Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

1	For the 2	2011 calendar year, or tax year beginning 01/01 , 2011, and end	ing 1:	2/31	, 20 11
_	Check if a		ealty Corporat	D Employe	er identification number
٦	Address c				62-1662578
Ī	Name cha	Note that the second of the se	suite	E Telephor	
Ŧ.	Initial retur				615-333-6343
<u> </u>	Terminate	O'bus a hours and a supplier and 7ID and			0.000000
╡				G Gross re	ceipts \$ 317,520
=	Amended		H(a) le this		for affiliates? Yes Vo
	Application	n pending F Name and address of principal officer: MARIA F WIECK 3320 PERIMETER HILL DRIVE, NASHVILLE, TN 37211		a group return ull affiliates in	
			` '		list. (see instructions)
_	Tax-exem		 		
<u>, </u>	Website:			p exemption	
		ganization:	nation: 1996	IN State	of legal domicile: TN
	art I	Summary			
		Briefly describe the organization's mission or most significant activities: TO			
ø	-	THE PACE INDUSTRY UNION MANAGEMENT PENSION FUND, WHICH IS A QUALI	FIED RETIRE	MENT PLA	N UNDER
and	.	SECTION 501 OF THE INTERNAL REVENUE CODE.			
E	.				
Š		Check this box $ ightharpoonup$ if the organization discontinued its operations or dispose	d of more tha		its net assets.
හ හ					8
Activities & Governance		Number of independent voting members of the governing body (Part VI, line 1		. 4	8
Ϋ́	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)		. 5	0
Ç	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 Y	rear .	Current Year
٥	8	Contributions and grants (Part VIII, line 1h)		0	0
Š	9 1	Program service revenue (Part VIII, line 2g)		0	0
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0	0
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		189,886	180,936
		Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		189,886	180,936
	+	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0	0
		Benefits paid to or for members (Part IX, column (A), line 4)	-	0	0
s		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0	0
Expenses	4	Professional fundraising fees (Part IX, column (A), Ilne 11e)		0	0
þe		Total fundraising expenses (Part IX, column (D), line 25) ▶ 0			
Щ		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	THE STATE OF THE S	116,022	115,283
		Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		116,022	
		Revenue less expenses. Subtract line 18 from line 12		73,864	
F 2		Trevenue less expenses, each act line to from line 12	Beginning of C		
Net Assets or	20	Total assets (Part X, line 16)		859,057	784,674
Asse	21	Total liabilities (Part X, line 26)		75,918	70,882
ž.	22	Net assets or fund balances. Subtract line 21 from line 20		783,139	713,792
	art II	Signature Block	_	763,133	713,732
		ties of perjury, I declare that I have examined this return, including accompanying schedules and st	atomonto and to	the best of	my knowledge, and helief it is
tr	ue, correct,	, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any kno	wledge.	my knowledge and belief, it is
_		1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1	1	nlo 2	1201.2
Sid	gn	Signature of officer	<u>_</u>	Date 1/23	12012
	ere	{	•		
,,,	<i>.</i> 10	Trevor England, CFO Type or print name and title			
		Print/Type preparer's name Preparer's signature	Date	1	- PTIN
	aid			Check	□ #
	epare			self-em	holed
U	se Only			rm's EiN ▶	
h 4 -	ny the ID	Firm's address >	<u> I P</u> i	none no.	□Vaa □Na
IVI	ay the IH	S discuss this return with the preparer shown above? (see instructions)	• • • •		Yes No

4d	Other program	services	(Desc	ribe in	Sched	lule O.)
	(Expenses \$		0	includin	g grai	nts of \$

Part	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	!	1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		<u> </u>	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	7	ļ	√
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		V
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		/
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.	174		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	l	17.17.19.U
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	_	1
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		v
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X	11e		7
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	111	1	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	·	√
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	1	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.			<i>'</i>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	15		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	16		√
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	17		√
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18		✓
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		<u>v</u>

Part	V Checklist of Required Schedules (continued)			ugo .
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	✓	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
b b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28a 28b	.0001252	√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>√</u>
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31		√
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	32		√
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	33		✓
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a	✓	✓
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			√
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	35b 36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R.	30		
38	Part VI	37 38	1	✓
			- 000	

Part				_
	Check if Schedule O contains a response to any question in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 2	stálliú,	House in	200
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			En il
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		1.31.3.01.
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		長期	mie"
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			,
	account)?	4a	Hillar S	150111110
b	If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			្សីទី(៤៧) ស៊ីនិយីពីស
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	1972Mahi	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		\ <u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	50		\vdash
	organization solicit any contributions that were not tax deductible?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	1	l
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	Permitti	J. 444, 15-12
d	If "Yes," indicate the number of Forms 8282 filed during the year			Hilina
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?. If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f		
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h	\vdash	-
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		Miles I	i and
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8	mummun	1000
9	Sponsoring organizations maintaining donor advised funds.		History History	
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	-		
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders		landiki.	
a b	Gross income from members or shareholders	-100		J ineta
_	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		1 1993
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		glaafa	110100
а	is the organization licensed to issue qualified health plans in more than one state?	13a		\prod
	Note. See the instructions for additional information the organization must report on Schedule O.			
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			WW
C	Enter the amount of reserves on hand		STORY	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	—	✓
IJ	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b	1	1

Form !	990	(2011)	١
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Part		and	for a	"No"					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	ee ins	struct	ions.					
Socti	Check if Schedule O contains a response to any question in this Part VI	• •		<u>. V</u>					
3600	on A. Governing Body and Management			1					
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 8	120000	Yes	No					
14	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.								
ь	Enter the number of voting members included in line 1a, above, who are independent . 1b 8								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with								
	any other officer, director, trustee, or key employee?	2		Hädlillia?					
3	Did the organization delegate control over management duties customarily performed by or under the direct	-	<u> </u>	+					
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	1	1					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	<u> </u>	1					
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1					
6	Did the organization have members or stockholders?	6		1					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint								
	one or more members of the governing body?	7a		1					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			1					
0	stockholders, or persons other than the governing body?	7b	11773144321784						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а									
b	The governing body?	8a	✓	┿					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	8b	✓	├ -					
the organization's mailing address? If "Yes," provide the names and addresses in Schedule O									
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	9 VA C	ode '	1 🗸					
	, and the state of	<u> </u>	Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		1					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			Ť					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			ÇE Z					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Ì							
13	Did the organization have a written whistleblower policy?	12c	<u> </u>	<u> </u>					
14	Did the organization have a written whistleolower policy?	13	/	├—					
15	Did the process for determining compensation of the following persons include a review and approval by	14	√	heyhosid					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a							
b	Other officers or key employees of the organization	15b		1					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement								
	with a taxable entity during the year?	16a	3134131114	✓					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its		HE 7						
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the								
Socti	organization's exempt status with respect to such arrangements?	16b		<u></u>					
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 Forms 1023 (or 1024 if applicable), 990, and 990-T (Section		-\/0\-						
	available for public inspection. Indicate how you made these available. Check all that apply.	1 9U I (<u>د)(ح)وں</u>	опіу)					
	✓ Own website ☐ Another's website ✓ Upon request								
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict or	f inte	rest r	ooliev					
	and financial statements available to the public during the tax year.		t	Joney,					
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	;						
	organization: ► TREVOR ENGLAND, (615)333-6343								

Form 990 (2011	١	
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

Check this box if neither the organization nor		d ora	aniz	ratic	n c	omne	nes	ted any curror	t officer directs	r ou trustoo
	uny rolato	o org	GI IIZ	(C)	Ompe	1136	Led any curren	l onicer, director	, or trustee.
(A) Name and Title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee) Whighest compension of the promoter of the					n an	(D) Reportable compensation from	(E) Reportable compensation from	
	week (describe hours for related organizations in Schedule O)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
STAN JOHNSON			l							
CHAIRMAN / PRESIDENT	1.0	1						0		_
LISA SILVERMAN	1.0	Ť	\vdash	-	┝		-	 	0	0
DIRECTOR	1.25	1							o	•
DALE OLSON				_						0
SECRETARY	0.50	1		l .				٥	o	0
JON GEENEN			Т	\vdash	┢		┢	-		0
DIRECTOR	0.40	1		ŀ				۱ ،	0	0
GARY BEEVERS					┢		<u> </u>		- 0	
DIRECTOR	1.0	1						۰ ا	o	0
TIM SUDELA								 		
DIRECTOR	0.50	✓						l 0	o	0
JAMES KIDDER										
DIRECTOR	0.25	✓						,	o	0
MARK ENTRINGER										
DIRECTOR	1.5	✓						۰ ا	اه	0
MARIA WIECK										
ADMINISTRATIVE OFFICER	0.25			✓				۰ ا	131,448	30,959
TREVOR ENGLAND									101,71,0	30,555
FINANCIAL OFFICER	0.50			✓				٥	124,626	19,265
									12 1/020	10,200

Part VII	Section A. Officers, Directors, Trust	ees. Kev E	mploy	/889	s. ar	nd H	lighe	st C	omnensated F	mployees (co	ntinued	raye (
	(A)	(B)			(0 Pos	C) ition			(D)	(E)	771111000	(F)
	Name and title	Average hours per week	box, ı	unles	s pe	rson	than of the street is the stre	an	Reportable compensation	Reportable compensation for	mor	Estimated amount of
		(describe hours for related organizations in Schedule	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organization: (W-2/1099-MIS		other compensation from the organization and related
		O)	stee	rustee		č	pensated					organizations
								_				
c To	b-total	VII, Sectio		•			•	>	0	256,0	74	50,224
d To	tal (add lines 1b and 1c)			<u>.</u>		<u></u>		<u> </u>	0	256,0		50,224
rep	tal number of individuals (including but portable compensation from the organi	not limited zation ► 2	to th	ose	list	ed a	above	e) w	ho received me	ore than \$100	,000 of	
3 Dic	the organization list any former of aployee on line 1a? If "Yes," complete s	ficer, direc	tor, o	r tr	uste	98, Wide	key e	emp	oloyee, or high	est compens	ated	Yes No
4 For	r any individual listed on line 1a, is the ganization and related organizations	sum of reparted the	portat an \$1	ole d	com	per	nsatio	n a s,"	nd other comp complete Sch	ensation fror		3 /
5 Dic	lividual	r accrue co	omper	nsat	ion	fror	n any	un			**	4 /
	Independent Contractors	17 763, 0	,onpi	310		-	1001	Or S	uch person	· · · · ·	·	5
1 Co cor yea	mplete this table for your five highest on mpensation from the organization. Repart.	compensation compe	ed inc	lepe on fo	ende or th	ent o	contra	acto ar y	ors that receive rear ending wit	ed more than h or within th	\$100,00 e organ	00 of ization's tax
	(A) Name and business add	ress							(B) Description of se	ervices	Cor	(C) npensation
2 Tot	al number of independent contracto eived more than \$100,000 of compens	rs (includir	ng bu	t no	ot li	imit	ed to	th	ose listed abo	ove) who		

Part	VIII	Statement of Reve	nue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d	Federated campaigns Membership dues Fundraising events Related organizations Government grants (confi	1b 1c 1d					
Contributions and Other Sin	e f g h	All other contributions, gi and similar amounts not inc Noncash contributions includ Total. Add lines 1a–11	fts, grants, luded above 1f ed in lines 1a-1f: \$					
Program Service Revenue	2a b c			Business Code				
Program S	e f g	All other program sen Total. Add lines 2a-2i Investment income and other similar amo	rice revenue . f (including divide		0			
	4 5 6a	Income from investment		ond proceeds				
	b c d 7a	Less: rental expenses Rental income or (loss) Net rental income or (Gross amount from sales of	136,584 180,936	0 0 	180,936	180,936	0	0
;	b c d	assets other than inventory Less: cost or other basis and sales expenses . Gain or (loss) . Net gain or (loss)	0					
Other Revenue	8a	Gross income from fuevents (not including \$ of contributions reported See Part IV, line 18	ndraising					
Othe	ь с 9а	Less: direct expenses Net income or (loss) fi Gross income from ga See Part IV, line 19	bb rom fundraising ming activities.					
	10a	Less: direct expenses Net income or (loss) for Gross sales of in returns and allowance Less: cost of goods s	rom gaming acti ventory, less es a					
	11a b	Net income or (loss) f	rom sales of invelopment	entory Dentory Dentory Dentory Dentory Dentory Dentory Dentory . Den				
	c d e 12	All other revenue . Total. Add lines 11a- Total revenue. See in			180 936			

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) but are not required to complete columns (B), (C), and (D).

Do no	Check if Schedule O contains a respon of include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	
8b, 9l	b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and			F	
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22			(₂ .9€)	- 18 m
3	Grants and other assistance to governments,			ž i	
	organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members				
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 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				· · · · · · · · · · · · · · · · · · ·
а	Management				
b	Legal	770			
C	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		ja i j		
f	Investment management fees				
g	Other	143			
12	Advertising and promotion				· · · · · · · · · · · · · · · · · · ·
13 14	Office expenses	489			
15	Royalties				
16	Occupancy				
17	Travel				· · · · · · · · · · · · · · · · · · ·
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		·		
20	Interest				
21	Payments to affiliates				·
22	Depreciation, depletion, and amortization .	113,881			
23	Insurance				
24	Other expenses. Itemize expenses not covered			建州 有相 1	1.00
	above. (List miscellaneous expenses in line 24e. If		1		
	line 24e amount exceeds 10% of line 25, column			3,6	
	(A) amount, list line 24e expenses on Schedule O.)				
a					
b	***************************************				
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	115 202		 	
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 following SOP 98-2 (ASC 958-720)	115,283	0	0	0

1 Cash—non-interest-bearing 108,930 1 128,866	Р	art X	Balance Sheet		
2 Savings and temporary cash investments 3 Piedges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4956/gf(1)), persons described in section 4956/g(3)(8), and contributing employers and sponsoring organizations of section 5016(e)(e) voluntary employees beneficiary organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepald expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10b 1.612,830 11 Investments—publicity traded securities 12 Investments—publicity traded securities 13 Investments—publicity traded securities 14 Intangible assets 15 Other assets. See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 Grants payable 17 Tocounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax—exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 21 Tax—exempt bond liabilities 22 Secured mortgages and notes payable to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Complete Part II of Schedule D 26 Total liabilities, and other liabilities of including income tax, payables to related third parties 26 Total liabilities of through 25 27 Total liabilities, and other liabilities of included on lines 17-24). Complete Part X 29 Emmanenty restricted net assets 20 Total liabilities of through 25 21 Total liabilities of through 25 22 Total liabilities and thread income tax, payables to related third parties 24 Total liabilities of					
3 Pledges and grants receivable, net 4				108,930 1	128,866
4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustess, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958()(1)), persons described in section 4958()(2)(3)(3), and contributing employees and sponsoring organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buldings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b 1.612,530 11 Investments – publicity traded securities 12 Investments – other securities. See Part IV, line 11 13 Investments – program-related. See Part IV, line 11 14 Intangible assets 1. 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34). 17 Accounts payable and accrued expenses 18 Grants payable and accrued expenses 19 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 2 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 2 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 2 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 2 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 2 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 2 Payables to current and former officers, directors, trustees, key employees, highest compensa			Savings and temporary cash investments	2	
Faceivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section 4958(h(1)), persons described in section 4958(h(1)), persons described in section 4958(h(1)), persons described in section 501(c)(9) voluntary employees and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions) Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part V of Schedule D Least accumulated depreciation Interpretation of the securities of the securities of the securities of the securities. See Part IV, line 11 Interpretation of the securities of the se			Pledges and grants receivable, net	3	
employees, and highest compensated employees. Complete Part II of Schedule L. 6 Receivables from other disqualified persons (as defined under section 4958(c)(1)), persons described in section 4958(c)(3)(8), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b 1,512,530 11 Investments—publicly traded securities 12 Investments—publicly traded securities 12 Investments—program-related. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal lancome tax, payables to related third parties 26 Total liabilities (including federal come tax, payables to related third parties, and other liabilities of the parties of the part VI of Schedule D 26 Total liabilities of the parties of the p		l i	Accounts receivable, net	4	
### 4958(h(f)), persons described in section 4958(h(3)(s)(s), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 109 Land, bulldings, and equipment cost or other basis. Complete Part VI of Schedule D 10 Land, bulldings, and equipment cost or other basis. Complete Part VI of Schedule D 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34). 17 Accounts payable and accrued expenses 75,918 17 70,882 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Excrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 21 Excrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 25 Total liabilities and lones payable to unrelated third parties 26 Total liabilities and lones payable to unrelated third parties 27 Total liabilities of lones I7 through 25		5 	employees, and highest compensated employees. Complete Part II of		
9 Prepaid expenses and deferred charges	its	6	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)	6	
9 Prepaid expenses and deferred charges	Se	7	Notes and loans receivable, net	7	
9 Prepaid expenses and deferred charges Land, bulldings, and equipment: cost or other basis. Complete Part Vi of Schedule D b Less: accumulated depreciation 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 19 Deferred revenue 19 Tax-exempt bond liabilities 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 21 Unsecured notes and loans payable to unrelated third parties 22 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 25 Total liabilities. Add lines 17 through 25 26 Total liabilities. Add lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net asse	۲	8	Inventories for sale or use	8	
10a Land, bulldings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2,267,389 10c 654,659 11 10c 1,612,530 748,134 10c 654,659 11 10c 11 11 12 11 12 11 12 11 13 11 14 11 13 11 14 11 15 15 15 15 15		9	Prepaid expenses and deferred charges	1,993 9	949
b Less: accumulated depreciation 10b 1.612,530 748,134 10c 654,859		10a			
b Less: accumulated depreciation 10b 1,612,530 748,134 10c 654,859 11		l	other basis. Complete Part VI of Schedule D 2,267,389		
11 Investments – publicly traded securities 11 12 12 13 14 14 15 15 15 15 15 15		b	Less: accumulated depreciation 10b 1,612,530		654,859
13 Investments—program-related. See Part IV, line 11 14 114 114 114 114 114 114 114 114 114 114 115 15		11			
14 Intangible assets 14 15 15 15 15 15 15 15			Investments—other securities. See Part IV, line 11	12	
15 Other assets. See Part IV, line 11				13	
Total assets. Add lines 1 through 15 (must equal line 34). 17 Accounts payable and accrued expenses			Intangible assets	14	
17			Other assets. See Part IV, line 11	15	
18 Grants payable	_		Total assets. Add lines 1 through 15 (must equal line 34)		784,674
Deferred revenue Tax-exempt bond liabilities Tax-exempt l				75,918 17	70,882
Tax-exempt bond liabilities			Grants payable	18	
21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. 23 Secured mortgages and notes payable to unrelated third parties . 24 Unsecured notes and loans payable to unrelated third parties . 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 26 Total liabilities. Add lines 17 through 25 . 27 Total liabilities. Add lines 17 through 25 . 28 Temporarily restricted net assets . 29 Permanently restricted net assets . 29 Permanently restricted net assets . 29 Permanently restricted net assets . 29 Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds . 31 Paid-in or capital surplus, or land, building, or equipment fund . 32 Retained earnings, endowment, accumulated income, or other funds . 33 Total net assets or fund balances . 34 Total liabilities and net assets/fund balances . 35 Total liabilities and net assets/fund balances . 36 Jens Particles of Schedule D . 21 21 22 Payables to current strusters, key employees, and disqualified persons. 22 23 Unsecured motages, and disqualified persons . 23 24 Unsecured notes and loans payable to unrelated third parties . 23 24 Unsecured notes and loans payable to unrelated third parties . 23 24 Unsecured notes and loans payable to unrelated third parties . 24 25 Other liabilities and notes spayable to unrelated third parties . 25 25 Unsecured notes and loans payable to unrelated third parties . 26 25 Unsecured notes and loans payable to unrelated third parties . 25 25 Unsecured notes and loans payable to unrelated third parties . 26 25 Unsecured notes and loans payable to unrelated third parties . 26 25 Unsecured notes and loans payable to unrelated third parties . 27 27 28 29 29 20 20			Deferred revenue		
Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 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 Total liabilities. Add lines 17 through 25 Organizations that foliow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets Temporarily restricted net assets Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. Total liabilities and not follow SFAS 117, check here and complete lines 30 through 34. Total net assets or fund balances Total liabilities and net assets/fund balances			Tax-exempt bond liabilities		
employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 Office II included on I		1		21	
Unsecured notes and loans payable to unrelated third parties	abilities	22	employees, highest compensated employees, and disqualified persons.		
Unsecured notes and loans payable to unrelated third parties	Ë	23	Secured mortgages and notes payable to unrelated third parties		
parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		24		24	
of Schedule D		25	Other liabilities (including federal income tax, payables to related third		
Organizations that follow SFAS 117, check here ▶ □ and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets		,	of Schedule D	· I	0
lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets		26	Total liabilities. Add lines 17 through 25		
Temporarily restricted net assets	ces		lines 27 through 29, and lines 33 and 34.		
34 Total liabilities and net assets/fund balances	펿		Unrestricted net assets		
34 Total liabilities and net assets/fund balances	8		Temporarily restricted net assets	28	
34 Total liabilities and net assets/fund balances	밀	29	Permanently restricted net assets	29	
34 Total liabilities and net assets/fund balances	or Fu		complete lines 30 through 34.	44	
34 Total liabilities and net assets/fund balances	şţ		Capital stock or trust principal, or current funds	0 30	0
34 Total liabilities and net assets/fund balances	28			597,323 31	597,323
34 Total liabilities and net assets/fund balances	¥ A		Retained earnings, endowment, accumulated income, or other funds .		
	ž	1			713,792
	_	34	rotal liabilities and net assets/fund balances	859,057 34	784,674 Form 990 (2011)

Form 990 (2011)	Page 12
0 000 (2011)	raye i 🚣

Part	XI Reconciliation of Net Assets	
	Check if Schedule O contains a response to any question in this Part XI	🗹
1	Total revenue (must equal Part VIII, column (A), line 12)	180,936
2	Total expenses (must equal Part IX, column (A), line 25)	115,283
3	Revenue less expenses. Subtract line 2 from line 1	65,653
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4	783,139
5	Other changes in net assets or fund balances (explain in Schedule O)	-135,000
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,	
	column (B))	713,792
Part	XII Financial Statements and Reporting	,
	Check if Schedule O contains a response to any question in this Part XII	🖂
		Yes No
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?	2a /
b	Were the organization's financial statements audited by an independent accountant?	2b /
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c ✓
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	HINKUNH INIUC-7 DHARMIN
	the Single Audit Act and OMB Circular A-133?	3a ✓
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	3ь
		Form 990 (2011)

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Employer identification number

	ndustry Union-Management Pension Fund Re			62-1662578
Par	Organizations Maintaining Don organization answered "Yes" to F	or Advised Funds or Other Similar Fu	unds or	Accounts. Complete if the
	organization answered Yes to F	(a) Donor advised funds		(b) Funds and other accounts
1	Total number at end of year	(2)		to) i dilas alla other accounts
2	Aggregate contributions to (during year) .			· · · · · · · · · · · · · · · · · · ·
3	Aggregate 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, subje			
6	Did the organization inform all grantees, do	pnors, and donor advisors in writing that go	rant fund:	s can be used
	only for charitable purposes and not for the			•
Dor	conferring impermissible private benefit?			· · · · D Yes D No
1	Conservation Easements. Com	olete if the organization answered "Yes	to For	m 990, Part IV, line 7.
•	Purpose(s) of conservation easements held Preservation of land for public use (e.g.,	by the organization (check all that apply).	- f h !-	A
	Protection of natural habitat			torically important land area ified historic structure
	☐ Preservation of open space	Freservation	or a cent	nied historic structure
2	Complete lines 2a through 2d if the organiz	ation held a qualified conservation contribu	tion in th	e form of a conservation
	easement on the last day of the tax year.			o ioini oi a conservation
				Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation ea	sements		2b
C	Number of conservation easements on a ce	rtifled historic structure included in (a)		2c
d	Number of conservation easements include historic structure listed in the National Basis			
•	historic structure listed in the National Regis			2d
3	Number of conservation easements modifie tax year ▶	d, transferred, released, extinguished, or te	erminated	by the organization during the
4	Number of states where property subject to	consoniation assessment is leasted by		
5	Does the organization have a written po	licy regarding the periodic monitoring in	nenection	handling of
	violations, and enforcement of the conserva	ition easements it holds?	i i apectioi	· · · · · · · · · Yes · No
6	Staff and volunteer hours devoted to monitor			
	>			•
7	Amount of expenses incurred in monitoring	inspecting, and enforcing conservation ea	sements	during the year
	> \$			
8	Does each conservation easement reported	on line 2(d) above satisfy the requirements	s of secti	on 170(h)(4)(B)
_				· · · · 🔲 Yes 🗌 No
9	In Part XIV, describe how the organization r	eports conservation easements in its reven	ue and ex	kpense statement, and
	balance sheet, and include, if applicable, the organization's accounting for conservation	e text of the foothote to the organization's	financial :	statements that describes the
Part		ections of Art, Historical Treasures,	or Othor	Cimilar Assats
	Complete if the organization answ	vered "Yes" to Form 990, Part IV, line 8	or Other }	Similar Assets.
1a	If the organization elected, as permitted un	der SFAS 116 (ASC 958), not to report in	its revenu	ie statement and halance sheet
	works of art, historical treasures, or other	similar assets held for public exhibition,	education	n. or research in furtherance of
	public service, provide, in Part XIV, the text	of the footnote to its financial statements t	hat descr	ibes these items.
b	If the organization elected, as permitted u	nder SFAS 116 (ASC 958), to report in it	s revenu	e statement and balance sheet
	works of art, historical treasures, or other	similar assets held for public exhibition,	educatio	n, or research in furtherance of
	public service, provide the following amoun	is relating to these items:		
	(i) Revenues included in Form 990, Part VII	, line 1		. • \$
2	(ii) Assets included in Form 990, Part X If the organization received or held works			. 🕨 3
~	following amounts required to be reported to	or art, illistorical treasures, or other simil	ar assets items:	s for financial gain, provide the
а	Revenues included in Form 990, Part VIII, Iir	ne 1		▶ •
b	Assets included in Form 990 Part X			9

chedul	D (Form 990) 2011									age 2
Part										
3	Using the organization's acquisition, accelection Items (check all that apply):	ession, and o	ther recor	ds, checl	k any of the	e follov	ving that are a s	ignificar	it use	of its
а	☐ Public exhibition		d İ	□ Loan (or exchang	e prog	rams			
ь	☐ Scholarly research		e	Other	_					
	☐ Preservation for future generations		•							
4	Provide a description of the organization'	s collections	and eynla	in how th	nev further	the orc	ianization's ever	nnt nurr	nose in	Part
•	XIV.		and onpic		,	0. 9	, an in East of the			
5	During the year, did the organization soli assets to be sold to raise funds rather tha								′es 🏻	l Na
Part										
	line 9, or reported an amount or		•	_	uinzanoii i	2110110	100 100 101	J 000	, , ,	,
1a	Is the organization an agent, trustee, cus	stodian or ot	ner interm	ediary fo				ot		
	included on Form 990, Part X?							□ Y	′es 🗌	No
b	If "Yes," explain the arrangement in Part X	(IV and comp	lete the fo	llowing ta	able:					
							Α	mount		
C	Beginning balance					10	;			
d	Additions during the year					10				
е	Distributions during the year					16	,			
f	Ending balance					11				
2a	Did the organization include an amount or	n Form 990, F	art X, line	21? .					es 🗌	No
ь	If "Yes," explain the arrangement in Part >									
Part	V Endowment Funds. Complete	if the organi	zation ar	swered	"Yes" to F	orm 9	90, Part IV, line) 10.		
) Current year	7	or year	(c) Two year		(d) Three years bac		ur years	back
1a	Beginning of year balance								MHST	
b	Contributions		1					Managa.		
C	Net investment earnings, gains, and									
	losses									
d	Grants or scholarships		<u> </u>		•					
е	Other expenditures for facilities and									
	programs									
f	Administrative expenses		 							105 (14)
g	End of year balance		<u> </u>							
2	Provide the estimated percentage of the c	rurrent vear e	nd balanc	e (line 1a	column (a	// held	ae. 	LEROBARHUS	2. A110 199	
-а	Board designated or quasi-endowment	-	%	o (o .g	, ooidiiiii (d	,,,c.a	ш.			
ь		%								
C	Temporarily restricted endowment ▶	%								
•	The percentages in lines 2a, 2b, and 2c si		nn%							
3a	Are there endowment funds not in the po			zation the	at are held	and ac	lministered for t	he		
	organization by:								Yes	No
	***							20/		140
	• • • • • • • • • • • • • • • • • • • •							3a(i		
_	,,	one listed on				• •		3a(ii		-
_b ⊿	If "Yes" to 3a(ii), are the related organizati					• •		<u>3b</u>	Т——	<u> </u>
4 Pari	Describe in Part XIV the intended uses of									-
raii						1-1	Assumulated T	(4, 5		
	Description of property	(a) Cost or o			or other basis ther)		Accumulated lapreciation	(a) B	ook valu	Ð
19	Land	 		ļ						

Part VII	Investments - Other Securities	. See Form 990, Part X,	line 12.	
(Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year r	
	al derivatives			
	held equity interests			
(3) Other				
(^)	***************************************			
(B) (C)				
(D)				
(E)				
(F)	***************************************			
(G)				· · · · · · · · · · · · · · · · · · ·
(H)		· · · · · · · · · · · · · · · · · · ·		
(1)				
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments-Program Related	J. See Form 990, Part X.	line 13.	
	(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year r	
(1)		· · · · · · · · · · · · · · · · · · ·	-	
(2)				
(3)				
(4)				
(5)				
_(6)				
(8)				
(9)				
(10)	(b) must equal Form 990, Part X, col. (B) line 13.)			Minimum constraint and an arrangement of the same
Part IX	Other Assets. See Form 990, Pa	art Y line 15		
		a) Description		(b) Book value
(1)				(b) Dook value
(2)				· · · · · · · · · · · · · · · · · · ·
(3)				
(4)				
(5)				**
(6)				
_(7)				
(8)				
(9)				
(10)	umn (b) must equal Form 990, Part X, co	ol (D) !! 4E \		
Part X	Other Liabilities. See Form 990,	Dort V. line 05.	. ▶	
1.	(a) Description of liability	(b) Book value		and the second s
	l income taxes	(b) Book value		
(2)				
(3)				
(4)		<u> </u>		
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)	4)			
rotal. (Column	(b) must equal Form 990, Part X, col. (B) line 25.)	0		

Schedu	e D (Form 990) 2011		Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to A	udited Financial Stateme	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1
2	Total expenses (Form 990, Part IX, column (A), line 25)		2
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3
4	Net unrealized gains (losses) on investments	Г	4
5	Donated services and use of facilities		5
6	Investment expenses		6
7	Prior period adjustments		7
8	Other (Describe in Part XIV.)		8
9	Total adjustments (net). Add lines 4 through 8	[9
10	Excess or (deficit) for the year per audited financial statements. Combine	lines 3 and 9	10
	XII Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per	
1	Total revenue, gains, and other support per audited financial statements	· · · · · · · · ·	7930-01
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1	
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	-0.00
۲ 2	Recoveries of prior year grants	2c	
d e	Other (Describe in Part XIV.)	2d	
3	Add lines 2a through 2d	• • • • • • • •	2e
4	Subtract line 2e from line 1		3
a	Investment expenses not included on Form 990, Part VIII, line 7b	4.	
b	Other (Describe in Part XIV.)	4a 4b	
c	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12)	4c
	Reconciliation of Expenses per Audited Financial Statem	ente With Evnences no	5 Coturn
1	Total expenses and losses per audited financial statements	ionto With Expenses pe	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments		
С	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
е	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:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	MARICIA
C	Add lines 4a and 4b		4c
_ 5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	9 18.) <u></u> .	5
Part			
Comp	ete this part to provide the descriptions required for Part II, lines 3, 5, and	9; Part III, lines 1a and 4; P	Part IV, lines 1b and 2b;
Part V	line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII,	lines 2d and 4b. Also com	plete this part to provide
•	ditional information.		
Sched	ule D, Part X, Line 2 - The Fund obtained a favorable determination letter on Ap	oril 20, 2004, in which the Int	ernal Revenue Service
("IRS"	stated that the Fund was in compliance with the applicable requirements of the	ne IRC. The Fund is required	to operate in conformity
with ti	e IRC to maintain its qualification. The Fund has been amended subsequent to	the form submitted to the I	RS for which favorable
detern	nination was received. However, the Trustees believe that the Fund is designed	l and, with the exceptions no	oted below, is currently
Deing	operated in compliance with the applicable provisions of the IRC. The Fund int	ends to correct certain oper	ational errors related to
Comp	.5 required distributions, post normal retirement age benefit calculations and	suspension of benefit issues	under the IRS's Voluntary
taken	iance Program. Accounting principles generally accepted in the United States	or America require the Fund	to evaluate tax positions
Siletoi	by the Fund and recognize a tax liability (or asset) if it has taken an uncertain p	position that more likely than	not would not be
uncert	ned upon examination by the IRS. The Fund has analyzed its tax positions and ain positions taken or expected to be taken that would require recognition of a	CONCIUDED that as of Decem	inder 31, 2011, there are no
statem	ents. The Fund is subject to routine audits by various taxing jurisdictions; how	navility (or asset) or disclos	sure in the financial
in pro	ress. The Fund believes it is no longer subject to income tax examinations for	years prior to 2008.	audits for any tax periods

Schedule D (Form 990) 2011		Page 5
	Part XIV - Supplemental Information (Continued)	

•••••••		

SCHEDULE J (Form 980)

Department of the Treasury

PACE Industry Union-Management Pension Fund Realty Corporation

Internal Revenue Service Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2011

Open to Public Inspection

Employer Identification number

62-1662578 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 in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions Payments for business use of personal residence ☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III. ☐ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☐ Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization: 4a b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: b Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 6 compensation contingent on the net earnings of: a The organization? . . . 6a If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 Were any amounts reported in 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 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Regulations section 53.4958-6(c)?

Page 2

Schedule J (Form 990) 2011

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 in 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.

NOTE. HE SOUR DECOMPTED EQUIPMENT HAVE BEEN MADE THE TOTAL PROPERTY OF THE PARTY OF	ממר	n iisted individual mu	ist equal the total am	ount of Form 990, Fe	IT VII, SECTION A, III IE	ia, applicable colulli	חווים (ב) מווים (ב)	S IOI GIAL HIGHNIGHAI.
		(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(I) Nootavable	(E) Total of columns	
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(Q)-(y)(g)	(F) Compensation reported as deferred in prior Form 990
MARIA WIECK	8	0			0	0	0	0
	Ξ	131,448	0	0	13,32	17,631	162,40	0
	8							
2	(E)							
	(1)							
3	(E)							
	(1)							
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	Θ							
5	(11)							
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8	(E)							
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6	(ii)							
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	E							
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16	≘							

Schedule J (Form 990) 2011

1, 6b, 7, and 8, and for Part II.											Schedule J (Form 990) 2011
Complete this part to 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.											
scriptions required for Part I, line											
information, explanation, or des ditional information.											
Complete this part to provide the information, explant Also complete this part for any additional information.									:		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2011

Department of the Treasury

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

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization Employer identification number **PACE Industry Union-Management Pension Fund Realty Corporation** 62-1662578 Form 990, Part III, Line 1 - THE PACE INDUSTRY UNION-MANAGEMENT PENSION FUND REALTY CORPORATION'S PURPOSE IS TO HOLD TITLE TO REAL PROPERTY FOR THE PACE INDUSTRY UNION-MANAGEMENT PENSION FUND. THE PACE INDUSTRY UNION-MANAGEMENT PENSION FUND IS A QUALIFIED RETIREMENT PLAN FUND UNDER SECTION 501 OF THE INTERNAL REVENUE CODE, AND ITS PURPOSE IS TO PROVIDE PENSION BENEFITS TO EMPLOYEES WHOSE EMPLOYERS ARE OBLIGATED TO CONTRIBUTE TO THE FUND PURSUANT TO COLLECTIVE BARGAINING AGREEMENTS. EXCESS REVENUES OVER EXPENSES ARE PAID TO THE PACE INDUSTRY UNION-MANAGEMENT PENSION FUND Form 990, Part VI, Section A, Line 2 - THE CORPORATION IS THE 100% OWNED SUBSIDIARY OF THE PACE INDUSTRY UNION-MANAGEMENT PENSION FUND (PIUMPF). THE CORPORATION'S BOARD OF DIRECTORS AND PIUMPF'S BOARD OF TRUSTEES ARE COMPOSED OF THE SAME INDIVIDUALS. THE OFFICERS OF THE CORPORATION ARE EMPLOYEES AND OFFICERS OF PIUMPF. Form 990, Part VI, Section B, Line 11b - THE FUND OFFICE, WHICH OPERATES THE CORPORATION, PREPARES THE 990 AND PRESENTS IT TO THE DIRECTORS FOR THEIR APPROVAL PRIOR TO FILING THE FORM WITH THE IRS. Form 990, Part VI, Section B, Line 12c - ALL DIRECTORS, KEY EMPLOYEES AND OFFICERS, IF APPLICABLE, ARE REQUIRED TO COMPLETE AN ANNUAL CONFLICT OF INTEREST QUESTIONNAIRE. COMPLETED QUESTIONNAIRES ARE SUBMITTED TO THE BOARD OF DIRECTORS FOR REVIEW. Form 990, Part VI, Section C, Line 19 - THE CORPORATION IS OPERATED AS THOUGH IT IS SUBJECT TO ERISA'S CONFLICT OF INTEREST PROVISIONS IN SECTIONS 404 AND 406 OF ERISA. GOVERNING DOCUMENTS AND FINANCIAL INFORMATION CAN BE FOUND ON THE CORPORATION'S WEBSITE, WWW.USWBENEFITFUNDS.COM. COPIES OF THE CORPORATION'S CONFLICT OF INTEREST AND WHISTLEBLOWER POLICIES ARE AVAILABLE UPON REQUEST. Form 990, Part VII, Section A, Line 1a - ESTIMATE OF THE AVERAGE HOURS PER WEEK DEVOTED TO THE PACE INDUSTRY UNION-MANAGEMENT PENSION FUND (RELATED ORGANIZATION): JOHNSON-2.0; SILVERMAN-.50; OLSON-3.0; GEENEN-2.0; BEEVERS-1.0; SUDELA-1.5; KIDDER-1.0; ENTRINGER-1.5; WIECK-32.0; ENGLAND 30.0. Form 990, Part XI, Line 5 - TRANSFERS OF EXCESS REVENUES OVER EXPENSES TRANSFERRED TO THE PACE INDUSTRY UNION-MANAGEMENT PENSION FUND.

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Part I

Related Organizations and Unrelated Partnerships

2011

OMB No. 1545-0047

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

► Attach to Form 990. See separate instructions. Open to Public Inspection

Name of the organization **PACE Industry Union-Management Pension Fund Realty Corporation** Employer identification number 62-1662578

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV. line 33.) (c) Legal domicile (state (e) **(f)** (b) Primary activity (a)
Name, address, and EIN of disregarded entity Total income End-of-year assets Direct controlling or foreign country) entity (2) Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had Part II one or more related tax-exempt organizations during the tax year.) (g) Section 512(b)(13) (c) Legal domicile (state (a)
Name, address, and EIN of related organization Direct controlling Exempt Code section Public charity status Primary activity controlled or foreign country) (if section 501(c)(3)) entity? Yes N/A (1) PACE INDUSTRY UNION-MANAGEMENT PENSION FUND (11-6166 TAFT-HARTLEY TN 414(J)/501(a) TRUST FUND 3320 PERIMETER HILL DRIVE, NASHVILLE, TN 37211

Cat. No. 50135Y

Schedule R (Form 990) 2011

(k) Percentage ownership (h) Percentage ownership Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) General or managing partner? end-of-year assets å (g) Share of Yes Code V—UBI amount in box 20 of Schedule K-1 (f) Share of total income (Form 1065) (e)
Type of entity
(C corp. S corp.
or trust) (h) Disproportionate allocations? ŝ Yes (g) Share of end-of- [5 year assets (d)
(Direct controlling entity (f) Share of total income (c) Legal domicile (state or foreign country) (e) Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity (d)
Direct controlling entity (c)
Legal
domicile
(state or
foreign (a) Name, address, and EIN of related organization Primary activity (a) Name, address, and EIN related organization Part IV Part Ξ 8 ල € Ō 9 E 9 Ξ ଷ ල € E

Schedule R (Form 990) 2011

	5.1.(S.I.)				,	age
Part	V Transactions With Related Organizations (Complete if the organization answered "Yes"	to Form 990, Part IV	, line 34, 35, 35a, or	36.)		
Not	e. 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 relat	ed organizations listed	in Parts II-IV?			蠹
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			. 1a		1
b	Gift, grant, or capital contribution to related organization(s)			. 1b		√
C	Gift, grant, or capital contribution from related organization(s)					✓
d	Loans or loan guarantees to or for related organization(s)			. 1d		✓
е	Loans or loan guarantees by related organization(s)			. 1e		√
f	Sale of assets to related organization(s)					✓
g	Purchase of assets from related organization(s)			. 1g		✓
h	Exchange of assets with related organization(s)					✓
i	Lease of facilities, equipment, or other assets to related organization(s)			. 1i	/	
j	Lease of facilities, equipment, or other assets from related organization(s)					✓
k	Performance of services or membership or fundraising solicitations for related organization(s)					✓
ı	Performance of services or membership or fundraising solicitations by related organization(s)					✓
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)					✓
n	Sharing of paid employees with related organization(s)			. <u>1n</u>		<u> </u>
0	Reimbursement paid to related organization(s) for expenses			. 10		-
р	Reimbursement paid by related organization(s) for expenses					<u>√</u>
q	Other transfer of cash or property to related organization(s)			. 1q	1	
r	Other transfer of cash or property from related organization(s)			. 1r		√
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this l	ine, including covered	relationships and trans	saction th	resholo	s.
	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	Method of	d) determir involved	
Se	e Schedule R, Part VII, Statement 1					
(1)						
(2)						
(3)				-		
_(4)		 				
(5)						
		1	ı — — — — — — — — — — — — — — — — — — —			

Page 4

Schedule R (Form 990) 2011

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

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.

כי פוסס וסיים מומר אמט ווטר מ וסומנסם טוי	gainzandir. Oct	instructions is	gal dii ig excidsi	מו ומו כפו ופ	an myesament pe	il ti let al lipa.				
(a) (b) (c) (d) (e) (f) (g) (g) Name, address, and ElN of entity Primary activity Legal domicile Predominant Are all partners Share of Share of	(b) Primary activity	(c) Legal domicile	(d) Predominant	(e) Are all partners	(f) Share of		(h) Disproportionate	(i) Code V—UBI		(k) Percentage
		(state or foreign country)		section 501(c)(3) organizations?			allocations?	amount in box 20 of Schedule K-1 (Form 1065)	managing partner?	ownership
			section 512-514)	Yes No			Yes No		Yes No	
(1)										
(2)							<u> </u>			
(3)										
(4)										
(5)										
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								Sched	Schedule R (Form 990) 2011	1 990) 2011

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).	m	Supplemental Information
	Ш	Complete this part to provide additional information for responses to questions on Schedule R (see
	•••••	

Schedule R, Part VII, Statement 1

PACE Industry Union-Management Pension Fund Realty

Corporation 62-1662578

Form: Schedule R Page: 3

Line Number: Part V Line 2

Description of Covered Relationships and Transaction Thresholds

		Amount involved
Name	PACE INDUSTRY UNION-MANAGEMENT PENSION FUND	317.520
Transaction type	i	311,623
Method of determining amount i	Involved WRITTEN LEASE AGREEMENT	
Name	PACE INDUSTRY UNION-MANAGEMENT PENSION FUND	135.000
Transaction type	q	,
Method of determining amount I	Involved CASH FORECASTING	