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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)

2007

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

A For the 2007 calendar year, or tax year beginning 01-01-2007 and ending 12-31-2007

B Check if applicable

Address change

Name change

Initial return

Final return

Amended return

Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization GRAND LODGE INTERNATIONAL ASSOCIATION OF MACHINISTS & AEROSPACE WORKERS
Number and street (or P O box if mail is not delivered to street address) Room/suite 9000 MACHINISTS PLACE
City or town, state or country, and ZIP + 4 UPPER MARLBORO, MD 20772

D Employer identification number

53-6001417

E Telephone number

(301) 967-4537

F Accounting method Cash Accrual

Other (specify) MODIFIED CASH

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Web site: WWW.IAMAW.ORG

J Organization type (check only one) 501(c) (5) (insert no) 4947(a)(1) or 527

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than 25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 188,779,622

H and I are not applicable to section 527 organizations

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

H(b) If "Yes" enter number of affiliates

H(c) Are all affiliates included? Yes No

(If "No," attach a list See instructions)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Group Exemption Number

M Check if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Table with 21 rows and multiple columns for revenue, expenses, and net assets. Includes sub-rows for detailed categories like contributions, program service revenue, and net assets at beginning/end of year.

**Part II Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.

	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22a</b> Grants paid from donor advised funds (attach Schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22a</b>			
<b>22b</b> Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22b</b>			
<b>23</b> Specific assistance to individuals (attach schedule)	<b>23</b>			
<b>24</b> Benefits paid to or for members (attach schedule) <input checked="" type="checkbox"/>	<b>24</b>	6,346,584		
<b>25a</b> Compensation of current officers, directors, key employees etc. Listed in Part V-A (attach schedule)	<b>25a</b>	2,012,278		
<b>b</b> Compensation of former officers, directors, key employees etc. listed in Part V-B (attach schedule)	<b>25b</b>			
<b>c</b> Compensation and other distributions not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	<b>25c</b>			
<b>26</b> Salaries and wages of employees not included on lines 25a, b and c	<b>26</b>	31,020,853		
<b>27</b> Pension plan contributions not included on lines 25a, b and c	<b>27</b>	143,074		
<b>28</b> Employee benefits not included on lines 25a - 27	<b>28</b>	11,078,304		
<b>29</b> Payroll taxes	<b>29</b>	5,257,218		
<b>30</b> Professional fundraising fees	<b>30</b>			
<b>31</b> Accounting fees	<b>31</b>	318,032		
<b>32</b> Legal fees	<b>32</b>	1,133,383		
<b>33</b> Supplies	<b>33</b>			
<b>34</b> Telephone	<b>34</b>	818,822		
<b>35</b> Postage and shipping	<b>35</b>	891,095		
<b>36</b> Occupancy	<b>36</b>	1,860,032		
<b>37</b> Equipment rental and maintenance	<b>37</b>	3,651,512		
<b>38</b> Printing and publications	<b>38</b>	1,170,069		
<b>39</b> Travel	<b>39</b>	11,555,118		
<b>40</b> Conferences, conventions, and meetings	<b>40</b>	85,772		
<b>41</b> Interest	<b>41</b>	307,125		
<b>42</b> Depreciation, depletion, etc. (attach schedule) <input checked="" type="checkbox"/>	<b>42</b>	3,341,916		
<b>43</b> Other expenses not covered above (itemize)				
<b>a</b> See Additional Data Table	<b>43a</b>			
<b>b</b>	<b>43b</b>			
<b>c</b>	<b>43c</b>			
<b>d</b>	<b>43d</b>			
<b>e</b>	<b>43e</b>			
<b>f</b>	<b>43f</b>			
<b>g</b>	<b>43g</b>			
<b>44</b> Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	<b>44</b>	112,223,464		

**Joint Costs.** Check  if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No

If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_, (iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments** *(See the instructions.)*

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? <b>▶</b> to organize all workers for economic, moral, and social advancement of their conditions and status All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	<b>Program Service Expenses</b> (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)
<b>a</b> to organize all workers for economic, moral, and social advancement of their conditions and status  (Grants and allocations \$ ) If this amount includes foreign grants, check here <b>▶</b> <input type="checkbox"/>	
<b>b</b>  (Grants and allocations \$ ) If this amount includes foreign grants, check here <b>▶</b> <input type="checkbox"/>	
<b>c</b>  (Grants and allocations \$ ) If this amount includes foreign grants, check here <b>▶</b> <input type="checkbox"/>	
<b>d</b>  (Grants and allocations \$ ) If this amount includes foreign grants, check here <b>▶</b> <input type="checkbox"/>	
<b>e</b> Other program services (attach schedule) (Grants and allocations \$ ) If this amount includes foreign grants, check here <b>▶</b> <input type="checkbox"/>	
<b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) . . . <b>▶</b>	

**Part IV Balance Sheets (See the instructions.)**

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		<b>(A)</b>		<b>(B)</b>		
		Beginning of year		End of year		
Assets	<b>45</b> Cash—non-interest-bearing . . . . .		122,919	<b>45</b>	379,308	
	<b>46</b> Savings and temporary cash investments . . . . .		25,668,732	<b>46</b>	22,157,450	
	<b>47a</b> Accounts receivable . . . . .	<b>47a</b>	153,700			
	<b>b</b> Less allowance for doubtful accounts . . . . .	<b>47b</b>		230,794	<b>47c</b>	153,700
	<b>48a</b> Pledges receivable . . . . .	<b>48a</b>				
	<b>b</b> Less allowance for doubtful accounts . . . . .	<b>48b</b>			<b>48c</b>	
	<b>49</b> Grants receivable . . . . .				<b>49</b>	
	<b>50a</b> Receivables from current and former officers, directors, trustees, and key employees (attach schedule) . . . . .				<b>50a</b>	
	<b>b</b> Receivables from other disqualified persons (as defined under section 4958(c)(3)(B) (attach schedule) . . . . .				<b>50b</b>	
	<b>51a</b> Other notes and loans receivable (attach schedule) . . . . .	<b>51a</b>	1,373,947			
	<b>b</b> Less allowance for doubtful accounts . . . . .	<b>51b</b>		1,400,214	<b>51c</b>	1,373,947
	<b>52</b> Inventories for sale or use . . . . .			2,493,984	<b>52</b>	2,445,716
	<b>53</b> Prepaid expenses and deferred charges . . . . .			206,387	<b>53</b>	224,219
	<b>54a</b> Investments—publicly-traded securities <input checked="" type="checkbox"/> Cost <input type="checkbox"/> FMV . . . . .			113,646,299	<b>54a</b>	117,580,137
	<b>b</b> Investments—other securities (attach schedule) <input checked="" type="checkbox"/> Cost <input type="checkbox"/> FMV . . . . .			43,177,805	<b>54b</b>	42,992,229
<b>55a</b> Investments—land, buildings, and equipment basis . . . . .	<b>55a</b>					
<b>b</b> Less accumulated depreciation (attach schedule) . . . . .	<b>55b</b>			<b>55c</b>		
<b>56</b> Investments—other (attach schedule) . . . . .				<b>56</b>		
<b>57a</b> Land, buildings, and equipment basis . . . . .	<b>57a</b>	75,510,793				
<b>b</b> Less accumulated depreciation (attach schedule) . . . . .	<b>57b</b>	41,578,767	36,707,106	<b>57c</b>	33,932,026	
<b>58</b> Other assets, including program-related investments (describe <input type="checkbox"/> _____ ) . . . . .			122,728	<b>58</b>	85,481	
<b>59 Total assets</b> (must equal line 74) Add lines 45 through 58 . . . . .			223,776,968	<b>59</b>	221,324,213	
Liabilities	<b>60</b> Accounts payable and accrued expenses . . . . .			<b>60</b>		
	<b>61</b> Grants payable . . . . .			<b>61</b>		
	<b>62</b> Deferred revenue . . . . .			<b>62</b>		
	<b>63</b> Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .			<b>63</b>		
	<b>64a</b> Tax-exempt bond liabilities (attach schedule) . . . . .				<b>64a</b>	
	<b>b</b> Mortgages and other notes payable (attach schedule) . . . . .			4,302,743	<b>64b</b>	3,669,102
	<b>65</b> Other liabilities (describe <input type="checkbox"/> _____ ) . . . . .			4,173,168	<b>65</b>	4,536,619
<b>66 Total liabilities</b> Add lines 60 through 65 . . . . .			8,475,911	<b>66</b>	8,205,721	
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74</b>					
	<b>67</b> Unrestricted . . . . .		184,810,900	<b>67</b>	180,161,566	
	<b>68</b> Temporarily restricted . . . . .		30,490,157	<b>68</b>	32,956,926	
	<b>69</b> Permanently restricted . . . . .			<b>69</b>		
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74</b>					
	<b>70</b> Capital stock, trust principal, or current funds . . . . .			<b>70</b>		
	<b>71</b> Paid-in or capital surplus, or land, building, and equipment fund . . . . .			<b>71</b>		
	<b>72</b> Retained earnings, endowment, accumulated income, or other funds . . . . .			<b>72</b>		
	<b>73 Total net assets or fund balances</b> Add lines 67 through 69 <b>or</b> lines 70 through 72 (Column (A) <b>must</b> equal line 19 and column (B) <b>must</b> equal line 21) . . . . .			215,301,057	<b>73</b>	213,118,492
	<b>74 Total liabilities and net assets / fund balances</b> Add lines 66 and 73 . . . . .			223,776,968	<b>74</b>	221,324,213

**Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** (See the instructions.)

<b>a</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>a</b>	110,084,433
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 12		
<b>1</b>	Net unrealized gains on investments . . . . .	<b>b1</b>	
<b>2</b>	Donated services and use of facilities . . . . .	<b>b2</b>	
<b>3</b>	Recoveries of prior year grants . . . . .	<b>b3</b>	
<b>4</b>	Other (specify) _____	<b>b4</b>	2,081,228
	Add lines <b>b1</b> through <b>b4</b> . . . . .	<b>b</b>	2,081,228
<b>c</b>	Subtract line <b>b</b> from line <b>a</b> . . . . .	<b>c</b>	108,003,205
<b>d</b>	Amounts included on Part I, line 12, but not on line <b>a</b> :		
<b>1</b>	Investment expenses not included on Part I, line 6b . . . . .	<b>d1</b>	
<b>2</b>	Other (specify) _____	<b>d2</b>	
	Add lines <b>d1</b> and <b>d2</b> . . . . .	<b>d</b>	2,081,228
<b>e</b>	<b>Total revenue</b> (Part I, line 12) Add lines <b>c</b> and <b>d</b> . . . . .	<b>e</b>	108,003,205

**Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

<b>a</b>	Total expenses and losses per audited financial statements . . . . .	<b>a</b>	112,266,998
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 17		
<b>1</b>	Donated services and use of facilities . . . . .	<b>b1</b>	
<b>2</b>	Prior year adjustments reported on Part I, line 20 . . . . .	<b>b2</b>	
<b>3</b>	Losses reported on Part I, line 20 . . . . .	<b>b3</b>	
<b>4</b>	Other (specify) _____	<b>b4</b>	43,534
	Add lines <b>b1</b> through <b>b4</b> . . . . .	<b>b</b>	43,534
<b>c</b>	Subtract line <b>b</b> from line <b>a</b> . . . . .	<b>c</b>	112,223,464
<b>d</b>	Amounts included on Part I, line 17, but not on line <b>a</b> :		
<b>1</b>	Investment expenses not included on Part I, line 6b . . . . .	<b>d1</b>	
<b>2</b>	Other (specify) _____	<b>d2</b>	
	Add lines <b>d1</b> and <b>d2</b> . . . . .	<b>d</b>	
<b>e</b>	<b>Total expenses</b> (Part I, line 17) Add lines <b>c</b> and <b>d</b> . . . . .	<b>e</b>	112,223,464

**Part V-A Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
DAVID L RITCHIE 9000 MACHINIST PLACE UPPER MARLBORO, MD 20772	GEN VICE PRESIDENT 40 00	185,510	11,576	10,794
ROBERT ROACH JR 9000 MACHINIST PLACE UPPER MARLBORO, MD 20772	GEN VICE PRESIDENT 40 00	185,510	10,134	10,522
LYNN D TUCKER 9000 MACHINIST PLACE UPPER MARLBORO, MD 20772	GEN VICE PRESIDENT 40 00	185,510	21,898	10,422
THOMAS rBUFFENBARGER 9000 MACHINIST PLACE UPPER MARLBORO, MD 20772	INT'L PRESIDENT 40 00	215,431	22,116	14,610
WARREN L MART 9000 MACHINIST PLACE UPPER MARLBORO, MD 20772	GEN SEC TREASURER 40 00	203,463	22,010	15,694
ROBERT G MARTINEZ 9000 MACHINIST PLACE UPPER MARLBORO, MD 20772	GEN VICE PRESIDENT 40 00	185,510	22,059	14,725
LEE PEARSON 9000 MACHINIST PLACE UPPER MARLBORO, MD 20772	GEN VICE PRESIDENT 40 00	185,510	23,178	12,742
Philip J Gruber 9000 MACHINIST PLACE UPPER MARLBORO, MD 20772	Gen VICE PRESIDENT 40 00	185,510	23,271	14,860
Richard P Michalski 9000 MACHINIST PLACE UPPER MARLBORO, MD 20772	Gen VICE PRESIDENT 40 00	185,510	21,972	12,231

**Part V-A Current Officers, Directors, Trustees, and Key Employees** *(continued)*

**Yes** **No**

<b>75a</b> Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings . . . . . <u>9</u>		
<b>b</b> Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) . . . . .	<b>75b</b>	No
<b>c</b> Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization" . . . . . If "Yes," attach a statement that includes the information described in the instructions	<b>75c</b>	No
<b>d</b> Does the organization have a written conflict of interest policy? . . . . .	<b>75d</b>	No

**Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits** (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (If not paid enter -0- )	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances

**Part VI Other Information** *(See the instructions.)*

**Yes** **No**

<b>76</b> Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change . . . . .	<b>76</b>		No
<b>77</b> Were any changes made in the organizing or governing documents but not reported to the IRS? . . . . . If "Yes," attach a conformed copy of the changes	<b>77</b>		No
<b>78a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	<b>78a</b>		No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>78b</b>		
<b>79</b> Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement . . . . .	<b>79</b>		No
<b>80a</b> Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc , to any other exempt or nonexempt organization? . . . . .	<b>80a</b>	Yes	
<b>b</b> If "Yes," enter the name of the organization <input type="checkbox"/> See Additional Data Table _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt			
<b>81a</b> Enter direct or indirect political expenditures (See line 81 instructions ) . . . . . <u>81a</u>	<b>81a</b>		
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	<b>81b</b>		No

Part VI Other Information (continued)

Form 990 (2007) Part VI Other Information (continued)
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?
82b If "Yes," you may indicate the value of these items here
83a Did the organization comply with the public inspection requirements for returns and exemption applications?
83b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?
84a Did the organization solicit any contributions or gifts that were not tax deductible?
84b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?
85b Did the organization make only in-house lobbying expenditures of \$2,000 or less?
85c Dues assessments, and similar amounts from members
85d Section 162(e) lobbying and political expenditures
85e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
85h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?
86 501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12
86b Gross receipts, included on line 12, for public use of club facilities
87 501(c)(12) orgs. Enter a Gross income from members or shareholders
87b Gross income from other sources
88a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?
88b At any time during the year, did the organization directly or indirectly own a controlled entity within the meaning of section 512(b)(13)?
89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955
89b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year?
89c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
89d Enter Amount of tax on line 89c, above, reimbursed by the organization
89e All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter transaction?
89f All organizations. Did the organization acquire direct or indirect interest in any applicable insurance contract?
89g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?
90a List the states with which a copy of this return is filed
90b Number of employees employed in the pay period that includes March 12, 2007
91a The books are in care of WARREN I MART gen sec-treasurer Telephone no (301) 967-4700
91b 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)?



**Part VI Other Information (continued)**

Yes No

**c** At any time during the calendar year, did the organization maintain an office outside of the United States?

<b>91c</b>	Yes	No
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If "Yes," enter the name of the foreign country **CA**

**92** Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here

and enter the amount of tax-exempt interest received or accrued during the tax year **92**

**Part VII Analysis of Income-Producing Activities (See the instructions.)**

**Note:** Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
<b>93</b> Program service revenue					
<b>a</b> reimburse admin expense					237,754
<b>b</b> training classes					23,518
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b> Medicare/Medicaid payments					
<b>g</b> Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments					90,689,516
<b>95</b> Interest on savings and temporary cash investments			14	500,617	
<b>96</b> Dividends and interest from securities			14	6,678,525	
<b>97</b> Net rental income or (loss) from real estate					
<b>a</b> debt-financed property					
<b>b</b> non debt-financed property					
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income					
<b>100</b> Gain or (loss) from sales of assets other than inventory			18	8,179,319	
<b>101</b> Net income or (loss) from special events					
<b>102</b> Gross profit or (loss) from sales of inventory			01	-1,368	
<b>103</b> Other revenue <b>a</b> calendar proceeds					51,460
<b>b</b> royalties earned			15	1,321,293	
<b>c</b> OTHER RENTAL					147,883
<b>d</b>					
<b>e</b>					
<b>104</b> Subtotal (add columns (B), (D), and (E))				16,678,386	91,150,131
<b>105</b> Total (add line 104, columns (B), (D), and (E))					107,828,517

**Note:** Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)**

**Line No.** Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)

See Additional Data Table

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)**

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)**

**(a)** Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

**(b)** Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

**NOTE:** If "Yes" to **(b)**, file Form 8870 and Form 4720 (see instructions).

**Part XI Information Regarding Transfers To and From Controlled Entities** *Complete only if the organization is a controlling organization as defined in section 512(b)(13)*

<b>106</b> Did the reporting organization <b>make</b> any transfers <b>to</b> a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity	<b>Yes</b>	<b>No</b>		
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
<b>Totals</b>				

<b>107</b> Did the reporting organization <b>receive</b> any transfers <b>from</b> a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity	<b>Yes</b>	<b>No</b>		
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
<b>Totals</b>				

<b>108</b> Did the organization have a binding written contract in effect on August 17, 2006 covering the interests, rents, royalties and annuities described in question 107 above?	<b>Yes</b>	<b>No</b>

**Please Sign Here**

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.

*****	2008-11-05
Signature of officer	Date
WARREN L MART GEN SEC-TREASURER	
Type or print name and title	

<b>Paid Preparer's Use Only</b>	Preparer's signature  MICHAEL E WARSHAW CPA	Date 2008-11-05	Check if self-employed <input checked="" type="checkbox"/>	Preparer's SSN or PTIN (See Gen Inst W)
	Firm's name (or yours if self-employed), address, and ZIP + 4 SALTER & COMPANY LLC 4600 EAST-WEST HIGHWAY SUITE 300 BETHESDA, MD 208143415	EIN	Phone no  (301) 830-7400	

## TY 2007 Depreciation and Depletion Schedule

**Name:** GRAND LODGE INTERNATIONAL ASSOCIATION  
 OF MACHINISTS & AEROSPACE WORKERS

**EIN:** 53-6001417

Asset	Amount
buildings	2,047,673
equipment	1,294,243

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

## TY 2003 Gain/Loss from Sale of Nonpublic Securities Schedule

**Name:** GRAND LODGE INTERNATIONAL ASSOCIATION  
OF MACHINISTS & AEROSPACE WORKERS

**EIN:** 53-6001417

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Sales Expenses	Total (net)
other securities	2007-06	PURCHASED	2007-06	various	40,906,909	36,292,484	0	4,614,425

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

## TY 2007 Gain/Loss from Sale of Other Assets Schedule

**Name:** GRAND LODGE INTERNATIONAL ASSOCIATION  
OF MACHINISTS & AEROSPACE WORKERS

**EIN:** 53-6001417

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
Furniture Equipment	2007-06	PURCHASED	2007-06	various	7,715	304,701		0	-296,986	

**TY 2007 Gain/Loss from Sale of Public Securities Schedule**

**Name:** GRAND LODGE INTERNATIONAL ASSOCIATION  
OF MACHINISTS & AEROSPACE WORKERS

**EIN:** 53-6001417

**Gross Sales Price:** 47,655,225

**Basis:** 43,793,345

**Sales Expenses:** 0

**Total (net):** 3,861,880

**TY 2007 Investments - Securities Schedule**

**Name:** GRAND LODGE INTERNATIONAL ASSOCIATION  
 OF MACHINISTS & AEROSPACE WORKERS

**EIN:** 53-6001417

Description	Book Value	Cost/FMV
OTHER	42,992,229	C

**TY 2007 Land etc. Schedule**

**Name:** GRAND LODGE INTERNATIONAL ASSOCIATION  
 OF MACHINISTS & AEROSPACE WORKERS  
**EIN:** 53-6001417

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
land	4,229,783		4,229,783
buildings	48,691,279	24,928,039	23,763,240
equipment	22,589,731	16,650,728	5,939,003



**TY 2007 Member Benefits Schedule**

**Name:** GRAND LODGE INTERNATIONAL ASSOCIATION  
OF MACHINISTS & AEROSPACE WORKERS

**EIN:** 53-6001417

<b>Type of Benefit</b>	<b>Amount</b>
STRIKE BENEFITS	6,176,057
SCHOLARSHIPS	44,848
DEATH BENEFITS	125,679

## TY 2007 Mortgages and Notes Payable Schedule

**Name:** GRAND LODGE INTERNATIONAL ASSOCIATION  
OF MACHINISTS & AEROSPACE WORKERS

**EIN:** 53-6001417

**Total Mortgage Amount:** 0

<b>Item No.</b>	1
<b>Lender's Name</b>	SUNTRUST
<b>Lender's Title</b>	
<b>Relationship to Insider</b>	NONE
<b>Original Amount of Loan</b>	8000000
<b>Balance Due</b>	3669102
<b>Date of Note</b>	2006-06
<b>Maturity Date</b>	2013-02
<b>Repayment Terms</b>	MONTHLY
<b>Interest Rate</b>	7.5000
<b>Security Provided by Borrower</b>	AIRPLANE
<b>Purpose of Loan</b>	AIRPLANE
<b>Description of Lender Consideration</b>	
<b>Consideration FMV</b>	

**TY 2007 Other Assets Schedule**

**Name:** GRAND LODGE INTERNATIONAL ASSOCIATION  
OF MACHINISTS & AEROSPACE WORKERS

**EIN:** 53-6001417

Description	Beginning of Year Amount	End of Year Amount
DEPOSITS	106,506	61,313
DUE FROM PENSION FUND	16,222	24,168

## TY 2007 Other Changes in Net Assets Schedule

**Name:** GRAND LODGE INTERNATIONAL ASSOCIATION  
OF MACHINISTS & AEROSPACE WORKERS

**EIN:** 53-6001417

Description	Amount
funds received from closed lodges	273,462
CURRENCY TRANSLATION ADJUSTMENT	1,764,232

**TY 2007 Other Expenses Included Schedule**

**Name:** GRAND LODGE INTERNATIONAL ASSOCIATION  
 OF MACHINISTS & AEROSPACE WORKERS

**EIN:** 53-6001417

Description	Amount
INVENTORY	43,534

**TY 2007 Other Liabilities Schedule****Name:** GRAND LODGE INTERNATIONAL ASSOCIATION

OF MACHINISTS &amp; AEROSPACE WORKERS

**EIN:** 53-6001417

<b>Description</b>	<b>Beginning of Year Amount</b>	<b>End of Year Amount</b>
OTHER LIABILITIES	4,173,168	4,536,619

**TY 2007 Other Revenues Included Schedule**

**Name:** GRAND LODGE INTERNATIONAL ASSOCIATION  
OF MACHINISTS & AEROSPACE WORKERS

**EIN:** 53-6001417

<b>Description</b>	<b>Amount</b>
funds from closed lodges	273,462
CURRENCY TRANSLATION ADJUSTMENT	1,764,232
INVENTORY	43,534

# Additional Data

**Software ID:**

**Software Version:**

**EIN:** 53-6001417

**Name:** GRAND LODGE INTERNATIONAL ASSOCIATION  
OF MACHINISTS & AEROSPACE WORKERS

## Form 990, Part II, Line 43 - Other expenses not covered above (itemize):

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>a</b> ADVERTISING	<b>43a</b>	838,374			
<b>b</b> FILM AND VIDEO PRODUCTION	<b>43b</b>	417,890			
<b>c</b> BUSINESS AGENT SUPPORT	<b>43c</b>	18,029,763			
<b>d</b> BANK CHARGES	<b>43d</b>	53,638			
<b>e</b> DUES & SUBSCRIPTIONS	<b>43e</b>	351,097			
<b>f</b> district AND LOCAL LODGE SUPPORT	<b>43f</b>	487,970			
<b>g</b> other Professional Fees	<b>43g</b>	1,855,756			
<b>h</b> office - Materialssupplies and expense	<b>43h</b>	1,036,384			
<b>i</b> insurance	<b>43i</b>	915,737			
<b>j</b> contributions	<b>43j</b>	3,231,593			
<b>k</b> tax & licenses	<b>43k</b>	424,832			
<b>l</b> other Miscellaneous	<b>43l</b>	20,002			
<b>m</b> tuition reimbursement	<b>43m</b>	148,118			
<b>n</b> Per Capita - other labor organizations	<b>43n</b>	3,421,123			



**Form 990, Part VI, Line 80b - If "Yes", enter the name of the organization and whether it is exempt or nonexempt:**

Name of the Organization	Exempt	Nonexempt
iam national pension plan	X	
NATIONAL IAM BENEFIT TRUST FUND	X	
machinist non-partisan league	X	
IAM national 401(K) plan	X	

**Form 990, Part VIII - Relationship of Activities to the Accomplishment of Exempt Purposes:**

<b>Line No.</b> ▼	<b>Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).</b>
93A	amounts received from affiliated exempt organizations for administrative expenses paid on their behalf
93B	amounts received from union members which represent reimbursement of expenses while attending training classes
94	AMOUNTS PAID BY MEMBERS AS CONSIDERATION FOR PROVIDING GOODS, SERVICES OR FACILITIES IN FURTHERANCE OF THE PURPOSE CONSTITUTING THE BASIS FOR THE EXEMPTION OF THE ORGANIZATION
103a	AMOUNTS PAID BY MEMBERS FOR CALENDARS THE NET PROCEEDS OF WHICH ARE DONATED TO CHARITY
103c	OTHER TRAINING CENTER RENTAL INCOME