1808342		25,000				ORGANIZING GRANT
UA LOCAL UNION 314 8510 HILLCREST ROAD KANSAS CITY, MO 64138	51-0246150	5	36,667		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UA LOCAL UNION 343 401 NEBRASKA STREET VALLEJO, CA 94590	94-0925634	5	125,000		BOOK		ORGANIZING GRANT
UA LOCAL UNION 693 3 GREGORY DRIVE SOUTH BURLINGTON, VT 05403	03-0210219	5	16,667		BOOK		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MINK PIPE TRADES ASSOCIATION 2501 WEST GRAND SPRINGFIELD, MP 65802	43-1826840	5	100,833		BOOK		ORGANIZING GRANT
MID ATLANTIC PIPE TRADES 7050 OAKLAND MILLS ROAD COLUMBIA, MD 21046	83-2785579	5	166,667		BOOK		ORGANIZING GRANT

Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047
2018
Open to Public Inspection

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.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
UNITED ASSOCIATION OF JOURNEYMEN &
APPRENTICES OF THE PLUMBING & PIPE

Employer identification number
53-0159020

Part I 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.		
<input checked="" type="checkbox"/> First-class or charter travel		
<input checked="" type="checkbox"/> Travel for companions		
<input type="checkbox"/> Tax idemnification and gross-up payments		
<input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes in 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 Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2 Yes	
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.		
<input type="checkbox"/> Compensation committee		
<input type="checkbox"/> Independent compensation consultant		
<input type="checkbox"/> Form 990 of other organizations		
<input type="checkbox"/> Written employment contract		
<input type="checkbox"/> Compensation survey or study		
<input checked="" type="checkbox"/> 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	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only 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?	5b	
If "Yes," on 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 nonfixed payments not described in lines 5 and 6? 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	
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

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

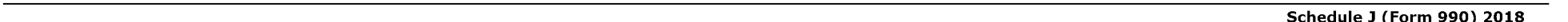
Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 1A	FIRST CLASS TRAVEL IS AUTHORIZED FOR OFFICERS PER THE UA CONSTITUTION. COMPANION TRAVEL IS AUTHORIZED FOR THE GENERAL PRESIDENT PER THE UA CONSTITUTION.



Additional Data

Software ID:
Software Version:
EIN: 53-0159020
Name: UNITED ASSOCIATION OF JOURNEYMEN &
 APPRENTICES OF THE PLUMBING & PIPE

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
MARK MCMANUS GENERAL PRESIDENT	(i)	378,069	0	72,143	0	166,745	616,957	0
	(ii)	0	0	0	0	0	0	0
PATRICK KELLETT GENERAL SECY TREASURER	(i)	323,326	0	73,473	0	149,055	545,854	0
	(ii)	0	0	0	0	0	0	0
MICHAEL PLEASANT ASST GENERAL PRESIDENT	(i)	324,821	0	72,316	0	149,095	546,232	0
	(ii)	0	0	0	0	0	0	0
JAMES MOSS EXECUTIVE VICE PRESIDENT	(i)	276,879	0	77,392	0	134,192	488,463	0
	(ii)	0	0	0	0	0	0	0
MARK BUSS ADMINISTRATIVE ASSISTANT	(i)	260,325	0	75,408	0	103,075	438,808	0
	(ii)	0	0	0	0	0	0	0
BRADLEY KARBOWSKY ADMINISTRATIVE ASSISTANT	(i)	262,328	0	59,392	0	124,722	446,442	0
	(ii)	0	0	0	0	0	0	0
CHRIS HASLINGER ADMINISTRATIVE ASSISTANT	(i)	251,791	0	50,287	0	119,378	421,456	0
	(ii)	0	0	0	0	0	0	0
STEVE MORRISON DIR CANADIAN AFFAIRS	(i)	309,140	0	52,100	0	103,662	464,902	0
	(ii)	0	0	0	0	0	0	0
TERRENCE SNOOKS ADMIN ASST/CANADA	(i)	216,922	0	52,100	0	75,074	344,096	0
	(ii)	0	0	0	0	0	0	0
JAMES MACDONALD ADMIN ASST/CANADA	(i)	270,994	0	52,100	0	91,388	414,482	0
	(ii)	0	0	0	0	0	0	0
DAVID BARNETT DIR PIPELINE & GAS DISTRI	(i)	229,091	0	75,116	0	119,339	423,546	0
	(ii)	0	0	0	0	0	0	0
THOMAS BIGLEY DIR PLUMBING SVCS	(i)	229,567	0	76,640	0	119,378	425,585	0
	(ii)	0	0	0	0	0	0	0
VIRGIL BOONE DIR TRADE JURISDICTION	(i)	248,092	0	70,403	0	123,102	441,597	0
	(ii)	0	0	0	0	0	0	0
ROBERT LAMB DIR INFORMATION TECHNOLOGY	(i)	217,022	0	51,892	0	108,042	376,956	0
	(ii)	0	0	0	0	0	0	0
BRETT MCCOY DIR METAL TRADES DEPT	(i)	269,959	0	52,000	0	127,676	449,635	0
	(ii)	0	0	0	0	0	0	0
MICHAEL MULVANEY DIE ENERGY & INFRASTRUCTURE	(i)	253,591	0	52,596	0	119,378	425,565	0
	(ii)	0	0	0	0	0	0	0
MARTIN NASEEF DIR HVACR SERVICE	(i)	229,091	0	78,124	0	119,378	426,593	0
	(ii)	0	0	0	0	0	0	0
JAMES TUCKER DIR OF ORGANIZING	(i)	255,459	0	62,244	0	123,102	440,805	0
	(ii)	0	0	0	0	0	0	0
KENNETH BROADBENT VICE PRESIDENT	(i)	103,821	0	24,777	0	32,052	160,650	0
	(ii)	0	0	0	0	0	0	0
STEVEN BREITLOW VICE PRESIDENT	(i)	99,319	0	16,056	0	34,997	150,372	0
	(ii)	0	0	0	0	0	0	0

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
PATRICK DOLAN VICE PRESIDENT	(i)	111,445	0	17,176	0	34,462	163,083	0
	(ii)	0	0	0	0	0	0	0
DANNY HENDRIX VICE PRESIDENT	(i)	114,218	0	19,516	0	35,248	168,982	0
	(ii)	0	0	0	0	0	0	0
LANCE ALBIN INTL REP	(i)	198,522	0	70,780	0	108,042	377,344	0
	(ii)	0	0	0	0	0	0	0
RICHARD ALLEN INTL REP	(i)	208,341	0	61,057	0	104,942	374,340	0
	(ii)	0	0	0	0	0	0	0
SHAWN BROADRICK INTL REP	(i)	199,192	0	70,206	0	108,042	377,440	0
	(ii)	0	0	0	0	0	0	0
KEVIN CARDEN INTL REP	(i)	192,522	0	77,116	0	108,042	377,680	0
	(ii)	0	0	0	0	0	0	0
DAVID DONATO INTL REP	(i)	201,437	0	68,477	0	108,042	377,956	0
	(ii)	0	0	0	0	0	0	0
DARREN JONES INTL REP	(i)	198,706	0	70,596	0	108,002	377,304	0
	(ii)	0	0	0	0	0	0	0
WILLIAM MEYERS JR INTL REP	(i)	208,341	0	61,573	0	18,042	287,956	0
	(ii)	0	0	0	0	0	0	0
ROGER MORGAN INTL REP	(i)	208,341	0	61,297	0	108,042	377,680	0
	(ii)	0	0	0	0	0	0	0
JOHN MURPHY INTL REP	(i)	193,016	0	76,106	0	108,042	377,164	0
	(ii)	0	0	0	0	0	0	0
BRUCE MYLES INTL REP	(i)	216,922	0	52,100	0	75,074	344,096	0
	(ii)	0	0	0	0	0	0	0
MICHAEL O'MARA INTL REP	(i)	189,871	0	77,116	0	108,002	374,989	0
	(ii)	0	0	0	0	0	0	0
RICHARD OLIVER INTL REP	(i)	206,171	0	63,743	0	108,042	377,956	0
	(ii)	0	0	0	0	0	0	0
KENNY RUGGLES INTL REP	(i)	201,500	0	68,138	0	108,042	377,680	0
	(ii)	0	0	0	0	0	0	0
GREG SAYLES INTL REP	(i)	203,022	0	66,892	0	108,042	377,956	0
	(ii)	0	0	0	0	0	0	0
RUSSELL SHELTON INTL REP	(i)	209,690	0	59,612	0	108,042	377,344	0
	(ii)	0	0	0	0	0	0	0
SCOTT SMITH INTL REP	(i)	192,522	0	77,392	0	108,042	377,956	0
	(ii)	0	0	0	0	0	0	0
KURT STEENHOEK INTL REP	(i)	217,022	0	52,100	0	108,042	377,164	0
	(ii)	0	0	0	0	0	0	0
CHARLES WATTS INTL REP	(i)	217,022	0	53,624	0	108,042	378,688	0
	(ii)	0	0	0	0	0	0	0

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
HEIKO WIECHERN INTL REP	(i)	216,922	0	52,100	0	74,683	343,705	0
	(ii)	0	0	0	0	0	0	0
LARRY BULMAN SPECIAL REPRESENTATIVE	(i)	192,522	0	76,866	0	108,042	377,430	0
	(ii)	0	0	0	0	0	0	0
PHILLIP MARTIN SPECIAL REPRESENTATIVE	(i)	207,455	0	62,268	0	107,755	377,478	0
	(ii)	0	0	0	0	0	0	0
JOSEPH ROHRER SPECIAL REPRESENTATIVE	(i)	206,171	0	63,227	0	108,042	377,440	0
	(ii)	0	0	0	0	0	0	0
MIKE MIKICH SPECIAL REPRESENTATIVE	(i)	207,519	0	50,376	0	105,096	362,991	0
	(ii)	0	0	0	0	0	0	0
LARRY SLANEY SPECIAL REPRESENTATIVE	(i)	216,922	0	52,100	0	75,074	344,096	0
	(ii)	0	0	0	0	0	0	0

SCHEDULE O
(Form 990 or 990-EZ)**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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018**Open to Public Inspection**

Department of the Treasury

Name of the organization

UNITED ASSOCIATION OF JOURNEYMEN &
APPRENTICES OF THE PLUMBING & PIPE

Employer identification number

53-0159020

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	INDIVIDUALS BECOME MEMBERS OF THE UNITED ASSOCIATION IN ACCORDANCE WITH A GOVERNING CONSTITUTION AND BY-LAWS. THE UNITED ASSOCIATION'S MEMBERS HAVE THE RIGHTS PROVIDED THEM IN THE CONSTITUTION AND AFFORDED THEM UNDER APPLICABLE LAW.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	DELEGATES TO THE UNITED ASSOCIATION'S CONVENTION ELECT THE MEMBERS OF THE GOVERNING BODY.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	CERTAIN DECISIONS OF THE GOVERNING BODY CAN BE APPEALED AT THE UNITED ASSOCIATION'S CONVENTION.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE GOVERNING BODY OF THE UNITED ASSOCIATION REVIEWED THE 990 PRIOR TO ITS FILING.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S ANNUAL FINANCIAL DISCLOSURE STATEMENT DOL FORM LM-2 IS AVAILABLE FOR PUBLIC INSPECTION AT THE DOL WEBSITE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	OPENING CANADIAN ASSET BALANCES 37,597,601.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C:	THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2018

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
UNITED ASSOCIATION OF JOURNEYMEN &
APPRENTICES OF THE PLUMBING & PIPE

Employer identification number
53-0159020

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) PARK PLACE II TRUST 3 PARK PLACE ANNAPOLIS, MD 21401	BUSINESS TRUST	MD			
(2) UNITED ASSOCIATION MISSISSIPPI LANDING HOLDING COMPANY 3 PARK PLACE ANNAPOLIS, MD 21401 52-2307740	HOLDING COMPANY	MD			

Part II 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) HILLCREST COUNTRY CLUB LIMITED PARTNERSHIP 4600 HILLCREST DRIVE HOLLYWOOD, FL 33021 52-2200343	COUNTRY CLUB	FL						No			No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No
(1) HILLCREST COUNTRY CLUB INC 3 PARK PLACE ANNAPOLIS, MD 21401 52-2199901	REAL ESTATE	MD		C					No

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
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?			
a	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b	Gift, grant, or capital contribution to related organization(s)		No
c	Gift, grant, or capital contribution from related organization(s)		No
d	Loans or loan guarantees to or for related organization(s)	Yes	
e	Loans or loan guarantees by related organization(s)		No
f	Dividends from related organization(s)		No
g	Sale of assets to related organization(s)		No
h	Purchase of assets from related organization(s)		No
i	Exchange of assets with related organization(s)		No
j	Lease of facilities, equipment, or other assets to related organization(s)		No
k	Lease of facilities, equipment, or other assets from related organization(s)		No
l	Performance of services or membership or fundraising solicitations for related organization(s)		No
m	Performance of services or membership or fundraising solicitations by related organization(s)		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		No
o	Sharing of paid employees with related organization(s)		No
p	Reimbursement paid to related organization(s) for expenses		No
q	Reimbursement paid by related organization(s) for expenses		No
r	Other transfer of cash or property to related organization(s)		No
s	Other transfer of cash or property from related organization(s)		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) HILLCREST COUNTRY CLUB LIMITED PARTNERSHIP	D	191,216	DISBURSEMENTS

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

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

Return Reference	Explanation