

# MCAA

# MSCA

# PCA

## 2022 Local Association Dues Report Form

Local Association's Name & Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone (    ) \_\_\_\_\_

<b>Local Association ID No.</b>  # _____
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Date \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

Month(s) Covered \_\_\_\_\_

NOTE: Please discard all prior dues forms. This form should be submitted by local associations to report dues for their MCAA, PCA and MSCA contractors as well as signators to the National Service and Maintenance Agreement. Dues payments should be calculated by multiplying .09 for each UA labor hour for general foremen, foremen, journeymen, servicemen, apprentices, helpers, and tradesmen in your members' employ. For 2022, maximum dues are \$27,000 per branch office; minimum dues are \$1,080 per branch office.

MCAA Member ID #	Contractor's Name	CONSTRUCTION		SERVICE		TOTAL		Credit Balance	Adjusted Credit Balance	Balance Due
		Construction Hours Worked This Period	Construction Dues  (A)	Service Hours Worked This Period	Service Dues  (B)	A+B Dues Payable This Report				
			X .09=		X .09=					
			X .09=		X .09=					
			X .09=		X .09=					

PLEASE MAKE CHECKS PAYABLE TO AND MAIL TO: **MCAA**  
**Department 0749**  
**Washington, DC 20073-0749**  
*Only our remittance address has changed.*  
*We are still located in Rockville, MD and you can*  
*still reach us at 301-869-5800 or via fax at 301-990-9690.*

Subtotal Balance Due	
Subtotal Balance of All Continuation Forms	
Less Prepaid Estimate	
<b>Total Dues Payable This Report</b>	

Payments of membership dues are deductible for most members of a trade association under section 162 of the Internal Revenue code as ordinary and necessary trade or business expense. However, contributions or gifts to this organization are not deductible as charitable contributions for federal income tax purposes, since your association is a Section 501(c) (6) non-taxable entity under the Internal Revenue Service code.

Please check if you need more forms.  Form B  Form C  
 Or download more at [www.mcaa.org/forms](http://www.mcaa.org/forms).

\_\_\_\_\_  
 Name and Title

**PLEASE RETURN A COPY OF THIS REPORT FORM WITH YOUR PAYMENT**

Form B