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Form **990**

932001 02-04-10

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Depart. Sant of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2009

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

Open to Public Inspection

<u>A</u>	For th	e 2009 calendar year, or tax ye	ear beginning	and	ending			
В	Check if	Please C Name of organization	tion			D Employer ide	ntifica	tion number
	applicat	use IRS INTERNATION	NAL BROTHERHOOD OF	ELECTR	ICAL	. ,		
	Addr	ss label or MODIZED C. T.O.	CAL UNION 697					
F	Name					25	0.4	15400
누	ichan	e Doing Business A						15488
느	returr	Specific	t (or P.O. box if mail is not delivered to str	eet address)	Room/suite	E Telephone nu		
ᆫ	Termi ated	Instruc P.O. BOX 2.	189			(2	<u>19)</u>	844-6386
	Amer	ded tions City or town, state	or country, and ZIP + 4			G Gross receipts \$		1,814,712.
	Appli tion	a HAMMOND, II	N 46323			H(a) Is this a gro	up retu	ırn
	pend		ncipal officer:RAY KASMARK	-		for affiliates	-	Yes X No
		SAME AS C ABOV						
_						H(b) Are all affiliate		
		empt status: X 501(c) (5) ◀ (insert no.) 4947(a)(1) o	r 527				t. (see instructions)
		te: N/A						number ▶ 0004
_		organization; Corporation	X Trust Association Ot	ther 🕨	L Year o	of formation: 191	<u>1 м s</u>	State of legal domicile: IN
P	art I	Summary						
m	1	Briefly describe the organizatio	n's mission or most significant activiti	es: LABO	R UNIO	N		
& Governance			· ·					
ā	2	Check this box ▶ If the	organization discontinued its operation	one or dieno	end of more	than 25% of to n	ot acco	
ě	3			ons or dispo	sea or more	than 25% of its ii	1 1	
တ္တ	1		he governing body (Part VI, line 1a)		•		3	11
•ಕ	4		members of the governing body (Part	t VI, line 1b)			4	1
Activities	5	Total number of employees (Pa	rt V, line 2a)		••		5	24
₹	6	Total number of volunteers (est	imate if necessary)				6	0
Ş	7a	Total gross unrelated business	revenue from Part VIII, column (C), lin	e 12			7a	0.
•	b	Net unrelated business taxable	income from Form 990-T, line 34		•		7b	0.
_			,			Prior Year		Current Year
		Contributions and grants (Bort	V/III has 1b)			FIIOLICA		Ourient real
ş		Contributions and grants (Part	•			0 402 52	_	1 010 016
Revenue	ľ	Program service revenue (Part '			-	2,403,53		1,717,916.
é	10	Investment income (Part VIII, co	olumn (A), lines 3, 4, and 7d)		·	133,91		64,167.
_	11	Other revenue (Part VIII, colurfir	(A), the 5, 6d, 8c, 9c, 10c, and 11e)	L.	74,21	6.	32,629.
	12	Total revenue - add lines 8 throi	ugh 117 (must equal Part VIII, column (A), line 12)		2,611,67	1.	1,814,712.
			(Part IX, column (A), lines 1,3)			56,21		115,398.
				••		162,48		123,500.
	.	Benefits paid to or for members	Tan MAR 1 5 2010 7 181		· }			
ě	15		rhployee benefits (Part X, column (A)	, lines 5-10)		723,43	<u> </u>	705,044.
Expenses	16a		art IX, eolumn (A), line 11e)					
×	b	Fotal fundraising expenses Par	t IK doutmh (tD)\ line 25) \ \					
ш	17	Other expenses (Part IX, columi	n (A), lines 11a-11d, 11f-24f)			664,17	1.	706,237.
	18	Total expenses. Add lines 13-17	(must equal Part IX, column (A), line	25)		1,606,30	3.	1,650,179.
		Revenue less expenses. Subtra		,		1,005,36		164,533.
es		TOTAL TOTAL CONTROL CONTROL	31 mo 10 mom mo 12		Bo a	·		
Assets or Balances		Fatal assats (Dast V. Las 40)			Den	inning of Current Y		End of Year
ass Bass	20	Total assets (Part X, line 16)	•			6,142,90	1.	6,307,522.
	21	Fotal liabilities (Part X, line 26)						88.
컃	22	Net assets or fund balances. Su	btract line 21 from line 20			6,142,90	1.	6,307,434.
	art II	Signature Block						
		Under penalties of perjury, I declare that	have examined this return, including accompany:	ng schedules an	d statements, ar	nd to the best of my kno	wledge a	nd belief, it is true, correct,
ฎ		and complete Declaration of preparer (of	her than officer) is based on all information of which		•			
ي S:⊶			E. Kasmark			Mas	1	22011
Sigr	1	Signature of officer				Date		<u>م ره</u>
kter 20	e		SV 1	0	. •	Date		
		Maymona	E. Kasmark	<u>- Bu-</u>	SINES	5 Man	<u>a q</u> e	2.
9		Type or print name and title	1					
-		Preparer's	Ma Desiran la radi	Date /	Chec	ck if P		identifying number
Raid		signature VI Jak	' MULINYINULLY VVI	12/9	Self-	loyed ▶ □	ee instruc	AIOHO)
野	arer's		PROPESSIONALS LLP	/	1 - Leunh			
Use	Only	yours if LINGAUI				EIN ►		
		self-employed), address, and	LUMET AVENUE				_	
		ZIP + 4 MUNSTER	, IN 46321	- · · · · · · · · · · · · · · · · · · ·		Phone no.	312	<u>2-368-0500</u>
May	the IF	S discuss this return with the p	reparer shown above? (see instructio	ns)				X Yes No

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2009)

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LOCAL UNION 697

	m 990 (2009) WORKERS LOC	CAL UNION 697	35-0415488 Page 2
Pi	art III Statement of Program Service	Accomplishments	
1	Briefly describe the organization's mission;		
	TO ORGANIZE ALL WORKERS	FOR THE ECONOMIC, MORAL A	ND SOCIAL ADVANCEMENT
	OF THEIR CONDITION AND S	STATUS.	
	•		
2	Did the organization undertake any significant p	program services during the year which were not list	ted on
	the prior Form 990 or 990-EZ?		Yes X No
	If "Yes," describe these new services on Sched		
3		e significant changes in how it conducts, any progra	am services? Yes X No
	If "Yes," describe these changes on Schedule (
4		each of the organization's three largest program sold section 4947(a)(1) trusts are required to report the	
		evenue, if any, for each program service reported.	e amount or grants and
		Tanas, wany, nor allow program control reported.	
4a	(Code:) (Expenses \$	including grants of \$) (Revenue \$

46	(Code: \(\(\(\(\(\) \\ \) \)	un all release area de a f. C.) (D
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$
		17-1-1-1	
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$
4d	Other program services (Describe in Schedule C		
TU	(Expenses \$ including gi		١
4e	Total program service expenses ►\$) (Hereine o	
			Form 990 (2009)

12450227 769095 06970X

Part 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)?		103	110
	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	х	1
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		l	
	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 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.	i l		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		1	
404	Schedule D, Parts XI, XII, and XIII.	12		<u>X</u>
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
40	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13		X
148		14a		
D	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	اعمدا	Ì	v
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b		<u>X</u>
	or onthe located automorphism block of Chatago If NV-s N accounts to Control to F. D. a. II	45	- 1	v
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		<u>X</u>
.0	located autoide the Linted States 2 H *Von * complete School J. F. Cont III	46		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		<u> </u>
••	onlymm (A) had C and 11-0 if EVan Engage late Calculute O. Deut I	17	1	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		<u> </u>
	1c and 8a2 If "Vas " complete Schoolule G. Port II			X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		41
	complete Schodule C. Port III	19		X
20	Did the granization operate one or more hospitals? If "Voc." complete Schedule U	-13		

WORKERS LOCAL UNION 697 Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the	l		
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	_X_	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			,,
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
••	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			v
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	- 1	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	05-		
_	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	OEL	ļ	
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	25b		
20	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, substantial	20		
2.	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete		1	
	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):		Ì	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was		Ì	
_	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	ļ	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> </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>X</u>
34	Was the organization related to any tax-exempt or taxable entity?		j	
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34_	Х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?		1	
	If "Yes," complete Schedule R, Part V, line 2	35_	Х	
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		<u>X</u>
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	

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Part V

	Y n					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of						$\Gamma^{}$
	U.S. Information Returns Enter -0- if not applicable	1a		25	l		1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b		0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	ible gaming				1
	(gambling) winnings to prize winners?				1c	X	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1	•				Í
	filed for the calendar year ending with or within the year covered by this return	2a		24			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	ms?			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	ınstru	ctions)			l i	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ed by t	his return?	.	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O				3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	nty over, a			1	ı
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	. [4a		_X_
þ	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 a	and				ı
	Financial Accounts.						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		-	.]	5a		<u>X</u>
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa				5b		<u>X</u>
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regardance of the Company o	irding	Prohibited				
_	Tax Shelter Transaction?	•••		- 1	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne orga	anization soli	cit			
_	any contributions that were not tax deductible?			- }	6a	X	
D	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions o	r gifts	İ		7.	
7	were not tax deductible?			-	6b	Х	
7	Organizations that may receive deductible contributions under section 170(c).			ļ			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for provided to the payor?	gooas	and services	·			v
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?		-	·· }	7a		<u>X</u>
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			· }	7b	_	
Ŭ	to file Form 8282?	as requ	JII EQ		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	•••	· ·		一十	
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p						
	benefit contract?		41		7e	- 1	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr	act?	• • ••	•	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		• • • •	··	7g		
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0		uired?	·	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations			е Г			
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exce				i		
	at any time during the year?			<u> </u>	8		
9	Sponsoring organizations maintaining donor advised funds.		•	İ			
а	Did the organization make any taxable distributions under section 4966?				9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			. [9b_		
10	Section 501(c)(7) organizations. Enter:					T	_
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	· · ·		ŀ		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b					
	Section 501(c)(12) organizations. Enter:				l		
	Gross income from members or shareholders	11a			Ī		
	Gross income from other sources (Do not net amounts due or paid to other sources against	}		ļ			
	amounts due or received from them.)	11b				1	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	- 1		Ļ	12a		
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b					

35-0415488

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Part VI 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.

Sec	tion A. Governing body and management				
		. 1	44	Yes	No
1a		1a	11		
b		1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship of the structure of	with any other	_		
2	officer, director, trustee, or key employee?		2	+-	X
3	Did the organization delegate control over management duties customanly performed by or under the	airect supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	000 61-40	. 3		X
4 5	Did the organization make any significant changes to its organizational documents since the pnor Form Did the organization become aware during the year of a material diversion of the organization's assets?		4		X
6	Does the organization have members or stockholders?	•	6	X	<u> </u>
7a	Does the organization have members of stockholders, or other persons who may elect one or more mem	here of the		1	\vdash
,,	governing body?	bers of the	7a	X	
h	Are any decisions of the governing body subject to approval by members, stockholders, or other person	ne?	7b		╁
8	Did the organization contemporaneously document the meetings held or written actions undertaken du		- -	1	
•	by the following:	ming the year	ĺ		i
а	The governing body?		8a	x	
b	Each committee with authority to act on behalf of the governing body?	• •	8b		Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach	ed at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revi	enue Code.)		•	
				Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	-	10a	1	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such ch	apters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?		10t		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing	g the form?	11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990				
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		122	X	L
þ	Are officers, directors or trustees, and key employees required to disclose annually interests that could	give rise			
	to conflicts?		. 12t	<u> </u>	X
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye	es," descnbe	- 1		
	ın Schedule O how this is done	•	. 120	<u> </u>	<u> </u>
13	Does the organization have a written whistleblower policy?		. 13	 -	X
14	Does the organization have a written document retention and destruction policy?		14	-	X
15	Did the process for determining compensation of the following persons include a review and approval by	y independent	İ	1	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				4,5
а	The organization's CEO, Executive Director, or top management official		15a		X
D	Other officers or key employees of the organization		15b	X	
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	-A. 4L -			
ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement taxable entity during the year?	nt with a	40-		₩.
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluation	to to portioipation	16a		X
b	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organic		}		
	exempt status with respect to such arrangements?	zations	. 16b		
Sect	tion C. Disclosure		. 100	<u> </u>	
	List the states with which a copy of this Form 990 is required to be filed ►IN				
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (5	01(c)(3)s only) availa	able for		
	public inspection. Indicate how you make these available. Check all that apply.	o . (o)(o)o oy, ava	20.0 .0.		
	Own website Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, confi	flict of interest police	v. and fin	ancial	
	statements available to the public.	oror pone,	,,		
	State the name, physical address, and telephone number of the person who possesses the books and	records of the organ	nization: I	>	
	RAYMOND KASMARK - (219) 844-6386		,		
	2835 165TH STREET, HAMMOND, IN 46323				
			Forn	n 990 (2009)

35-0415488

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."
- 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)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average	,		Pos				Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	nectitutional trustee			Highest compensated de employee	Ť	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
RAYMOND KASMARK		-	\vdash	-						
BUSINESS MGR/FIN/SECT'Y	50.00			x				126,161.	0.	51,340
DAVID BEANBLOSSOM	30.00			1	-	 		120,101.	U •	31,340
TREASURER	2.00			x		ļ		1,200.	0.	0
PATRICK BAILEY	2.00	\vdash		^	 		-	1,200.		
VICE PRESIDENT	2.00			x				4,042.	0.	593
LARRY SLAGLE II	2.00	-	<u> </u>		 	_		3,032.	0.	333
PRESIDENT	2.00			x				6,365.	0.	501
PAUL ANDERSON	2.00			-	l —			0,303.	0.	301
EXECUTIVE BOARD	2.00			x				1,970.	0.	0
HERB HIPPIE				-						
EXECUTIVE BOARD	2.00	Ì		\mathbf{x}				2,061.	0.	77
BRIAN FLANNERY										
EXECUTIVE BOARD	2.00		,	x				2,061.	0.	77.
CURTIS LESNICK										
EXECUTIVE BOARD	2.00			x				3,025.	0.	714
JAMIE ARMSTRONG - NEW/PA										
EXECUTIVE BOARD	2.00			X				480.	0.	0
TIM JUERGENS										
EXAMINING BOARD	1.00			X				141.	0.	77
CHARLES MILLER										
EXECUTIVE BOARD	2.00			X				2,061.	0.	77
FRANK LENNON II	İ									
EXECUTIVE BOARD	2.00			X				0.	0.	0
MICAH SCHANTZ										
RECORDING SECRETARY	2.00			X		Ш		1,341.	0.	77.
DOUG MEER]				
EXAMINING BOARD	1.00			X			_	141.	0.	<u>. 77</u> .
BRANDON FRITZSCHE										
EXAMINING BOARD	1.00	-	\dashv	Х		_		141.	0.	77.
932007 02-04-10			1							Form 990 (2009)

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Part V	Section A. Officers, Directors, Tru	1	nplo	oyee			High	<u>nest</u>		ees (continued)				
``	(A) ,	(B)				C)			(D)	(E)	ŀ		(F)	
	Name and title	Average	/ (Pos			. I. A	Reportable	Reportable	_		mated	
		hours per		neci	(all)	tnat	арр	iy) T	compensation from	compensatio from related			unt of ther	
		week	Individual trustee or director	İ	ŀ	ŀ			the	organizations			ensatio	റമ
			9	8			ated		organization	(W-2/1099-MIS		-	n the	,,,
		}	ustee	trus		8	Dens	Ì	(W·2/1099·MISC)	•	·		nzatio	n
		İ	laa t	tional		gle,	2 3		ļ			and i	related	į
			ndivic	Institutional trustee	Officer	Key employee	Highest compensated employee	Рот шег	•		1	organ	zation	ıs
		ļ	_	_	_	Ë		Ë						
		1						ļ	ļ					
			_	<u> </u>		<u> </u>	<u> </u>	<u> </u>						
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1b Tot				<u></u>			>		151,190.		0.	<u>53</u>	<u>, 68'</u>	<u>7.</u>
2 Tota	al number of individuals (including but n	ot limited to the	ose	liste	d ab	OVE	e) wh	o re	eceived more than \$100,	,000 in reportable)			
con	pensation from the organization													_1
												_ Y	es N	lo
	the organization list any former officer,		stee,	, key	em	ploy	ee,	or hi	ighest compensated em	ployee on				
	1a? If "Yes," complete Schedule J for se				-						<u> </u>	3	2	X_
	any individual listed on line 1a, is the su									he organization	1			
	related organizations greater than \$150										<u> </u>	4 2	ζ	
	any person listed on line 1a receive or a				om	any	unre	elate	ed organization for servi	ces rendered to		ļ	Ì	
	organization? If "Yes," complete Schedu	ule J for such p	ersc	on					 	•		5	2	X_
	B. Independent Contractors								·-·	- ·				
	nplete this table for your five highest cor	mpensated ind	epe	nder	nt co	ontra	acto	rs th	nat received more than \$	100,000 of com	pensatio	on fror	n	
the	organization. NONE					_		т-						
	(A) Name and business	addraaa						1	(B)		0	(C)		
	Name and business	address						+	Description of se	ervices	Com	pensa	ation	
								-						
								- 1						
-								-						
			-					+						
												_		
	I number of independent contractors (in		t lim	nted	to t	_		ted a	above) who received mo	ore than				
\$100	0,000 in compensation from the organiz	ation >				0								
											For	rm 99	0 (200)9)

P	art VI	II Statement of Reve	nue					
	,		, ,		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts t	1 a	Federated campaigns	1a					
Ē	t	Membership dues	1b					
S,E		Fundraising events	1c					İ
Ħ,	i c	Related organizations	1d					
S, E	e	Government grants (contribute	tions) 1e					
Ö	f	All other contributions, gifts, gran	·					
ž e		similar amounts not included abo	1 1					
Ξō	g			-	7			
Contributions, gifts, grants and other similar amounts	, s	Total. Add lines 1a-1f	3 14-11 9					
	<u>'</u>	Total. 7 do miles 14 17		Business Code			-	
•	2 a	MEMBERSHIP DUES	S & ASSE		1,716,048.	716 048		
Š.	2 b		<u> </u>	900099	1,868.	1,868.		
Ser				700077	1,000.	1,000.		
ΕŞ	C			ļ				
Ř	d				 			
Program Service Revenue	e	All other program service reve						
	·		enue		1,717,916.			
	3	Investment income (including	dividends inter		1,111,910.			
		other similar amounts)	dividends, inten	est, and	64,167.			64,167.
	4	Income from investment of ta	v.evemnt hand r	roceeds	04,107.			04,107.
	5	Royalties	x-exempt bond p	noceeus -				
	٦	noyalies	(i) Real	(ii) Personal				
	6.	Gross Rents	8,400.		-			
	6 a		0,400.		-			
	b	Less: rental expenses Rental income or (loss)	8,400.		-		1	
	4	Net rental income or (loss)	0,400.	<u> </u>	8,400.	8,400.	•	
		Gross amount from sales of	(i) Securities	(ii) Other	0,400.	0,400.		
	′ •	assets other than inventory	() Gecunies	(ii) Other	1			
		Less: cost or other basis			-			
		and sales expenses						
		Gain or (loss)						
		Nat was as (lase)					1	
		Gross income from fundraising	a events (not					
Other Revenue	0 4	including \$	of				1	
Σ		contributions reported on line						
چ ا		Part IV, line 18					j	
جو ا		Less: direct expenses	a b		1			
ō		Net income or (loss) from fund	-	L	1			
		Gross income from gaming ac	-					
		Part IV, line 19	а					
ĺ	h	Less: direct expenses	b.		†	ł		
		Net income or (loss) from gam			1			
l		Gross sales of inventory, less	_					
		and allowances	а]			
	b	Less: cost of goods sold	b		1	İ	-	
		Net income or (loss) from sales	•	•	1		i	
		Miscellaneous Revenue		Business Code				
Ì	11 a	REIMBURSED BUIL		900099	16,991.		ļ	16,991.
	b	MISCELLANEOUS I		900099	7,238.			7,238.
	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d	•	▶	24,229.			
	12	Total revenue. See instructions.		> _	1,814,712.	1,726,316.	0.	88,396.
93200 02-04-								Form 990 (2009)

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp	and 501(c)(4) organizat lete column (A) but are			nd (D).
	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				
	organizations in the U.S. See Part IV, line 21	113,379.			
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	2,019.			
3	Grants and other assistance to governments,				1
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members	123,500.			
5	Compensation of current officers, directors,				
	trustees, and key employees	202,240.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	296,149.			
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	95,748.			
9	Other employee benefits	75,308.			
0	Payroll taxes	35,599.			
1	Fees for services (non-employees).				
а	Management .				
b	Legal	17,238.			
С	Accounting .	25,000.			
đ	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				·
9	Other				
2	Advertising and promotion	44 202			
3	Office expenses	44,323.	<u> </u>		
4	Information technology	23,883.			
5	Royalties	74.052			
6	Occupancy	74,053.			
7	Travel	9,285.			
8	Payments of travel or entertainment expenses				
_	for any federal, state, or local public officials	27.062			
9	Conferences, conventions, and meetings	27,962.			
0	Interest	264 055			
1	Payments to affiliates	364,055.			
2	Depreciation, depletion, and amortization	27,823.			
3	Insurance	7,338.			
4	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.)			ļ	
а	MEMBERSHIP ACTIVITIES	53,439.			
b	TRANSFER TO POLITICAL A	13,000.			
c	PROMOTIONAL ITEMS	12,949.			
d	DUES & SUBSCRIPTIONS	4,659.			
e	PUBLIC RELATIONS	650.			
í	All other expenses	580.			
	Total functional expenses. Add lines 1 through 24f	1,650,179.			
	Joint costs. Check here J If following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined		ŀ		
	educational campaign and fundraising solicitation				
		·			5 000 (000

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•		
Part X	Balance Sheet	

Pa	rt X	Balance Sheet				
	,	• •	(A) Beginning of	year		(B) End of year
	1	Cash - non-interest-bearing	429,		1	360,515
	2	Savings and temporary cash investments	5,547,	195.	2	5,229,331
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	 L
	5	Receivables from current and former officers, directors, trustees, key				
]	employees, and highest compensated employees. Complete Part II				
	İ	of Schedule L		ĺ	5	
	6	Receivables from other disqualified persons (as defined under section				
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete				
		Part II of Schedule L			6	
22	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
Ą	9	Prepaid expenses and deferred charges			9	
			421.			
	ь		298. 141,	470.	10c	487,123
	11	Investments - publicly traded securities	==-,-	= :	11	
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11	25	000.	15	230,553
	16	Total assets. Add lines 1 through 15 (must equal line 34)	6,142,		16	6,307,522
	17	Accounts payable and accrued expenses			17	0,00.,000
	18	Grants payable			18	
	19	Deferred revenue	 -		19	
1	20	Tax-exempt bond liabilities		1	20	
ູ	21	Escrow or custodial account liability Complete Part IV of Schedule D	•		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employe	es		-	
١		highest compensated employees, and disqualified persons. Complete P.		İ		
ן ב		of Schedule L		Ī	22	
	23	Secured mortgages and notes payable to unrelated third parties		i i	23	
	24	Unsecured notes and loans payable to unrelated third parties		-	24	
	25	Other liabilities. Complete Part X of Schedule D	· -	0.	25	88.
	26	Total liabilities. Add lines 17 through 25		0.	26	88.
		Organizations that follow SFAS 117, check here ▶ 🗓 and comp	lete		20	
s		lines 27 through 29, and lines 33 and 34.		į		
ဦ	27	Unrestricted net assets	6,142,	901.	27	6,307,434.
<u>a</u>	28	Temporarily restricted net assets	5/222/	701.	28	0,30,,131,
ğ	29	Permanently restricted net assets			29	
Š		Organizations that do not follow SFAS 117, check here	·			
느		complete lines 30 through 34.		1		
22	30	Capital stock or trust principal, or current funds		- 1	30	
P P		Paid in or capital surplus, or land, building, or equipment fund			31	<u> </u>
1		Retained earnings, endowment, accumulated income, or other funds			32	
<u>₹</u>	30				-3/ I	
Net Assets or Fund Balances		Total net assets or fund balances	6,142,	001	33	6,307,434.

Form **990** (2009)

INTERNATIONAL BROTHERHOOD OF ELECTRICAL

Form 990 (2009) WORKERS LOCAL UNION 697 35-0415488 Page 12
Part XI Financial Statements and Reporting

Yes No Accounting method used to prepare the Form 990 X Cash ____ Accrual 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? X 2b c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? X 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: Separate basis X Consolidated basis Both consolidated and separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? X За 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 Form 990 (2009)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

Name of orga	out(c)(4), (5), or (6) organiz		D OF BURGER	TONT E	nployer identification number
realite of orga		ATIONAL BROTHERHOO S LOCAL UNION 697	D OF ELECTR	ICAL E	35-0415488
Part I-A		ganization is exempt unde	r section 501(c)	or is a section 527	
	-	ization's direct and indirect political			<u> </u>
	expenditures	ization 3 direct and indirect pointed	campaign activities in	_	> \$
3 Voluntee	•				-
O VOIGINIO	, riouro		•		
Part I-B	Complete if the or	ganization is exempt unde	r section 501(c)(3	3).	
1 Enter the	e amount of any excise ta	x incurred by the organization unde	r section 4955		\$
2 Enter the	e amount of any excise ta	x incurred by organization managers	s under section 4955	•	\$
3 If the org	ganization incurred a secti	on 4955 tax, did it file Form 4720 fo	r this year?	•	Yes No
4a Was a co	orrection made?			•	Yes No
	describe in Part IV				
Part I-C	Complete if the or	ganization is exempt unde	r section 501(c),	except section 50	1(c)(3).
1 Enter the	e amount directly expende	ed by the filing organization for secti	on 527 exempt function	on activities	\$
2 Enter the	amount of the filing orga	nization's funds contributed to othe	er organizations for sec	ction 527	
exempt 1	function activities				·\$
3 Total exe	empt function expenditure	s. Add lines 1 and 2. Enter here and	d on Form 1120-POL,		
line 17b					* \$
4 Did the f	ilıng organızation file Forn	1 1120-POL for this year?			Yes No
5 Enter the	names, addresses and e	mployer identification number (EIN)	of all section 527 polr	tical organizations to w	hich payments were made.
		the amount paid from the filing orga		•	
		livered to a separate political organ	zation, such as a sepa	arate segregated fund (or a political action committee
(PAC). If	additional space is neede	d, provide information in Part IV.			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	
				filing organization's	· · · · · · · · · · · · · · · · · · ·
				funds. If none, enter 4	 promptly and directly delivered to a separate
					political organization
					If none, enter -0
LOCAL 6	97 POLITICAL	2835 165TH STREET			
ACTION	FUND	HAMMOND, IN 4632	35-0415488		13,000.
		1			
		<u> </u>			
					•
		<u> </u>			
			-		

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LHA

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2009

INTERNATIONAL BROTHERHOOD OF ELECTRICAL Schedule C (Form 990 or 990-EZ) 2009 WORKERS LOCAL UNION 697 35-0415488 Page 2 Part II-A | Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). A Check ▶ if the filing organization belongs to an affiliated group. B Check ▶ if the filing organization checked box A and "limited control" provisions apply (b) Affiliated group (a) Filing Limits on Lobbying Expenditures organization's totals (The term "expenditures" means amounts paid or incurred.) totals 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount. Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 20% of the amount on line 1e. Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000. Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000. Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$17,000,000 \$1,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. If zero or less, enter -0i Subtract line 1f from line 1c. If zero or less, enter -0j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 Yes reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expe	nditures During 4-Yea	ar Averaging Period	r · · · · · · · · · · · · · · · · · · ·	r
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

INTERNATIONAL BROTHERHOOD OF ELECTRICAL

Schedule C (Form 990 or 990-EZ) 2009 WORKERS LOCAL UNION 697 35-041548

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 35-0415488 Page 3

(election under section 501(h)).

		a)		b)
	Yes	No	Am	ount
During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter			Į.	
or referendum, through the use of:				
Volunteers?				
Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			1	
Media advertisements?				
Mailings to members, legislators, or the public?	-			
Publications, or published or broadcast statements?				
Grants to other organizations for lobbying purposes?				
Direct contact with legislators, their staffs, government officials, or a legislative body?				
Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
Other activities? If "Yes," describe in Part IV	·			
Total. Add lines 1c through 1i			-	
Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
If "Yes," enter the amount of any tax incurred under section 4912	-			
If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)	(5), or se	ction	
501(c)(6).	(-)	(-),		
	•		Yes	١
Were substantially all (90% or more) dues received nondeductible by members?		1	Х	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?	•	2	X	
Did the organization agree to carryover lobbying and political expenditures from the prior year? † III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part		3 (5), or se	ection	
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Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

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.

2009
Open to Public Inspection

Name of the organization

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LOCAL UNION 697

Employer identification number 35-0415488

Pa	rt I	Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
		organization answered "Yes" to Form 990, Part IV, lin	e 6	
			(a) Donor advised funds	(b) Funds and other accounts
1	Total	number at end of year		
2	Aggre	egate contributions to (during year)		
3	Aggre	egate grants from (during year)		
4	Aggre	egate value at end of year		
5	Did th	ne organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
		e organization's property, subject to the organization's		Yes No
6		ne organization inform all grantees, donors, and donor a		• •
		aritable purposes and not for the benefit of the donor of		•
		missible private benefit?		Yes No
Pa	rt II	Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990,	
1	Purpo	ose(s) of conservation easements held by the organizati		
		Preservation of land for public use (e.g., recreation or p		stoncally important land area
		Protection of natural habitat		trified historic structure
		Preservation of open space		
2	Comp	olete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last
		f the tax year		
	•	,		Held at the End of the Tax Year
а	Total	number of conservation easements		2a
b	Total	acreage restricted by conservation easements		2b
С		per of conservation easements on a certified historic str	ucture included in (a)	2c
d		er of conservation easements included in (c) acquired a	` ' '	2d
3		er of conservation easements modified, transferred, rel		
	year 🕽		, , , , , , , , , , , , , , , , , , , ,	
4	Numb	er of states where property subject to conservation eas	sement is located	
5		the organization have a written policy regarding the per		
		ons, and enforcement of the conservation easements it	- · · · · · · · · · · · · · · · · · · ·	Yes No
6	Staff a	and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements of	lunng the year
7		nt of expenses incurred in monitoring, inspecting, and		
8	Does	each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 170	0(h)(4)(B)(i)
		ection 170(h)(4)(B)(ii)?		Yes No
9	In Par	t XIV, describe how the organization reports conservation	on easements in its revenue and expense	e statement, and balance sheet, and
		e, if applicable, the text of the footnote to the organizat		
		rvation easements		· ·
Pai	t III	Organizations Maintaining Collections of		ther Similar Assets.
		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 b	alance sheet works of art, historical
	treasu	res, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of pu	blic service, provide, in Part XIV, the text of
	the fo	otnote to its financial statements that describes these if	tems	
b	If the	organization elected, as permitted under SFAS 116, to i	report in its revenue statement and balan	ice sheet works of art, historical treasures,
		er similar assets held for public exhibition, education, or		
	these			
	(i) Re	evenues included in Form 990, Part VIII, line 1		. ▶ \$
	(ii) As	sets included in Form 990, Part X		▶ \$
2	If the d	organization received or held works of art, historical trea	sures, or other similar assets for financia	ıl gaın, provide
		lowing amounts required to be reported under SFAS 11		-
а		ues included in Form 990, Part VIII, line 1		▶ \$
		included in Form 990, Part X	•	\$
			• •	

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932051 02-01-10

Schedule D (Form 990) 2009

	INTERNA		=		OF ELEC	CTRIC			
	edule D (Form 990) 2009 WORKERS						35	<u>-041548</u>	8 Page 2
Pa	rt III Organizations Maintaining C	ollections	of Art, His	storical T	reasures,	or Oth	er Similar A	Assets (con	tınued)
3	Using the organization's acquisition, accessing the creation (check all that apply):	on, and other	records, che	ck any of the	following th	nat are a	significant use	of its collection	n items
_				1					
a			d [1	change prog	ırams			
b			e	Other	- · · · - ·	_	<u> </u>	<u> </u>	
C					_				
4	Provide a description of the organization's co							n Part XIV.	
5	During the year, did the organization solicit or					her sımıla	r assets		
Do	to be sold to raise funds rather than to be ma						 	Yes	<u>No</u>
Pa	rt IV Escrow and Custodial Arrang reported an amount on Form 990, Par		complete if or	rganization a	nswered "Y	es" to Foi	rm 990, Part IV	, line 9, or	
1a	is the organization an agent, trustee, custodia	an or other int	ermediary foi	r contributioi	ns or other a	ssets not	t included		
	on Form 990, Part X?							Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete	the following	table:					
	_		_					Amoun	t
С	Beginning balance						1c		
ď	Additions during the year				•		1d		
е	Distributions during the year	•					1e		
f	Ending balance			• • •	•		1f		
2a		rm 990. Part	X. line 21?		•	-	L_2,	Yes	No
ь	If "Yes," explain the arrangement in Part XIV.		•	••••		- •	-		
	rt V Endowment Funds. Complete if	the organizat	ion answered	"Yes" to Fo	rm 990. Par	t IV. line 1	10.		
		(a) Current y		Pnor year			(d) Three years	hack (e) Four	r years back
1a	Beginning of year balance	(2)	(9)	,	(0) 10) 6.	are buent	(a) vinco jours	(6) 1 001	yours back
b	T T								
c	Net investment earnings, gains, and losses								
d	Grants or scholarships								
_	Other expenditures for facilities								
•	and programs		İ						
4	Administrative expenses								
9	End of year balance								
2	Provide the estimated percentage of the year	end balance l	held as:		<u></u>				
a	Board designated or quasi-endowment	end balance	%						
	Permanent endowment	%							
	Term endowment	——· ·							
	Are there endowment funds not in the posses	=	ganization the	at are held a	nd administ	arad for t	ho organization		
O.	by:		gamzation th	at ale ficio a	na administr	erea loi ti	ne Organization	' r	Yes No
	(i) unrelated organizations							2-(1)	Tes No
	(ii) related organizations	•	•		•			3a(i)	
h	If "Yes" to 3a(ii), are the related organizations	lietad ae ragij	ired on School	 dulo D2		•		3a(ii)	
4	Describe in Part XIV the intended uses of the				-		• •	3b	
Par	t VI Investments - Land, Building				Port V line	10			
	Description of investment	T	t or other	1				(a) D= -1	
	Description of investment	1 1-7	t or other vestment)	(b) Cost basis (, ,,	ccumulated preciation	(d) Bool	(value
1-	Land	Da313 (III)				net	A COLOR OF THE PROPERTY OF THE		000
	Land	———		-	<u>0,000.</u>	_	220 (21		0,000.
	Buildings	ļ		57	1,734.	- 3	328,621.	4.	<u>3,113.</u>
C	Leasehold improvements			l		ĺ		I	

Schedule D (Form 990) 2009

27,683.

396,327.

487,123.

142,033.

27,644.

d Equipment

e Other

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

169,716.

423,971.

35-	041	5488	Page 3

(a) Description of security or category (including name of security)	(b) Book value		hod of valuation: -of-year market value
inancial derivatives			
losely held equity interests			
other			
			
	 		
	 		
			
otal. (Col (b) must equal Form 990, Part X, col (B) line 12.)			
Part VIII Investments - Program Related.	See Form 990, Part X, line		
(a) Description of investment type	(b) Book value		nod of valuation of-year market value
		Cost of end	or year market value
			
	+		
			
	+		
			
		·····	
	 		
etal (Cal (h) must squal Form 000, Part V, sal (R) line 12)	 		
otal. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶ Part IX Other Assets. See Form 990, Part X, line			
) Description		(b) Book value
· ·) Description		(b) Book value
			
			
	, , , , , , , , , , , , , , , , , , , ,		
otal. (Column (b) must equal Form 990, Part X, col (B) lin	e 15)		
Part X Other Liabilities. See Form 990, Part X			
(a) Description of liability	, <u></u>	(b) Amount	
ederal income taxes			
AYROLL WITHHOLDINGS		88.	
AIROBB WIIMIOBDINGD			
· · · · · · · · · · · · · · · · · · ·			
otal. (Column (b) must equal Form 990, Part X, col (B) lin	e 25)	88.	

INTERNATIONAL BROTHERHOOD OF ELECTRICAL Schedule D (Form 990) 2009 WORKERS LOCAL UNION 697 35-0415488 Page 4 Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements Part XI Total revenue (Form 990, Part VIII, column (A), line 12) 1 1,814,712. 1,650,179. 2 Total expenses (Form 990, Part IX, column (A), line 25) 3 Excess or (deficit) for the year Subtract line 2 from line 1 3 <u>164,53</u>3. 4 Net unrealized gains (losses) on investments 4 5 Donated services and use of facilities 5 Investment expenses 6 7 Prior period adjustments 7 Other (Describe in Part XIV.) 8 9 Total adjustments (net). Add lines 4 through 8 9 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 10 164.533. Part XII | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements 1,814,712. Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2 Net unrealized gains on investments Donated services and use of facilities 2b Recoveries of prior year grants 2c Other (Describe in Part XIV.) d 2d Add lines 2a through 2d 2e Subtract line 2e from line 1 814 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV) Add lines 4a and 4b 4c .814. Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements 1,650,179. Amounts included on line 1 but not on Form 990, Part IX, line 25: 2 Donated services and use of facilities 2a Prior year adjustments **2**b Other losses 2c Other (Describe in Part XIV.) 2đ Add lines 2a through 2d 2e 1,650. Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIV) 4b Add lines 4a and 4b 4c Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, lines 4; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part IV, lines 4; Part IV, lines 1b and 2b; Part III, lines 4; Part III, lines 4; Part III, lines 4; Part III, lines 4; Part III, lines 4; Part III, lines 4; Part III, lines 4; Part III, lines 4; Part III, lines 4; Part III, lines 4; Part III, lines 4; Part III, lines 4; Part III, lines 4; Part III, lines 4; Part III, lines 4; Part III, lines 4; Part III, lines 4; Part III, lines 4; Part III, lines 5; Part III, lines 4; Part III, lines 4; Part III, lines 5; Part II X, line 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Schedule D (Form 990) 2009

SCHEDULE I (Form 990)		Grants and	Grants and Other Assistance to Organizations,	to Organizations	٠.		OMB No 1545-0047
		Government	Governments, and Individuals in the United States	in the United Stat	89		2009
Department of the Treasury Internal Revenue Service	Cor	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.	n answered "Yes" on Fo ► Attach to Form 990.	on Form 990, Par n 990.	t IV, line 21 or 22.		Open to Public Inspection
Name of the organization	INTERNATIONAL BROWNERS LOCAL UN	BROTHERHOOD OF UNION 697	ELECTRICAL	٠			Employer identification number
Part General Informa	General Information on Grants and Assistance	6					
1 Does the organization r	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	the amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	istance, and the select	ion
criteria used to award t	criteria used to award the grants or assistance?	:	•	•			X Yes
= 12	Describe III Fart IV the organization's procedures for monitoring the use of grant funds in the United States	onitoring the use of grant	funds in the United	States			
٦.	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Check this box if no one recipient received more than \$5,000. Check this box if no one recipient received more than \$5,000.	and Organizations in the this box if no one recipien	e United States. Control of received more than	omplete if the orga	nization answered "Y	es" to Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	me and address of organization (b) EIN (c) IRC section range (c) Amount of organization range (c) EIN (c) IRC section range (c) Amount of range (c	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance ·
LEGACY POUNDATION 1000 EAST 80TH PLACE NORTH TOWER MERRILLVILLE, IN 46410	ORTH TOWER 42 35-1872803	3 N/A	26,600,	o			SCHOLABGHIDG
LAKE AREA UNITED WAY 221 W. RIDGE ROAD							
GRIFFITH, IN 46319	23-7170019	9 501(C)(3)	60,175,	0			TO SUPPORT PURPOSE OF THE CHARITABLE ORGANIZATION
2 Enter total number of section 501(c)(3) an 3 Enter total number of other organizations	Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations	t organizations					
۱,	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	ce, see the Instructions 1	for Form 990.				Schodule I (Earn 000) 2000

INTERNATIONAL BROTHERHOOD OF ELECTRICAL

WORKERS LOCAL UNION 697

Schedule | (Form 990) 2009

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule 1-1 (Form 990) if additional space is needed.

Page 2

35-0415488

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. THE BOARD PERFORMS NO SUBSEQUENT MONITORING APPROVAL IS GRANTED ONLY TO REPUTABLE ORGANIZATIONS WHO HAVE SATISFIED LINE 1: THE EXECUTIVE BOARD CAREFULLY REVIEWS ALL ALL RECORDS REGARDING THE (d) Amount of non-cash assistance REQUESTS FOR DONATIONS AND GRANTS PRIOR TO THEIR APPROVAL AND DISBURSEMENT OF FUNDS ARE MAINTAINED AT THE LOCAL'S OFFICE (c) Amount of cash grant (b) Number of recipients OF THE USE OF THE DONATION OR GRANT. THE BOARD'S DUE DILIGENCE. (a) Type of grant or assistance PART I, DISBURSEMENT SCHEDULE I,

932102 02-02-10

SCHEDULE J (Form 990)"

Department of the Treasury

Internal Revenue Service

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions.

2009

Open to Public Inspection

Name of the organization

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LOCAL UNION 697

Employer identification number 35-0415488

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			İ
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	1		
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			1
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,] i		1
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
				İ
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply.	1 1		1
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			1
	Form 990 of other organizations Approval by the board or compensation committee			
				ļ
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			1
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	<u> </u>	X
þ	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	<u> </u>	X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	} }		ĺ
_	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.] [i	
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1 1		
	contingent on the revenues of:	_	.	1
а	The organization?	5a		
D	Any related organization?	5b		
_	If "Yes" to line 5a or 5b, describe in Part III.	1 1	.	İ
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			1
	contingent on the net earnings of	1_1		l
a	The organization?	6a		
þ	Any related organization?	6b		
_	If "Yes" to line 6a or 6b, describe in Part III.	1 1		l
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	1 _]		
_	not described in lines 5 and 6? If "Yes," describe in Part III	7	 	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		}	ĺ
_	initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	19	- 1	

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2009

INTERNATIONAL BROTHERHOOD OF ELECTRICAL

WORKERS LOCAL UNION 697

Schedule J (Form 990) 2009

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed. 35-0415488

Page 2

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	Q	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive	(iii) Other reportable	Retirement and other deferred compensation	Nontaxable benefits	Total of columns (B)(I)-(D)	Compensation reported in prior Form 990 or
			Compensation	compensation			-	Form 990-EZ
	(i)	123,524.		2,637.	31,472.	19,868.	177.501.	
RAYMOND KASMARK	(1)							
	(I)							
Annual Control of the	(ii)							
	Ξ							
	(ii)							
	(3)							
	€							
	ε							
	(11)							
	Ξ							
	(ii)							
	(i)							
	(11)							
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Schedule J (Form 990) 2009

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LOCAL UNION 697

Employer identification number 35-0415488

FORM 990, PART VI, SECTION A, LINE 6: THE LOCAL CONSISTS OF JOURNEYMEN APPRENTICES, AND RETIREES WHO ARE CONSIDERED TO BE MEMBERS AS LONG AS ALL OF THEIR DUES AND ASSESSMENTS HAVE BEEN PROPERLY PAID.

FORM 990, PART VI, SECTION A, LINE 7A: ALL MEMBERS WHO HAVE VOTING RIGHTS CAN ELECT EACH MEMBER OF THE GOVERNING BODY DURING THE ELECTIONS.

FORM 990, PART VI, SECTION A, LINE 7B: THE EXECUTIVE BOARD MAKES RECOMMENTATIONS AND THE LOCAL'S MEMBERSHIP MUST APPROVE ANY ACTIONS THAT ARE TO TAKE PLACE WITHIN THE LOCAL.

FORM 990, PART VI, SECTION A, LINE 8B: THE LOCAL HAS NO COMMITTEES WITH THE AUTHORITY TO ACT ON ON BEHALF OF THE GOVERNING BODY.

FORM 990, PART VI, SECTION B, LINE 11: THE COMPLETED FORM 990 IS PROVIDED TO THE BUSINESS MANAGER/SECRETARY TREASURER OF THE LOCAL. THE BUSINESS MANAGER/SECRETARY TREASURER REVIEWS THE FORM. UPON FULLY UNDERSTANDING THE CORRECTLY COMPLETED FORM 990, THE FORM IS SIGNED AND SUBMITTED TO THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: VIOLATIONS OF THE CONFLICT OF INTEREST POLICY MUST BE PRESENTED TO THE LOCAL IN WRITING. THE CHARGES ARE READ AT THE NEXT UNION MEMBERSHIP MEETING. THE CASE GOES BEFORE A TRIAL BOARD WHERE THE MEMBER CAN PRESENT HIS CASE. THE DECISION OF THE TRIAL BOARD IS THEN READ AT THE NEXT MEMBERSHIP MEETING.

FORM 990, PART VI, SECTION B, LINE 15B: THE LOCAL'S BY-LAWS ARTICLE VII LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2009 932211 02-03-10

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service 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

Name of the organization

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LOCAL UNION 697

Employer identification number 35-0415488

DEFINE THE MAXIMUM SALARIES FOR THE LOCAL'S OFFICERS AND BUSINESS MANAGER.
ANY CHANGES TO THE BY-LAWS MUST BE APPROVED BY THE LOCAL'S MEMBERSHIP.
FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCUMENTS AND
FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST AT THE LOCAL'S OFFICE.
FORM 990, PART XI, LINE 2C
THE EXECUTIVE BOARD IS RESPONSIBLE FOR OVERSIGHT OF THE AUDIT AND THE
SELECTION OF THE INDEPENDENT AUDITOR ON AN ANNUAL BASIS. THIS PROCESS
HAS NOT CHANGED FROM PRIOR YEAR.

Schedule R (Form 990) 2009 2009 Open to Public Employer identification number OMB No 1545-0047 Inspection Direct controlling Direct controlling 35-0415488 entity entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year) End-of-year assets status (if section Public charity 501(c)(3)) **e** Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Exempt Code Total income section ₤ 501C(2) ► See separate instructions. Related Organizations and Unrelated Partnerships Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) Legal domicile (state or Legal domicile (state or foreign country) foreign country) BROTHERHOOD OF ELECTRICAL INDIANA INDIANA LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. HOLDS TITLES TO PROPERTIES ► Attach to Form 990. USED BY UNION MEMBERS TO STATE AND LOCAL OFFICES SUPPORT CANDIDATES FOR CONDUCT UNION BUSINESS THAT PROMOTE ORGANIZED Primary activity Primary activity <u>e</u> WORKERS LOCAL UNION 697 LOCAL 697 POLITICAL ACTION FUND - 35-0415488 INTERNATIONAL CORPORATION - 31-1030818, 2835 165TH STREET LOCAL UNION NO. 697 IBEW BUILDING Name, address, and EIN Name, address, and EIN of related organization of disregarded entity Name of the organization HAMMOND, IN 46323 HAMMOND, IN 46323 2835 165TH STREET Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) Part Part

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INTERNATIONAL BROTHERHOOD OF ELECTRICAL

Schedule R (Form 990) 2009 WORKERS LOCAL UNION 697

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

Page 2

35-0415488

General or managing partner? Percentage ownership Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Code V.UBI amount in box n 20 of Schedule K 1 (Form 1065) y Share of end-of-year assets ϵ 6 ate allocations? Disproportion-Yes Ξ Share of total income Share of end-of-year assets 6 Type of entity (C corp, S corp, or trust) ন্ত Share of total income Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) ፱ <u>e</u> Legal domicile (state or foreign country) Direct controlling entity Primary activity চ <u>e</u> Legal domicile (state or foreign country) Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization <u>e</u> Part IV

932162 02-04-10

Schedule R (Form 990) 2009

Schedule R (Form 990) 2009 WORKERS LOCAL UNION 697

35-0415488 Page 3

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

Make Commission in a defect in the body in 111 and 11 and 40 and			I —	1 2
NOTE: COMPINE THE ANY BRIGHT IN THE SHOULD FAILS IN, IN, OLIVINS SCHOOLE. 1. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II IV?			2 2 2 1	2
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		1a	^	⋈
b Gift, grant, or capital contribution to other organization(s)		1b	?	×
c Gift, grant, or capital contribution from other organization(s)		5	^	×
d Loans or loan guarantees to or for other organization(s)	• •	₽	_	×
e Loans or loan guarantees by other organization(s)	· · ·	9	_	×
	:		_	
f Sale of assets to other organization(s)		#		×
ation(s)	:	19	7	×
h Exchange of assets		t.	7	×
i Lease of facilities, equipment, or other assets to other organization(s)		=	×	
			1	
j Lease of facilities, equipment, or other assets from other organization(s)		=		×
k Performance of services or membership or fundraising solicitations for other organization(s)		¥		×
I Performance of services or membership or fundraising solicitations by other organization(s)		=		×
m Sharing of facilities, equipment, mailing lists, or other assets		£	×	
n Sharing of paid employees	•	4		×
				ı
o Reimbursement paid to other organization for expenses		9		×
p Reimbursement paid by other organization for expenses		10		×
q Other transfer of cash or property to other organization(s)		19		×
r Other transfer of cash or property from other organization(s)		11		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	nsaction thresholds			
(e)	(q)		-	
Name of other organization(s)	ransaction type (a·r)	Amount involved	volved	
(1) LOCAL UNION NO. 697 IBEW BUILDING CORPORATION	ŋ		8,400	0
(2)			İ	- 1
(8)				
(4)				
(5)				
(9)				
28	Ą.	Schedule B (Form 990) 2004	000	١٤

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LOCAL UNION 697

Schedule R (Form 990) 2009

35-0415488

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

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

(a)	(q)	(5)	9	(e)	9	(6)	3
Name address and FIN		(54)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			(A)	
of entity	Timery activity	Legal domicile (state or foreign	Section 501(c)(3)	Share of end-of- year assets	Dispropor- tionate	Code V-UBI amount in box 20	General or managing
		country)	Yes			of Schedule K·1 (Form 1065)	Yes No
							•
					<u>.</u>		
			_				
							_
							-
							_
					-		_
			•				

Schedule R (Form 990) 2009