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Form

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 2009

Open to Public Inspection

_				 -		
<u> </u>	For the 200		ear, or tax year beginning , and ending			
В	Check if applical	ole Please use IRS	C Name of organization) Emplo	oyer identification number
_]	Address change	label or	DISTRICT COUNCIL #4 GCC/IBT			
	Name change	print or	Doing Business As			5729483
\exists	Initial return	type. See	Number and street (or P O box if mail is not delivered to street address) Room/sui 455 KEHOE BOULEVARD 102	te I	E Teleph	none number
╗	Termination	Specific			20	eipts\$ 1,259,120
믁		Instruc-	City or town, state or country, and ZIP + 4	F.	G Gross rece	elpts 1,239,120
ᆜ	Amended return		CAROL STREAM IL 60188		17-2-1-0	4 6
	Application pend	ting F Nam	e and address of principal officer			a group return for
				1,	affiliati H(b) Are all	affiliates 💳
					include	ed? Yes No
					If "No,	attach a list (see instructions)
L	Tax-exempt		501(c) (5) ◀ (insert no) 4947(a)(1) or 527			
J	Website: ▶	WWW.I	DISTRICTCOUNCIL4.COM	1	H(c) Group	exemption number > 0488
ĸ	Type of organiz	ation Co	poration Trust Association X Other ▶ LABOR ORG. L Year of form	ation		M State of legal domicile
F	art !	Summa	ry			
	1 Brief	ly describe t	he organization's mission or most significant activities			
•	TO	PROTE	CT THE ECONOMIC INTERESTS OF LABOR ORGANIZATION MEM	BERS.		
ĕ						
'n						
Ve	2 06-	di Alexa Ieasi N	if the organization discontinued its operations or disposed of more than 25% of its	net acce	te	
ဗိ	2 Chec		-	net asse		1808
త	3 Num		members of the governing body (Part VI, line 1a)		3	0
ties	4 Num	-	endent voting members of the governing body (Part VI, line 1b)		4	
Activities & Governance	5 Total		employees (Part V, line 2a)		5	25
Aci	6 Total	number of	volunteers (estimate if necessary)		6	0
	7a Tota	gross unre	ated business revenue from Part VIII, column (C), line 12		7a	
	b Net o	inrelated bu	siness taxable income from Form 990-T, line 34		7b	0
				Prior Year		Current Year
ō	8 Cont	ributions an	d grants (Part VIII, line 1h)			1 001 005
Revenue	9 Prog	ram service	revenue (Part VIII, line 2g)	.,383		1,201,985
ě	10 Inves	stment incor		,882	54,676	
œ	11 Othe	r revenue (F	Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		,737	2,459
	12 Tota	revenue –	add lines 8 through 11 (must equal Part VIII, column (A), line 12)	.,448	,250	1,259,120
		-	ar amounts paid (Part IX, column (A), lines 1–3)			<u> </u>
	1		or for members (Part IX, column (A), line 4)			
	1		ompensation, employee benefits (Part IX, column (A), lines 5–10)	741	,462	765,072
enses	16a Drofe	•	draising fees (Part IX, column (A), line 11e)			
en	h Tota		expenses (Part IX, column (D), line 25)			
Exp		-	(Part IX, column (A), lines 11a–11d, 11f–24f)	820	,570	802,017
	1 17 00.10	•	· · · · · · · · · · · · · · · · · · ·	.,562		1,567,089
				-113		-307,969
<u>_</u>	19 Reve	nue less ex	penses Subtract line 18 from line 12 Beginni	ng of Curre		End of Year
ş	20 Tota	l accete /Da		,396		2,145,594
Net Assets or	24 Tota	•	rt X, line 16) Part X, line 26) Individual balances Subtract line 21 from line 20 MAY 18 2010 6 2		,938	133,454
팔	21 1014	•	nd balances Subtract line 21 from line 20	,318		2,012,140
				.,	,	
<u>F</u>	Part II		ties of penury, I declare that I have examined this return, including accompanying scredules and state	monto on	d to the he	et of my knowledge
,		and belief, if	lties of perjury, I declare that I have examined this return, including accompl adying scriedules and state is true, <u>correct,</u> and complete. Declaration of preparer (other than officer) is based on all information of	of which pr	eparer has	any knowledge
٠:			21 + 8 11/00.			-13-2010
	gn		Journ 15. 10 (access		1	
HE	ere	✓ Signatu	ire of officer	20	Date	
			ROBBET S. MILLER SECRETARY TREASURE	<u>C</u>		
		Type o	print pame and title			Description aumbor
_		Preparer's	Date Date	Check if	_	Preparer's identifying number (see instructions)
	id .	signature	CHARLES J. GRIES 05/07/10	self- employe	d▶ L	P00039587
	eparer's		CHARLES J. GRIES & CO. L.L.P.	_ :	EIN D	36-3383864
Us	se Only	Firm's name if self-emplo	of yours		Phone	
		address, an				847-517-8222
Ma	v the IDS d		eturn with the preparer shown above? (see instructions)		1 110	X Yes No
			work Reduction Act Notice, see the separate instructions.			Form 990 (2009)

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

4e Total program service expenses ▶

1,567,089

) (Revenue \$

Form 990 (2009)

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

P	art IV 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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4_		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5_		X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		- T
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	١.		x
_	complete Schedule D, Part III	_8_		
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part		1	
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			х
40	complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	10		Х
11	quasi-endowments? If "Yes," complete Schedule D, Part V Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	10_	-	
11		11	x	
_	VII, VIII, IX, or X as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
_	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			
•	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			
	Did the organization report an amount for other assets related 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			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
_	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? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
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, Part II	15		X
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, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			v
•-	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	4.0		х
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		_^_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		х
20	If "Yes," complete Schedule G, Part III	19 20		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	40		4.5

Form 990 (2009) DISTRICT COUNCIL #4 GCC/IBT

Part IV Checklist of Required Schedules (continued)

	The Chicagnitist of Redunds Contained			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			3,7
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			v
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
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	22		x
	employees? If "Yes," complete Schedule J	23		
44a	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	240		x
L	24b through 24d and complete Schedule K. If "No," go to line 25	24a 24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24c		
_	to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
		240_		
23a	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	25a		
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	204		
U	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	100		
20	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	<u> </u>		
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		x
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
-	Schedule L, Part IV	28b		X
С				
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		_ <u>x</u> _
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	33_		<u> </u>
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	34		<u> </u>
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		
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,			.
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and		₩.	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X 990	(2000)
		⊢ Orm	1 334	120091

	IT V Statements Regarding Other IRS Filings and Tax Compliance				_	
4.	First II			<u> </u>	Yes	No
та	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		41			
_	U.S. Information Returns Enter -0- if not applicable	1a 1b	0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		_ _			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portabl	E	1c	1	İ
22	gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1		10	-	
La	Statements, filed for the calendar year ending with or within the year covered by this return	2a	25			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns			2b	x	ĺ
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see					
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d by				
	this return?	,		3a	1	х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other	authori	tv			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fir		•			1
	account)?			4a		х
b	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Bank				
	and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?		5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Reg	ardıng				
	Prohibited Tax Shelter Transaction?			5c		L
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ie				ĺ
	organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or				ĺ
	gifts were not tax deductible?			6b		ļ
7	Organizations that may receive deductible contributions under section 170(c).					İ
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods				i
	and services provided to the payor?			7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	_	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	IS		_		v
	required to file Form 8282?	1 1		7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	1			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersona	l			x
	benefit contract?	o e+2		7e 7f	<u> </u>	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribute or a security of the property did the organization file Form 8899 or required?			71 7g		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			/ <u>y</u>		<u> </u>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0 required?	, 43		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			· · · ·		
J	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring					
	organizations, but the supporting organization, or a donor advised fand maintained by a sponsoring			8		
9	Sponsoring organizations maintaining donor advised funds.					
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		
0	Section 501(c)(7) organizations. Enter					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
1	Section 501(c)(12) organizations. Enter					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them)	11b				
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
				Form	ո 990	(2009)

20-5729483 Form 990 (2009) DISTRICT COUNCIL #4 GCC/IBT Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management No 1808 1a Enter the number of voting members of the governing body 0 1b **b** Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 X supervision of officers, directors or trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a material diversion of the organization's assets? 5 5 X 6 Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members X 7a of the governing body? X 7b b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? X 8b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached X at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a X 10a Does the organization have local chapters, branches, or affiliates? b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, X 10b affiliates, and branches to ensure their operations are consistent with those of the organization? 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the X 11 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give 12b rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c 13 Does the organization have a written whistleblower policy? 13 14 Does the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b 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 X 16a with a taxable entity during the year? b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard 16b the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the

630-668-4337

455 KEHOE BOULEVARD, SUITE 102 IL 60188 630

CAROL STREAM

organization ▶ DISTRICT COUNCIL #4 GCC/IBT

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. Use Schedule J-2 if additional space is needed.
- 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. See instructions for definition of "key employee"

Check this box if the organization did not compensate any current officer, director, or trustee

- 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

(A) Name and Title	(B) Average	Posit	* '' ''		(D) Reportable	(E) Reportable	(F) Estimated			
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
ROBERT S. MILLER										
SECRETARY-TR		Ш		X				106,573	0	0
PAUL A. MANCILLAS	, JR.	1								_
RECORDING-SE		\sqcup		X		Ш		95,622	0	0
WILLIAM H. KAUCH	CR	} }	ı	l			l		_	_
STAFF REPRES		\sqcup		X			_	93,333	0	0
FRANK W. GOLDEN										
STAFF REPRES		Ш	_	Х				93,333	0	0
LAURA A. WANLESS								10000		
VICE-PRESIDE	 	┈		X			_	10,020	0	0
BERNICE VAUGHN								4 000		•
DELEGATE			_	X				4,802	0	0
DANIEL WILKINS				,				2 606		•
DELEGATE		\vdash	\dashv	X		-		2,686	0	0
NATHAN DVORAK	-			.				1 054		^
DELEGATE ROBERT HAYDEN	<u> </u>	┝		X				1,854	0	0
DELEGATE	1			x				1,677	o	0
KORENA ALVAREZ		╌┤		^		├─┤		1,077		
DELEGATE	1			$ \mathbf{x} $				1,007	0	0
LARRY HAYNES	 	\vdash		^		\vdash	\dashv	1,007		
DELEGATE	1			$ \mathbf{x} $				1,007	0	0
JON F. STUART		\vdash				\vdash	_	1,007		
DELEGATE				x				900	o	0
GARY J. EDWARDS						\vdash				<u>_</u>
DELEGATE			1	x				750	ol	0
JAMES CRAIG		\Box				\Box			- -	
DELEGATE			ļ	x				600	o	0
STEVEN LUEKEN			\neg	寸		П				
DELEGATE				x				430	0	0
DAVID W. HAMBRECH	IT					П				
DELEGATE		_	_	X				300	0	0
							-			

Pa	rt VII Section A. Officers	, Directors, Trus	stees	s, Ke	ey Er	nplo	yees	s, an	d Highest Compensated	Employees (continued)			
	(A) Name and Title	(B) Average hours per			chec	C) k all t	hat a		(D) Reportable compensation	(E) Reportable compensation	(f Estin amoi		
	,	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations		
			L		L								
			L								·		
											_		
								<u></u>					
1b 2	Total Total number of individuals (in				thos	e lis	ted a	bov	414,894 e) who received more than				
	reportable compensation from	the organization	<u> </u>	1								Yes	No
3	Did the organization list any for employee on line 1a? If "Yes,"	complete Sched	dule .	J for	suc	h ind	lividu	ıal			3		x
4	For any individual listed on line the organization and related o	e 1a, is the sum rganizations grea	of re ater f	port than	able \$15	com 0,00	pens 07 If	atio "Yes	n and other compensation s," complete Schedule J fo	from r such	4		x
5	individual Did any person listed on line 1 services rendered to the organ									r	5		х
Sec 1	tion B. Independent Contract Complete this table for your five	ors								than \$100 000 of			
<u>.</u>	compensation from the organi							J		(B)		(C) ompensa	
	Name and	búsiness address						_	Descrip	tion of services		ompensa	auon
						 .							
					_		ï						
2	Total number of independent		_				ed to	thos	se listed above) who receiv	ved			
	more than \$100,000 in compe	nsation from the	orga	anıza	ation	<u> </u>						<u> aan</u>	1 (000

Pa	ırt V	III Statement of Reve	nue			, 	 	
		•			(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
(0, (0			T . T			revenue		512, 513, or 514
E E	та	Federated campaigns	1a	 				
g g	þ	Membership dues	1b					
a, ja	C	Fundraising events	1c					
<u>.gʻā</u>	d	Related organizations	1d					
Sin	е	Government grants (contributions)	1e					
ëë	f	All other contributions, gifts, grants,						
들등		and similar amounts not included above	_1f				!	
걸	g	Noncash contributions included in lines 1a-	1f \$					
Program Service Revenue Contributions, gifts, grants	h	Total. Add lines 1a-1f		•				
E E				Busn. Code				
, ec	2a	MEMBERSHIP DUES AND	ASSESSMEN		1,201,985	1,201,985	 	
8	b							
Ş	c							
Ser	ď							
E	е							
ğ	f	All other program service reve	nue					
چ	g				1,201,985			
	3	Investment income (including	dıvıdends, inter	est, and				
		other similar amounts)	•	54,676			54,676	
	4	Income from investment of tax	-exempt bond	oroceeds ▶				
	5	Royalties	•	>				
	-	(ı) Real	(11)	Personal				
	6a	Gross Rents	<u> </u>					
	ь	Less rental exps						
	C	Rental inc or (loss)						
	d	Net rental income or (loss)		•				
		Gross amount from (i) Securities	i (1) Other		'		
		sales of assets	- ``	,				
	ь	other than inventory Less cost or other						
		basis & sales exps						
	_	Gain or (loss)	-					
	d	Net gain or (loss)		•				
		Gross income from fundraising eve	nto [·····	
ne	oa	•	1113					
/en		(not including \$						
Re		of contributions reported on line 1c)						
Other Revenue		See Part IV, line 18	a					
5		Less direct expenses	b[
		Net income or (loss) from fund						
	уa	Gross income from gaming activitie	I I					
		See Part IV, line 19	a					
		Less direct expenses	b [
		Net income or (loss) from gam	ing activities	. •				
	10a	Gross sales of inventory, less						
		returns and allowances	a					
		Less: cost of goods sold	b					
	С	Net income or (loss) from sale		<u> </u>	· · · · · · · · · · · · · · · · · · ·			
		Miscellaneous Revenue		Busn. Code				
	11a	MISCELLANEOUS REVENUE	s	ļ	2,459	2,459		
	b							
	С							
	d	All other revenue		L				
	е	Total. Add lines 11a-11d		<u>▶</u>	2,459	·····		= 4 4= -
	12	Total Revenue. See instructio	ns		1,259,120	1,204,444	0	54,676

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).

	All other organizations must co		e not required to comple		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		CAPOLICOS	gone.a. expenses	
'	organizations in the U.S. See Part IV, line 21		į		
2	Grants and other assistance to individuals in				
2	the U.S. See Part IV, line 22				
,	· · · · · · · · · · · · · · · · · · ·				······································
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members			· · · · · · · · · · · · · · · · · · ·	<u> </u>
5	Compensation of current officers, directors,	414 994	414,894		
_	trustees, and key employees	414,894	414,034		
6	Compensation not included above, to disqualified		1		
	persons (as defined under section 4958(f)(1)) and		İ		
	persons described in section 4958(c)(3)(B)	100 047	100 047		-
7	Other salaries and wages	188,047	188,047		
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	160 101	160 101		
10	Payroll taxes	162,131	162,131		
11	Fees for services (non-employees)				
а	Management	CB 000	67 000	·	
b	Legal	67,992	67,992		
С	Accounting	43,012	43,012		
đ	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	34,097	34,097		
13	Office expenses	53,250	53,250	· 	
14	Information technology				
15	Royalties				
16	Occupancy	79,375	79,375	· · ·	
17	Travel	35,463	35,463	·····	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	47,906	47,906		
20	Interest				
21	Payments to affiliates		2	<u>.</u>	
22	Depreciation, depletion, and amortization	16,085	16,085		<u> </u>
23	Insurance	25,083	25,083		
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
а	INT'L PER CAPITA TAXES	248,026	248,026		
b	PER CAPITA TAXES	50,783	50,783		
С	SHOP STEWARD EXPENSE	34,979	34,979		
d	POSTAGE	19,535	19,535		
е	CONTRACT NEGOTIATIONS	17,048	17,048		
f	All other expenses	29,383	29,383		
25		1,567,089	1,567,089		
26			· · ·		
	SOP 98-2 Complete this line only if the		1		
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation				
DAA		-			Form 990 (2009

717	90 (2009) DISTRICT COUNCIL #4 GCC	7 = -		-5/29403		Page II
Part	X Balance Sheet			(A)		(B)
			1	Beginning of year		End of year
14	Cook and interest hearing	 ·		109,938	1	116,806
1	•		ŀ	1,769,732	2	1,544,632
2	9		ŀ	1,100,132	3	1/344/032
3	Pledges and grants receivable, net		}	107,783	4	92,328
4	Accounts receivable, net		ł	107,703		72,320
5						
	employees, and highest compensated employees Comp	lete Part II of			_	
١.	Schedule L		ŀ	,	5	
6						
	4958(f)(1)) and persons described in section 4958(c)(3)(E					
<u> </u>	Part II of Schedule L		6			
5 7	•		<u> </u>	<u> </u>	7	
7 8			-	26 254	8	21 61/
` 9		1		26,254	9	31,614
10	a Land, buildings, and equipment cost or		606 688			
	other basis Complete Part VI of Schedule D	10a	606,677	272 222		001 004
	Less accumulated depreciation	10b	325,443	310,088		281,234
11	• •		-	27,370	11	34,553
12	Investments—other securities See Part IV, line 11		ļ		12	
13	Investmentsprogram-related See Part IV, line 11		1		13	
14	Intangible assets		1		14	44 405
15	Other assets See Part IV, line 11		1	45,284	15	44,427
16	Total assets. Add lines 1 through 15 (must equal line 34)			2,396,449	16	2,145,594
17	Accounts payable and accrued expenses		-	51,707	17	98,861
18	Grants payable		,		18	
19	Deferred revenue				19	
20	Tax-exempt bond liabilities		<u> </u>		20	~ ~~
3 21	Escrow or custodial account liability Complete Part IV of	Schedule D	ļ		21	
21 22	Payables to current and former officers, directors, trustee	s, key				
	employees, highest compensated employees, and disqua	alıfied				
i	persons Complete Part II of Schedule L		Ļ		22	
23	Secured mortgages and notes payable to unrelated third	parties	Ļ		23	
24	Unsecured notes and loans payable to unrelated third pai	rties	Ļ		24	
25	Other liabilities Complete Part X of Schedule D		Ļ	26,231	25	34,593
26	Total liabilities. Add lines 17 through 25			77,938	26	133,454
3	Organizations that follow SFAS 117, check here ▶ X	and		İ		
<u> </u>	complete lines 27 through 29, and lines 33 and 34.					
27	Unrestricted net assets			1,551,928	27	1,249,639
์ 28	Temporarily restricted net assets				28	
29	Permanently restricted net assets			766,583	29	762,501
3	Organizations that do not follow SFAS 117, check here	, ▶ □				
	and complete lines 30 through 34.					
30	Capital stock or trust principal, or current funds		L		30_	<u> </u>
31	Paid-in or capital surplus, or land, building, or equipment	fund			31	
32					32	
27 28 29 30 31 31 32 33 34				2,318,511	33_	2,012,140
34				2,396,449	34	2,145,594

Form **990** (2009)

orm	1990 (2009) DISTRICT COUNCIL #4 GCC/IBT 20-5729483		Pa	ge 12
Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 Cash X 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	X	
b	Were the organization's financial statements audited by an independent accountant?	2b		X
С	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	X	
	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 consolidated basis, separate basis, or both			
	X Separate basis Consolidated basis Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		<u> </u>
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.	3b		
		Forn	990	(2009)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

20-5729483 DISTRICT COUNCIL #4 GCC/IBT Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a a Total number of conservation easements 2b b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes No 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Sche	dule D (Form 990) 2009 DISTRICT C				20-5/29				Page ∠
Pa	ert III Organizations Maintaining						sets (cont	inuec	<u>d) </u>
3	Using the organization's acquisition, accession collection items (check all that apply)	, and other records, chec	k any of the followi	ng that a	re a significant i	ise of its			
а	Public exhibition	d Loan o	r exchange prograr	ms					
b	Scholarly research	e Other							
C	Preservation for future generations						_		
4	Provide a description of the organization's colle	ections and explain how th	ney further the orga	anızatıon'	s exempt purpos	se in			
5	During the year, did the organization solicit or rassets to be sold to raise funds rather than to be	receive donations of art, h	istorical treasures,	or other	sımılar			Yes [No
D.						o" to Fo			NO
Pa	ert IV Escrow and Custodial Arrai			alion a	iisweieu te	S IO FO	ли ээо, г	ait	
	IV, line 9, or reported an am								
1a	Is the organization an agent, trustee, custodiar	n or other intermediary for	contributions or ot	her asse	ts not			г	-
	included on Form 990, Part X?							Yes [No
b	If "Yes," explain the arrangement in Part XIV a	nd complete the following	table						
						<u> </u>	Amo	<u>ınt</u>	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
	Did the organization include an amount on For	m 990. Part X. line 21?					\Box	Yes	No
	If "Yes," explain the arrangement in Part XIV								
	ert V Endowment Funds. Comple	ete if organization ar	swered "Yes"	to Forn	n 990. Part I	V. line 1	0.		-
		(a) Current year	(b) Pnor year			Three years		our year	rs back
12	Beginning of year balance	(4, 2 - 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		 ` 		•	1		
	Contributions								
				 					
С	Net investment earnings, gains,				1				
	and losses			 					
	Grants or scholarships			ļ					
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance		 						
2	Provide the estimated percentage of the year e	end balance held as							
а	Board designated or quasi-endowment ▶	%							
b	Permanent endowment ▶ %								
С	Term endowment ▶ %								
3a	Are there endowment funds not in the possess	ion of the organization tha	at are held and adn	ninistered	for the				
	organization by	- -						Yes	No_
	(i) unrelated organizations						3a(i		
	(ii) related organizations						3a(i	i)	
b	If "Yes" to 3a(II), are the related organizations I	isted as required on Sche	dule R?				3b		
4	Describe in Part XIV the intended uses of the c								
********	ert VI Investments—Land, Buildin			0 Part	X line 10		·····		
9	Description of investment	(a) Cost or other basis	(b) Cost or other		(c) Accumu	ated	(d) Bo	ok value	
	Coonpain of attendent	(investment)	basis (other		depreciati		(3, 20)		
4 -	Lood	,,	1	` 					
	Land		 						
	Buildings		 		- "				
	Leasehold improvements			633	30	5 442) 0 1	224
	Equipment		606	,677	32	5,443		. O T	234
	Other		<u> </u>				 	207	224
Tota	I. Add lines 1a through 1e (Column (d) must equ	uai Form 990, Part X, colu	ımn (B), line 10(c))		<u> </u>	L	1 2 T	234

Schedule D (F	orm 990) 2009 DISTRICT COUNCIL #4 G	CC/IBT	20-5729483	Page 3
Part VII	Investments—Other Securities. See Form 99	00, Part X, line 12.		
***************************************	(a) Description of security or category	(b) Book value	(c) Method of valu	ation
	(including name of security)		Cost or end-of-year ma	rket value
Financial deriv	atives			
Closely-held e	quity interests			
Other	· ·			
Total. (Column	n (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments—Program Related. See Form 9	90, Part X, line 13.		
	(a) Description of investment type	(b) Book value	(c) Method of valu	ation
			Cost or end-of-year ma	rket value
		·		
•				
		<u> </u>		
Total. (Column	n (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets. See Form 990, Part X, line 15.			
	(a) Description	· · · · · ·		(b) Book value
•				
Total. (Column	n (b) must equal Form 990, Part X, col (B) line 15)		•	
Part X	Other Liabilities. See Form 990, Part X, line 2	25.		
1.	(a) Description of liability	(b) Amount		
Federal incom	e taxes			
	ED DEATH BENEFIT	20,460		
ACCRUE	D EXPENSES	14,133		
	CA PAYABLE			
		-		
		-		
Total (Column	n (b) must equal Form 990, Part X, coi (B) line 25)	34,593		
	otnote In Part XIV, provide the text of the footnote to the orga		nts that reports the	
	liability for uncertain tax positions under FIN 48			

Sche	dule D (Form 990) 2009 DISTRICT COUNCIL #4 GCC/IBT		20-572948	3	Page 4
	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audit	ted Financial Staten	nents	
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			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	
P٤	art XII Reconciliation of Revenue per Audited Financial Stateme	ents W	<u>ith Revenue per Re</u>	turn	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities .	2b_			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	<u>.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			ĺ	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	
5				5	
Pa	art XIII Reconciliation of Expenses per Audited Financial Statem	ents \	With Expenses per F	Retur	<u>n</u>
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 - 1			
а	Donated services and use of facilities	2a	_		
þ	Prior year adjustments	2b	 -		
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	ſ		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIV)	4b	<u> </u>	4.	
	Add lines 4a and 4b			4c 5	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			_ 5	
	art XIV Supplemental Information	1-	and 4. Dart IV. Junes 1h		····
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, li				
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, li	nes zu	and 40 Also complete		
nis į	part to provide any additional information				
			- -		

Schedule D (Fo	orm 990) 2009	DISTRICT ental Information	COUNCIL	#4 GCC/IBT	20-5729483	Page 5
Part XIV	Suppleme	ental Information	n (continued)			
		· -				
		- 	-			
- -	- -					
			. – – –			
					-	
			- -			
		_				
					_ _ _ _ _ _	
				- -		- - -
			- -			
-			- -		-	
-		- 	- -			
			-			
				- 		

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

DISTRICT COUNCIL #4 GCC/IBT

Employer identification number

20-5729483

FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS CHANGES IN CONSTITUTION AND BYLAWS.

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS ORGANIZED WITH MEMBERS.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS

THE ORGANIZATION HAS MEMBERS THAT MAY ELECT ONE OR MORE MEMBERS OF THE
GOVERNING BODY.

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS DECISIONS ARE SUBJECT TO APPROVAL OF THE MEMBERS.

FORM 990, PART VI, LINE 10B - POLICIES AND PROCEDURES GOVERNING CHAPTERS
DISTRICT COUNCIL #4 HAS BYLAWS THAT LIST POLICIES AND PROCEDURES THAT
HELP GOVERN ALL THE LOCALS.

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990

A COPY OF THIS RETURN WAS PROVIDED TO GOVERNING BODY BEFORE IT WAS FILED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

DISTRICT COUNCIL #4 MAKES ITS GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC

UPON REQUEST.

Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

OMB No 1545-0172 2009

ttachment

Identifying number Name(s) shown on return 20-5729483 DISTRICT COUNCIL #4 GCC/IBT Business or activity to which this form relates INDIRECT DEPRECIATION Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I. 250,000 1 1 Maximum amount. See the instructions for a higher limit for certain businesses. 2 2 Total cost of section 179 property placed in service (see instructions) 800,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0-. If married filing separately, see instructions (b) Cost (business use only) (c) Elected cost (a) Description of property 7 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 q 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 13 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 14 during the tax year (see instructions) 15 15 Property subject to section 168(f)(1) election 912 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Part III Section A 9,968 17 MACRS deductions for assets placed in service in tax years beginning before 2009 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year d) Recovery (e) Convention (f) Method (a) Depreciation deduction placed in (a) Classification of property penod service only-see instructions) 19a 3-year property Ь 5-year property 7-year property C d 10-year property 15-year property 20-year property S/L 25 yrs 25-year property S/L 27 5 yrs MM Residential rental property 27 5 yrs MM S/L MM S/L 39 yrs Nonresidential real property S/L Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System S/L 20a Class life 12 yrs S/L h 12-year MM S/L 40 vrs 40-year Summary (See instructions.) Part IV 5,205 21 Listed property Enter amount from line 28 22 Total, Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 16,085 22 and on the appropriate lines of your return Partnerships and S corporations-see instructions For assets shown above and placed in service during the current year, enter the 23 23 portion of the basis attributable to section 263A costs Form 4562 (2009) For Paperwork Reduction Act Notice, see separate instructions.

	4562 (200															Page Z
Pa	irt V	Listed Property use Note: For any ve	d for entertai	inment, re vou are usin	ecreation of the state of the s	on, or ndard n	amuse	ement. rate or de) educting l	ease e					ers, and	d
		24b, columns (a)) through (c) of § —Depreciation								uts for p	asseng	er autom	obiles)		
242	De veu b						Yes	No					written?		X Yes	No
240	24a Do you have evidence to support the business/investment use (a) (b) (c) (c)		(d		<u> </u>	(e)		(f) Tes,		(g)	1	(h)		(1		
(list	of property vehicles first)	Date placed in service	Business/ investment use percentage	Cost or other basis			s for depi siness/inv use onl	estment	ation Recovery		Method/ Convention		Depreciation deduction		Elected section 179 cost	
25							d in service during the									
	tax year	and used more that	an 50% in a qua	lified busine	ss use (see inst	ructions)			2	5			<u> </u>	
26		used more than 5		d business ι	ise										,	
2	007 PONTIAC G6 11/01/06 100.00% 3						2.0	104	_ /			37	_	5,205		
		11/01/06	100.00%		0,12	4	30,124		5.0	7 20	200DBHY			,205		
			0/													
27	Oronosti	used 50% or less	un a qualified by	ICIDACE IICA								!	- -		<u> </u>	
27	Property	used 50% of less	iir a quaimed bu	Janiess use		1-			· · ·						Ι΄ .	
			%							S/L						
													``		1	
			%						s		S/L-					
28	Add am	ounts in column (h), lines 25 through	gh 27 Enter	here an	d on line	21, pag	ge 1			2	3	5	,205		
29	Add am	ounts in column (i)	, line 26 Enter h	nere and on	line 7, pa	ige 1								29	L	
									Vehicles							
Com to you	plete this ir employe	section for vehicle es, first answer the qu	s used by a sole lestions in Section	e proprietor, C to see if you	partner, meet an	or other exceptio	"more t	han 5% deting this	owner," o	r relate	d persor	n If you	provided	d vehicle	:s	
30	Total bu	siness/investment	miles driven		(4	1)	(b)) (c		(d)	(e)		(f)	
	during t	during the year (do not include					Vehicle 1 Vehicle 2		Vehic	le 3	Veh	cle 4	le 4 Vehicle 5		Vehicle 6	
		ing miles)					ļ		 				 		-	
31		mmuting miles driv													 	
32		her personal (nonc		s driven			-		 		-					
33		les driven during th	ne year Add													
34		through 32 e vehicle available	for personal		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
J-4		ng off-duty hours?	•		100	.,,	100		1		1		1			
35		vehicle used prim														
		an 5% owner or re						<u> </u>					<u> </u>			
36	Is anoth	er vehicle available	e for personal us	se?				l			<u> </u>		<u> </u>			
			Section C—Qu													
		questions to deter			on to cor	npleting	Section	B for ve	ehicles us	ed by e	employe	es who	are not			
		owners or related														No
37	, 50,000									Yes_	No X					
20	-	ur employees?												-		
30	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners								x							
39	l l V										X					
40	-	provide more than					mation t	from you	r employ	ees abo	out the					
	-	he vehicles, and re														X
41		meet the requirem														X
		your answer to 37	<u>, 38, 39, 40, or 4</u>	11 is "Yes," (do not co	mplete	Section	B for the	covered	vehicle	es				1,	
Pi	art VI	<u>Amortizatio</u>	n						 -			10	. т			
	(a) (b							Code		(e) Amortization репоd or Amortiz		(f) zation for this year				
	Description of costs begins				ins		amount section									
42_	Amortiz	ation of costs that	begins during yo	our 2009 tax	year (se	e instru	ctions).		 7		Т	_	Т			
		-4		1 2000 :			_		i			_	140			
43		ation of costs that add amounts in col				ro to	ort						43			
44	i Ulai. F	amounts in col	unin (i) See the		TOT WITE	C to let	,JIL						<u>, </u>		orm 456	62 (2009)