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## SCANNED NUV 1 7 2010

Form **990-EZ** Department of the Treasury

Internal Revenue Service

OMB No 1545-1150

Short Form
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)
Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(bX13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

		he 2009 calendar year, or tax year beginning	ar	nd ending			
В	applicable   Please   C Marile of organization						
	Address use IRS INTERNATIONAL BROTHERHOOD OF ELECTRICAL						
	Change print or WORKERS 1597 LOCAL					<u> 51-0</u>	246089
							e number
	Term ated	i linstruc. F O BOX IV				3 <u>08</u> -	390-2968
	retur	ended tions City or town, state or country, and ZIP + 4			F G	oup Exe	emption
	Applic	GRAND ISLAND, NE 68802-0010			N:	ımber 🕽	▶ 0064
	• Se	ction 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attac	h a comple	ted G	Accounting	method:	X Cash Accrual
		Schedule A (Form 990 or 990-EZ).	_		Other (speci	fy) 🕨	
ī	Websi	ite: ► IBEW1597.WORDPRESS.COM		н	Check >	X if	the organization is not
J	Tax-ex	xempt status (check only one) — X 501(c) ( 5 ) ◀ (insert no.) 4947(a)	(1) or	527 re	quired to attai	ch Sche	dule B (Form 990, 990-EZ, or 990-PF)
	Check		gross recei				
		Form 990 return is not required, but if the organization chooses to file a retui	-		-		•
L	Add Iır	nes 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form				<b>&gt;</b> \$	144,429.
	art I	Revenue, Expenses, and Changes in Net Assets or Fun					
_	1	Contributions, gifts, grants, and similar amounts received				1	
	2	Program service revenue including government fees and contracts				2	
	3	Membership dues and assessments EIVED				3	143,330.
	4	nunction of the country of the count				4	405.
	5a	100	5a				
	Ь	101 0.1 2010 1.11	5b		<del></del>	1	
	C					5c	
ā	6	Special events and activities (complete application) Atalits of Schedule G). If any amount	is from dai	mina. check	here	اا	
enc	a			<b>g</b> , 000.		'	
Revenue	"	reported on line 1)	6a				
ш.	Ь		6b			7	
	ء ا	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	00 ,			6c	
	7a	C marm A	7a		694		
	, ъ		7b		694		
	0				<u> </u>	7c	0.
	8	Other revenue (describe			1	8	
	9	Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8			′	9	143,735.
_	10	Grants and similar amounts paid (attach schedule)	STMT	3 S7	rmt 2	10	53,537.
	111	Benefits paid to or for members	D 1111	J .	2	11	3373371
(A	12	Salaries, other compensation, and employee benefits				12	38,716.
Se	13 Professional fees and other payments to independent contractors						35,201.
penses	14	Occupancy, rent, utilities, and maintenance	13	1,386.			
Ĕ	15	Printing, publications, postage, and shipping				15	1,450.
	16		16	34,055.			
	17	Total expenses Add lines 10 through 16	<u>, , , , , , , , , , , , , , , , , , , </u>	PATEMI	ENT 1	17	164,345.
_	18	Excess or (deficit) for the year (Subtract line 17 from line 9)				18	-20,610.
sts	19	Net assets or fund balances at beginning of year (from line 27, column (A))					
Net Assets	."	(must agree with end-of-year figure reported on prior year's return)				19	130,501.
¥	20	Other changes in net assets or fund balances (attach explanation)				20	130,301.
ž	21	Net assets or fund balances at end of year. Combine lines 18 through 20				21	109,891.
P	art II		ore file For	m 990 inste	ead of Form 9		100,001.
Ŀ	ui ( ii	(See the instructions for Part II.)	1010, 1110 1 01		inning of year		(B) End of year
22	Cae	ish, savings, and investments	-		130,50		109,227.
23		nd and buildings			<u> </u>	23	200,221.
24		her assets (describe INVENTORY	,			) . 24	664.
25		tal assets	'		L30,50		109,891.
26		tal liabilities (describe	,	·············		0 . 26	0.
27		et assets or fund balances (line 27 of column (B) must agree with line 21)	<del></del>		130,50		
	2171	t 455ets of fution balances (mile 27 of column (b) must agree with mile 2 )				41	Form 990-F7 (2000)

FORM 990-EZ (2009) WORKERS 1597 LOCAL	<del></del>			<u> 2T-</u>	02400	169 rayez
Part III   Statement of Program Service Accomplishment What is the organization's primary exempt purpose?   SEE   STATEMENT	9				(Required fo	kpenses or section 501(c)(3) 4) organizations and
Describe, what was achieved in carrying out the organization's exempt pur				ıbe		7(a)(1) trusts, optional
the services provided, the number of persons benefited, and other relevan	t information for each	ch prog	ram title		for others)	
28 SEE STATEMENT 6						
(Grants \$ ) If this amount includes foreign g	rants, check here				28a	53,437.
29 SEE STATEMENT 7	- ,					
(Grants \$ ) If this amount includes foreign of	rants, check here		<b>•</b>		29a	39,102.
30 SEE STATEMENT 8			•			
(Grants \$ ) If this amount includes foreign of	rants check here				30a	29,154.
31 Other program services (attach schedule) SEE STATEMENT					1004	25,131.
(Grants \$ ) If this amount includes foreign of			_		31a	13,075.
32 Total program service expenses (add lines 28a through 31a)	plants, check here				32	134,768.
Part IV List of Officers, Directors, Trustees, and Key E	mplovees	-h		/Can Aba	32	134,700 •
Falt 14 List of Officers, Proceeds, Trustees, and Ney E	linpioyees. List ea	cn one ev	en ir not compensated		ontributions	
	(b) Title and average	hours	(c) Compensation	1, ,	employee	(e) Expense
(a) Name and address	per week devoted	d to	(If not paid, enter		fit plans &	account and
	position		-0)		eferred	other allowances
TOWN 1177 TOWN 4140 WOMEN'S 1177		<u> </u>		Com	pensation	
	RECORDING	SEC	1		•	
GRAND ISLAND, NE 68803	1.00		323.	ļ	0.	0.
DAN EMERY	EXECUTIVE	BOA	1		_	
41 WILLOW BEND, MARQUETTE, NE 68854	2.00		2,031.		0.	0.
MIKE EVANS	FINANCIAL	SEC	RETARY			
4022 ROTH RD., GRAND ISLAND, NE 68803			7,353.		0.	0.
ROGER GOLDFISH	EXECUTIVE	BOA				
1109 Q, ORD, NE 68862-1828	2.00		215.		0.	0.
SCOTT HANSEL	EXECUTIVE	BOA	RD			
1111 HOWARD AVE., ST. PAUL, NE 68873	2.00		269.		0.	0.
GARY HOCHREITER, 1012 W 8TH ST.,	EXECUTIVE	BOA	RD			
GRAND ISLAND, NE 68801	2.00		242.		0.	0.
NICK MANKLE, 2216 SHERIDAN AVE.,	TREASURER					
GRAND ISLAND, NE 68803-1929	5.00		2,173.		0.	0.
	VICE PRESI	IDEN	T			
ISLAND, NE 68802	30.00		9,080.		0.	0.
MICHAEL SEMM, 4950 W WHITECLOUD RD.,	PRESIDENT	/BUS	INESS MAN	AGE	ER	
GRAND ISLAND, NE 68803	20.00		10,051.		0.	0.
TIM STETHEM	EXECUTIVE	BOA				
2020 N ST., ORD, NE 68862-1627	2.00		108.		0.	0.
ED THOMPSON	EXECUTIVE	BOA	<del></del>			
2020 PAUL ST., ST. PAUL, NE 68873	2.00		323.		0.	0.
JEFFEREY VODEHNAL, 1501 W DIVISION,	EXECUTIVE	BOA				
GRAND ISLAND, NE 68801	2.00		242.		0.	0.
DOUGLAS WARD	EXECUTIVE	BΩΔ	<del></del>			1
2517 PARK DR., GRAND ISLAND, NE 68801		DOM	405.		0.	0.
ZOIT FARR DR., GRAND IDHAND, NE 00001	2.00		- 403.	<del> </del>		
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932 172	L		<u> </u>	<u> </u>		000 57
932 172 02-08-10					Form	990-EZ (2009)

51-0246089

Page 3

So Dot the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity  3 Were any changes made to the organization or governing documents? If "Yes," attach a conformed copy of the changes  3 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported in or Prom 90-1, attach a statement explaining with the organization due of report the income on Form 990-1.  3 If the organization had more members activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported in Cert 990-1, and prory bit statement explaining with the organization due of report the more one Form 990-1.  3 If the organization had not report the income on Form 990-1.  3 If the organization had provided business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and prory bit sequence in the first income of the provided organization of the come of the provided organization of the come of the provided organization in Form 1120-PQL for this year?  3 If the organization is Form 1120-PQL for this year?  3 If the amount of pollutial expenditures, direct or indeed, as described in the instructions.  3 If the amount of pollutial expenditures, direct or indeed, as described in the mistructions.  3 If the amount of pollutial expenditures, direct or indeed, as described in the mistructions.  3 If the organization is Form 1120-PQL for this year?  3 If the organization is form 1120-PQL for this year?  3 If the organization is form 1120-PQL for this year?  3 If the organization is an organization and provided organization a	Pa	rt V Other Information (Note the statement requirements in the instructions for Part V.)			-	
38 Dut the organization engage in any activity not previously reported to the IRSP If Yes, attach a detailed description of each activity  Were any changes made to the organization governing documents? If Yes, attach a conformed copy of the changes  38		•		Yes	No	
34 Were any changes made to the organization of governing documents? If "res, attach a conformed copy of the changes of the degrapation had accome from business advisities, such as those reported on fines 26, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the microne on Form 990-T.  350 If the organization had recover from business advisities, such as those reported on five 7 (and 7) and 7 (and 7) are reported on Form 990-T, attach a statement explaining why the organization did not report the microne on Form 990-T.  351 If "res," has it filed a tax return on Form 990-T for they year?  352 If the organization on the Form 1900-T for they sear?  353 If "Yes," has it filed a tax return on Form 990-T for they sear?  354 X  355 If "Yes," has it filed a tax return on Form 990-T for they sear?  355 If "Yes," has it filed a tax return on Form 990-T for they sear?  356 If the organization of political expenditures, direct or indirect, as described in the instructions.  357 If "Yes," complete Schedule L. Part II and other the total amount involved  368 Seation 501((7)) organizations. Enter:  369 If "Yes," complete Schedule L. Part II and other the total amount involved  360 Seation 501((7)) organizations. Enter amount of tax miposed on the organization during the year under:  360 Seation 501((7)) organizations. Enter amount of tax miposed on the organization during the year under:  360 Seation 501((7)) organizations. Enter amount of tax miposed on the organization mappines schedule L. Part II organization. But the organization speape in any section 4955 Sex seas Sentet transaction has not been reported on any or of this critical season.  360 Seation 501((7)) and 501((9)) organizations. Enter amount of tax miposed on organization mappines schedule L. Part II organization sections 4912. 4955, and 4956 Sex seas Sentet II assaction from the part of the organization speaper in any section 4955 Sex seas sentent transaction has not been reported on any o	33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33			
35. If the organization that income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach is statement explaining why the organization du not report the income on Form 990-T.  a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(a) notice, reporting, and proxy tax requirements?  b) If 1**es, *base that the da tax return on Form 990-T for this year?  b) If 1**es, *base that the da tax return on Form 990-T for this year?  b) If the organization undergo a fliquidation, dissolution, termination, or significant disposition of net assets during the year? If *yes,* complete applicable parts of \$Sch. N  7a Enter amount of political expenditures, direct or indirect, as described in the instructions.  b) If the organization there is the profit of this year?  a b Life the organization there is the profit of this year?  a) If the organization there is the end of the period covered by this return?  b) If *Yes,* complets Scheduled I, Part II and enter the total amount involved  39 Section \$0.1(c)(?) organizations. Enter:  a) Intation less and capital contributions included on line 9  b) Gross receipts, included on line 9, for public use of club bicklites  40 Section \$0.1(c)(?) organizations. Enter amount of tax imposed on the organization during the year unders: section 4911   N / A ; section 4915   N / A ; section 4915   N / A ; section 50.1(c)(?) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year unders: section 4912   N / A ; section 50.1(c)(?) and \$0.1(c)(?) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year unders sections \$912, 4955, and 4958  b) Section 50.1(c)(?) and \$0.1(c)(?) organizations. Bother amount of tax in line 40 creimbursed by the organization and an excess benefit transaction with a foreign to an excess benefit transaction organization and the organizations. Pro			_		х	
reported on Form 990-T, attach a statement explaining why the organization dud not report the income on Form 990-T.  a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(a) notice, reporting, and proxy tax requirements?  b "I" Yes," has it filled a tax return on Form 990-T for this year?  50 Uff the organization undergo a fluidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," compilete applicable parts of Sch. N  71 Enter amount of political expenditures, direct or indirect, as described in the instructions.  b Uff the organization beforem 1120-POL for this year?  32 but the organization form, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in an prior year and sall outstanding at the en of the period covered by this return?  33 but the organization beforem 1120-POL for this year?  34 Section 50 (IC(f) organizations. Enter:  35 Intaktion less and eparts contributions included on line 9  36 Gross receipts, included on line 9, for public use of club facilities  37 section 50 (IC(f) organizations. Enter amount of lax with a disqualitied person in a prior year, and that the transaction has not been reported on any of the organizations. Did the organization in aprior year, and that the transaction has not been reported on any of the organizations prior Forms 990 or 990-E27 II "Yes," complete Schedule L, Part I  40 Section 50 (IC(f)3 and 50 (IC(f)4) organizations. Enter amount of lax with a disqualitied person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 990 or 990-E27 II "Yes," complete Schedule L, Part I  40 Section 50 (IC(f)3 and 50 (IC(f)4) organizations. Enter amount of lax intensects in or a significant or managers or disqualitied persons during the tax year, was the organization aparty to a prohibited tax sheller transaction? If "Yes," complete form 8886-T  41 List the states with which a copy	35					
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?  50 bit the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes,*  50 complete appricible parts of SEn. N  51 a Time amount of pollineal expenditures, direct or indirect, as described in the instructions.  52 bit the organization to febratic large disposition of the complete appricible parts of SEn. N  53 bit the organization febratic large disposition of the complete specified in the instructions.  54 bit the organization febratic large disposition of the complete specified in the instructions.  55 bit the organization febratic large disposition of the complete specified in the instructions.  56 bit the organization febratic large disposition of the complete specified in the instructions.  57 bit 11**res, complete Schedule L, Part II and enter the total amount involved as the complete Schedule L, Part II and enter the total amount involved as the complete Schedule L, Part II and enter the roll amount of the organization during the year under:  58 bit 11**separation of the complete Schedule L, Part II and enter the disposition of the organization engage in any section 4958 excess benefit transaction during the year or its at a ware that it engaged in an excess benefit transaction during the year under section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or dequalited persons during the year under sections 901 complete Schedule L, Part II  57 bit 18**section 501(c)(3) and 501(c)(4) organizations prior Forms 990 or 990-E27 II Yes,*complete Schedule L, Part II  58 cection 501(c)(3) and 501(c)(4) organizations. Finer amount of tax included any endagers of the section of the complete Schedule L, Part II  59 cection 501(c)(3) and 501(c)(4) organizations is prior Forms 990 organization managers or dequalited persons during the part year.						
and proxy tax requirements?    If Yes, 'has it filed a tax return on Form 990-T for this year?	а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting,				
b If Yes, *nas it field a tax return on Form 990-T for this year?  5 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes, *  5 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes, *  5 Did the organization flat Form 1120-PQL for this year?  5 Did the organization flat Form 1120-PQL for this year?  5 Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?  5 Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?  5 Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?  5 Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?  5 Did the organization borrow from, or make any loans to the organization trustee.  5 Did the organization borrow from, or make any loans to the organization end of the organization of the organization of the organization of the organization should and the organization. Such as a prior year, and that the transaction during the year under sections 4912, 4955, and 4958  6 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  6 Section 501(c)(3) and 501(c)(4) organization			35a		х	
ocomplete applicable parts of Sch. N  37a   Chief amount of political expenditures, direct or indirect, as described in the instructions.  ▶ 37a   O.  37b   X  37a   Chief amount of political expenditures, direct or indirect, as described in the instructions.  ▶ 137a   O.  37b   X  37a   One of the amount of political expenditures, direct or indirect, as described in the instructions.  ▶ 137a   O.  37b   X  37a   One of the amount of political expenditures, direct or indirect, as described in the instruction in a prior year and still outstanding at the end of the period covered by this return?  ▶ 17c   Chief   Chi	ь	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	N/		
The comparison of political expenditures, direct or indirect, as described in the instructions.  □ 0 b diffe organization like Form 1120-PCL for this year?  □ 10 the organization before from 1120-PCL for this year?  □ 11 year, complete Schedule L, Part II and enter the total amount involved  □ 11 year, complete Schedule L, Part II and enter the total amount involved  □ 11 year, complete Schedule L, Part II and enter the total amount involved  □ 11 year, complete Schedule L, Part II and enter the total amount involved  □ 11 year, complete Schedule L, Part II and enter the total amount involved  □ 11 year, complete Schedule L, Part II and enter the total amount involved  □ 11 year, complete Schedule L, Part II and enter the total amount involved  □ 11 year, complete Schedule L, Part II and enter the total amount involved  □ 12 year, and that the graph of the part II and the section 4912 ▶ N/A is section 4912 ▶ N	36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes,"				
37a Enter amount of political expenditures, direct or indirect, as described in the instructions.    D did the organization the Form 1120-PCL for this year?  37b		complete applicable parts of Sch. N	36		Х	
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?  38b N/A  39 Section 501(c)(7) organizations. Enter: a inhation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ N/A  39 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified persons in a prior year, and that the transaction has not been reported on any of the organizations promise professor in a prior year, and that the transaction has not been reported on any of the organizations. Enter amount of tax imposed on organization immangers or disqualified persons during the year under sections 4912, 4955, and 4958  4 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization immangers or disqualified persons during the year under sections 4912, 4955, and 4958  5 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations. At any time during the tax year, was the organization a parity to a prohibited tax shelter transaction? If Yes, "complete Form 8886-T  40e X  41 List the states with which a copy of this return is filed. ► NONE  42a The organization books are in care of ► MTKE EVANS  Telephone no. ► 3 08 – 3 9 0 – 3 4 2 2  Located at ≥ 210 N. WALINUT ST., GRAND ISLAND, NE  21P+4 ► 68801  44b A 1 A 21 N. WALINUT ST., GRAND ISLAND, NE  38b N/A  42c X  42c X  44c X  45c No  44c X  45c No  44d X  45c No  44d X  45c No  44d X  45d No  44d X  45d No  44d X  45d No  44d No  4	37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions.				
m a prior year and still outstanding at the end of the period covered by this return?  b   1   Yes, complete Schedule L, Part II and enter the total amount involved 3   Section 501(c)/(7) organizations. Enter:   a   Initiation fees and capital contributions included on line 9   b   Gross receipts, included on line 9, for public use of club facilities 3   Section 501(c)(3) organizations. Enter:   a   Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:   section 4911	b	Did the organization file Form 1120-POL for this year?	37b		X	
b If Yes,* complete Schedule L, Part II and enter the total amount unvolved  39 Section 501(c)(7) organizations. Enter: a initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities  40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911   N/A; section 4912  N/A; section 4955  N/A  b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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 organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  C Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  C Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax in line 40c reimbursed by the organization organization  e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes,* complete Form 8886-1  List the states with which a copy of this return is filed.  NONE  11 Extension of the copy of the return is filed.  NONE  12 If Horganization's books are in care of MIKE EVANS  Telephone no.  308-390-3422  Located at 12 O. N. WALNUTE ST. , GRAND ISLAND, NE  21 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  e At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If Yes,* enter the name of the foreign country:  Section 4947(a)(1) nonexempt charitable trusts fling Form 990-EZ in lieu of Form 1041 - Check here and enter the amount	38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made				
39 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities  40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4955 ▶ N/A b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction during the year or is it 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-E27 If Yes, complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4959  A Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 8886-1  L st the states with which a copy of this return is filed. ▶ NONE  42a The organization's books are in care of ▶ MIKE EVANS Telephone no. ▶ 30.8 – 39.0 – 34.22  Located at ▶ 210 N. WALNUT ST., GRAND ISLAND, NE ZIP+4 ▶ 68.80.1  b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a hinancial account in a foreign country; ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If Yes, enter the name of the foreign country: ▶  Section 4947(a)(1) nonexpert chartable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  42b X  Yes No  44c X  Late of the		in a prior year and still outstanding at the end of the period covered by this return?	38a		X	
a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities  Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4955 ▶ N/A  b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 ▶ N/A c Section 501(c)(3) and 501(c)(4) organization's prior Forms 990 or 990-E2? If Yes, complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the tax year, was the organization a party to a prohibited tax sheller transaction? If Yes, complete Form 8866-T  List the states with which a copy of this return is filed. ▶ NONE  11 List the states with which a copy of this return is filed. ▶ NONE  12 Telephone no. ▶ 308-390-3422 Located at ▶ 210 N. WALNUT ST., GRAND ISLAND, NE Located at ▶ 210 N. WALNUT ST., GRAND ISLAND, NE Located at ▶ 210 N. WALNUT ST., GRAND ISLAND, NE Located at ▶ 210 N. WALNUT ST., GRAND ISLAND, NE Located at ▶ 210 N. Walnut New Companization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial accountry Yes No accountry 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  1 Yes No 1 Yes, enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for Form 990-E2 in lieu of F	b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A				
b Gross receipts, included on line 9, for public use of club facilities  40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4955 ▶ N/A  b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 excess benefit transaction during the year or is it 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-E27 if Yes,* complete Schedule L, Part 1  c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations. All any time during the tax year, was the organization a party to a prohibited tax sheller transaction? If Yes,* complete Form 8866-T  41 List the states with which a copy of this return is filed. ▶ NONE  42 The organization's books are in care of ▶ MIXE EVANS  Telephone no. ▶ 30.8 – 3.90 – 3.42.2  Located at ▶ 2.10 N. WALNUT ST., GRAND ISLAND, NE  2IP + 4 ▶ 68.80.1  b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country; ▶  See the instructions for exceptions and filing requirements for Form TD F.90-22.1, Report of Foreign Bank and Financial Accounts  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  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  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  Yes No  42c  X  If Yes,* enter the name of the foreign country: ▶  43	39	Section 501(c)(7) organizations. Enter:				
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4915 ▶ N/A  b Section 501(c)(3) and 501(c)(4) organizations. Did the organization again any section 4958 excess benefit transaction during the year or is it 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-E27 If Yes,* complete Schedule L, Part I  c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes,* complete Form 8886-T  40e	a	Initiation fees and capital contributions included on line 9 39a N/A				
section 4911 N/A ; section 4912 N/A ; section 4955 N/A  b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4956 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a priory year, and that the transaction has not been reported on any of the organization's pror Forms 990 or 990-E27 If 'Yes,' complete Schedule L, Part I  c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization organization.  e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T  1 List the states with which a copy of this return is filled.  NONE  1 Telephone no.  3 08 - 3 9 0 - 3 4 2 2  Located at 2 1 0 N. WALNUT ST., GRAND ISLAND, NE  2 I/P 4 6 8801  b Al any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country;  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  1 Yes No  42b	b	Gross receipts, included on line 9, for public use of club facilities  39b N/A				
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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  c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations. All any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, "complete Form 8886-T  List the states with which a copy of this return is filed.  NONE  10	40 a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:				
year or is it 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-EZ2 If Yes,* complete Schedule L, Part I  40b N/A  40c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  40c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes,* complete Form 8886-T  41c List the states with which a copy of this return is filed. ► NONE  421c The organization's books are in care of ► MIKE EVANS  Clacated at ► 210 N. WALNUT ST., GRAND ISLAND, NE  BAT any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  C At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If Yes,* enter the name of the foreign country: ►  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year  40c VX  41c VS  42c VX  42c VX  42c VX  43c VS  44c VS  44c VS  45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If Yes,* Form 990 must be completed instead of Form 990-EZ  45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If Yes,* Form 990 must be completed instead of Form 990-EZ		section 4911 $\blacktriangleright$ ; section 4912 $\blacktriangleright$ ; section 4955 $\blacktriangleright$ $N/A$				
has not been reported on any of the organization's prior Forms 990 or 990-EZ? If Yes,* complete Schedule L, Part I  c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization  e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes,* complete Form 8886-T  List the states with which a copy of this return is filed.  NONE  1 Telephone no. 308-390-3422  Located at 210 N. WALNUT ST., GRAND ISLAND, NE  Located at 210 N. WALNUT ST., GRAND ISLAND, NE  2 IP +4 68801  b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country; (such as a bank account, securities account, or other financial account in a foreign country:  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  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  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If Yes,* enter the name of the foreign country:  426 X  1 Od the organization maintain any donor advised funds? If Yes,* Form 990 must be completed instead of Form 990-EZ  45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If Yes,* Form 990 must be completed instead of Form 990-EZ	b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the				
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations. At any time during the tax year, was the organization a party to a prohibited tax sheller transaction? If Yes,* complete Form 8886-T  40		year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction				
or disqualified persons during the year under sections 4912, 4955, and 4958  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization organization  e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes,* complete Form 8886-T  40e  It is the states with which a copy of this return is filed.  NONE  Telephone no.  308-390-3422  Located at  210 N. WALINUT ST., GRAND ISLAND, NE  Located at  210 N. WALINUT ST., GRAND ISLAND, NE  17elephone no.  308-390-3422  If Yes,* enter the name of the foreign country (such as a bank account, securities account, or other financial accounts  18et instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  18et in instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  19et A tany time during the calendar year, did the organization maintain an office outside of the U S.?  19et Yes,* enter the name of the foreign country:  20et and 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year  40 Did the organization maintain any donor advised funds? If Yes,* Form 990 must be completed instead of Form 990-EZ  41 Form 990-EZ  42 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year  42 Did the organization maintain any donor advised funds? If Yes,* Form 990 must be completed instead of Form 990-EZ  43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year  44 X  45 Is any related organization a controlled entity of the organization within the meaning of section 51		has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I				
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization  e All organization. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T  40e	C					
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T  40 List the states with which a copy of this return is filed.    NONE  1 Telephone no.    308-390-3422  1 The organization's books are in care of    MIKE EVANS    Located at    210 N. WALINUT ST., GRAND ISLAND, NE    At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial accounts?  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  At any time during the calendar year, did the organization maintain an office outside of the U S.?  If "Yes," enter the name of the foreign country:    43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year    44 N/A  45 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ    45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ    45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ    45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ     45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ     46 Is any related organization a controlled entity of the organization within th		or disqualified persons during the year under sections 4912, 4955, and 4958				
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T  List the states with which a copy of this return is filed. ► NONE  Telephone no. ► 308-390-3422  Located at ► 210 N. WALNUT ST., GRAND ISLAND, NE  Located at ► 210 N. WALNUT ST., GRAND ISLAND, NE  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial accounts?  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  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If "Yes," enter the name of the foreign country: ►  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Part of the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  444 X  Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	d					
transaction? If "Yes," complete Form 8886-T  List the states with which a copy of this return is filed.    NONE  10						
41 List the states with which a copy of this return is filed. ▶ NONE  42a The organization's books are in care of ▶ MIKE EVANS Telephone no. ▶ 308-390-3422  Located at ▶ 210 N. WALNUT ST., GRAND ISLAND, NE ZIP+4 ▶ 68801  b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  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  c At any time during the calendar year, did the organization maintain an office outside of the U S.?  If "Yes," enter the name of the foreign country: ▶  43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year  44 N/A  45 Lis any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	е					
42a The organization's books are in care of ►MIKE EVANS  Located at ► 210 N. WALNUT ST., GRAND ISLAND, NE  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  C At any time during the calendar year, did the organization maintain an office outside of the U.S.?  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  C At any time during the calendar year, did the organization maintain an office outside of the U.S.?  42c			40e		<u> X</u>	
Located at > 210 N. WALNUT ST., GRAND ISLAND, NE  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial accounts)?  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  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If "Yes," enter the name of the foreign country:   43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year  44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ			^ 2	400		
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over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  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  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If "Yes," enter the name of the foreign country:  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  1 Yes No  Yes No  Yes No  If "Yes," Form 990-EZ  Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ			000	Ι		
account)?  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  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If "Yes," enter the name of the foreign country:  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  140 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  151 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  152 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	D			Vac	No	
See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts   Calculate the calendar year, did the organization maintain an office outside of the U.S.?			42h	103		
See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  c At any time during the calendar year, did the organization maintain an office outside of the U S.?  If "Yes," enter the name of the foreign country:  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 X		·	420			
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If "Yes," enter the name of the foreign country:  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  43 N/A  Yes No  44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 X						
If "Yes," enter the name of the foreign country:  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  Und the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  At Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here  At Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here  At Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here  At Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here  At Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here  At Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here  At Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here  At Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here  At Section 4947(a)(1) nonexempt charitable trusts filing Form 990 must be completed instead of Form 990-EZ in lieu of Form 990 must be completed instead of Form 990-EZ in lieu of Form 990 must be completed instead of Form 990-EZ in lieu of Form 1041 - Check here  At Section 4947(a)(1) nonexempt charitable trusts filing Form 990 must be completed instead of Form 990-EZ in lieu of Form 990 must be completed instead of Form 990-EZ in lieu of Form 990-EZ in lieu of Form 1041 - Check here  At Section 4947(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(	c		42c		x	
A3 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 X	·		720			
and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 X	43			•		
Yes No  44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  44 X  45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 X			N/A			
Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  44 X  45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 X						
Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  44 X  45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 X			į	Yes	No	
Form 990-EZ  44 X  45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 X	44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of		-		
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 X			44		Х	
	45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be				
Form <b>990-EZ</b> (2009)		completed instead of Form 990-EZ	45		Х	
			orm 9	90-EZ	(2009)	

Form 990-EZ (20	WORKED TOOL TOOL TOOL TOOL TOOL TOOL TOOL TOO	51-0246089	Page 4
Part VI S	Section 501(c)(3) organizations and section 4947(a)(1) nonexem	pt charitable trusts only. All section	501(c)(3)

	organizations and section 4947(a)(1) nonexempt charitable and 51.	e trusts must answer question	ns 46-49b and con	nplete the tables	for lines	50
46 Did	the organization engage in direct or indirect political campaign activities	s on behalf of or in opposition to o	candidates for public		Yes	No
	e? If "Yes," complete Schedule C, Part I				46	
<b>47</b> Did 1	the organization engage in lobbying activities? If "Yes," complete Sc	hedule C, Part II			47	
48 Is th	e organization a school as described in section 170(b)(1)(A)(ii)? If "Ye	es," complete Schedule E			48	
<b>49a</b> Did	the organization make any transfers to an exempt non-charitable related	d organization?			19a	
b If "Y	es," was the related organization a section 527 organization?			<u>[</u>	19b	
	plete this table for the organization's five highest compensated employ \$100,000 of compensation from the organization. If there is none, ent		s, trustees and key er	mployees) who ead	ch received	more
	(a) Name and address of each employee paid more than \$100,000 N/A	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Exp accoun other allo	t and
f Tota	I number of other employees paid over \$100,000	<b>&gt;</b>				
	iplete this table for the organization's five highest compensated independent inization. If there is none, enter "None." ${f N/A}$	ndent contractors who each recei	ved more than \$100,	.000 of compensat	ion from t	16
	(a) Name and address of each independent contractor paid mor	e than \$100,000	(b) Type of ser	vice (c)	Compens	ation
						•••
<b>d</b> Tota	Il number of other independent contractors each receiving over \$100,0	00	<b>&gt;</b>			
Sign Here	Under penalties of perjury Adeclare that I have examined this return, including correct, and complete Declaration of preparer (other than officer) is based on at Signature of officer	accompanying schedules and statemer il information of which preparer has any	its, and to the best of my knowledge	knowledge and belied by knowledge and believe to knowledge and believe		
	Type or print name and title	us Mgr.				
Paid Preparer' Use Only	peter to appropriate to the second	10/29/10 emp	oloyed		7259	•
	Firm's name (or yours MCDERMOTT AND MILLER	PC	EIN D		8676	
	rt self-employed), PO BOX 1767 address, and ZIP+4 GDAND TSLAND NE 6880	0 1767	Phon no.		0 50	- ^
Marchine	GRAND ISDAND, NE 0000.				2-785	
iviay the II	RS discuss this return with the preparer shown above? See instructions	S		<u>▶ \X</u> Fo	<u> </u>	<b>No</b> 2 (2009

FORM 990-EZ	OTHER EXPENSES	STATEMENT 1
DESCRIPTION		AMOUNT
BENEFIT/WAGE SURVEY		5,302.
DONATION		100.
RECRUITING		454.
STEWARD TRAINING		7,366.
REGISTRATION FEES		590.
BANK FEES		30.
TRAVEL		14,433.
COMPUTER SUPPLIES		307.
OFFICE SUPPLIES		3,663.
MISCELLANEOUS EXPENSES		455.
RECOGNITION		1,055.
BUILDING REPAIRS & MAINTENANCE		300.
TOTAL TO FORM 990-EZ, LINE 16		34,055.

FORM 990-EZ PAYM	IENTS TO A	AFFILIATES	STATEMENT	2
AFFILIATE'S NAME		AFFILIATES ADDRESS		
INTERNATIONAL BROTHERHOOD OF ELE WORKERS, AFL-CIO, CLC	CTRICAL	900 SEVENTH STREET N.V	<b>J</b> .	
PURPOSE OF PAYMENT		WASHINGTON, DC 20001	AMOUNT	
DUES			50,02	25.
AFFILIATE'S NAME		AFFILIATES ADDRESS		
NEBRASKA STATE UTILITY WORKERS CONFERENCE/JIM SOJKA, FINANCIAL		8010 S. 94TH ST.		
SECRETARY		LA VISTA, NE 68128		
PURPOSE OF PAYMENT			AMOUNT	
DUES			1,72	28.
AFFILIATE'S NAME		AFFILIATES ADDRESS		
NEBRASKA STATE COUNCIL OF ELECTR WORKERS/RICH MICHEL FINANCIAL SE		5951 EAGLE RIDGE DR.		
		NEBRASKA CITY, NE 6843	LO	
PURPOSE OF PAYMENT			AMOUNT	
DUES			1,45	59.
AFFILIATE'S NAME		AFFILIATES ADDRESS		
CENTRAL NEBRASKA CENTRAL LABOR		3302-B W. CAPITAL AVE	•	
COUNCIL/AL OGG, FINANCIAL SECRET	'ARY	GRAND ISLAND, NE 68803	3	
PURPOSE OF PAYMENT			AMOUNT	
DUES			22	25.
TOTAL INCLUDED ON FORM 990-EZ, I	.TNE 10		53,43	37

FORM 990-EZ	CASH GRANTS	AND ALLOCATI	ONS	STATEMENT	3
CLASS OF ACTIVITY/GRAN	TEE'S NAME AND	ADDRESS	GRANTEE'S RELATIONSHIP	AMOUN	Г
SCHOLARSHIP FOR TUITION	1 & BOOKS		CHILD OF MEMBER	R 10	00.
TOTAL INCLUDED ON FORM	990-EZ, LINE 1	0		1 (	00

FORM 990-EZ	INCOME AND COST OF GOODS SOLD INCLUDED ON PART I, LINE 7A		STATEMENT 4
INCOME			
1. GROSS RECEIPTS 2. RETURNS AND ALLOWANG 3. LINE 1 LESS LINE 2	CES	694	694
5. GROSS PROFIT (LINE 3	(LINE 13)	694	
COST OF GOODS SOLD			
7. MERCHANDISE PURCHASI 8. COST OF LABOR 9. MATERIALS AND SUPPL		0 1,358	
10. OTHER COSTS 11. ADD LINES 6 THROUGH	10		1,358
	YEAR	664	694

FO	RM 990-EŻ	INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS		s	TATE	MENT	5
A)	DIRECTLY OR	CANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL STRACT?	[	]	YES	[X]	NO
B)		SANIZATION, DURING THE YEAR, PAY PREMIUMS, INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?.	. [	]	YES	[X]	NO

STATEMENT

DUES PAID ON BEHALF OF EACH MEMBER OF IBEW LOCAL 1597 TO ITS INTERNATIONAL OFFICE, AFL/CIO, CENTRAL NEBRASKA LABOR COUNCIL, NEBRASKA STATE UTILITY WORKERS AND NEBRASKA STATE ELECTRICAL WORKERS. THE OBJECTIVE IS TO PROVIDE IBEW LOCAL 1597 MEMBERS (APPROXIMATELY 293) WITH A VOICE IN AND BENEFITS FROM THE STATE AND NATIONAL ORGANIZATIONS.

STATEMENT

7

BARGAINING SERVICES, INCLUDING SURVEYS, LEGAL FEES AND WAGES. THE OBJECTIVE IS TO BARGAIN ON BEHALF OF APPROXIMATELY 293 MEMBERS FOR FAIR BENEFITS AND WAGES AND A SAFE WORKING ENVIRONMENT, WHICH REQUIRES THE CONDUCTION OF SURVEYS AND LEGAL REPRESENTATION.

STATEMENT

8

REPRESENTATION SERVICES, INCLUDING REPRESENTATION AT EIGHT CONFERENCES/MEETINGS AND LEGAL FEES. THE OBJECTIVE IS TO PROVIDE LEGAL REPRESENTATION FOR MEMBERS AND TO REPRESENT APPROXIMATELY 293 MEMBERS AT STATE AND NATIONAL CONFERENCES AND MEETINGS.

12

STATEMENT

9

LOCAL 1597 IBEW UTILITIES UNION PROVIDES COLLECTIVE BARGAINING FOR ITS MEMBERS TO RECEIVE FAIR BENEFITS AND WAGES AND TO PROVIDE A SAFE WORKING ENVIRONMENT FOR ITS MEMBERS.

FORM 990-EZ OTHER PROGRAM SERVICES	Sī	PATEMENT 1
DESCRIPTION	GRANTS	EXPENSES
TRAINING AND EDUCATION	0.	13,075.
TOTAL TO FORM 990-EZ, LINE 31		13,075.

Form 8868 (Rev. 4-2009)		Page 2
<ul> <li>If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this be Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed</li> <li>If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).</li> </ul>		<b>▶</b> X 8868.
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	opies r	needed)
Type or print Name of Exempt Organization INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS 1597 LOCAL	Emp	loyer identification number
File by the extended due date for filling the return See instructions  City, town or post office, state, and ZIP code. For a foreign address, see instructions  GRAND ISLAND, NE 68802-0010	For II	RS use only
Check type of return to be filed (File a separate application for each return)  Form 990  The form 990-EZ  Form 990-FE  Form 990-FE	== :	orm 5227 Form 8870 orm 6069
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	d Form 8868.
MIKE EVANS  • The books are in the care of ▶ 210 N. WALNUT ST GRAND ISLAND, NE 68 Telephone No ▶ 308-390-3422 FAX No ▶  • If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If the box ▶ If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all 1 request an additional 3-month extension of time until NOVEMBER 15, 2010.  5 For calendar year 2009, or other tax year beginning , and ending .  6 If this tax year is for less than 12 months, check reason Initial return Final return  7 State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO PREPARE AN ACCURATE TAX Reserved.	is is fo	ers the extension is for.  Change in accounting period
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit		
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions  Signature and Verification	8c	\$ N/A
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the it is true, correct, and complete, and that I am authorized to prepare this form.		
Signature ► Title ► CPA	Date	<b>P</b>

Form **8868** (Rev. 4-2009)

Signature >

Form 8868 (Rev. 4-2009)	Page 2			
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and chec	k this box			
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previous	usly filed Form 8868.			
If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).				
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the origin	nal (no copies needed).			
Name of Exempt Organization	Employer Identification number			
Type or INTERNATIONAL BROTHERHOOD OF ELECTRICAL	1			
workers 1597 LOCAL	47-0785547			
File by the catended Number, street, and coom or suite no. If a P.O. box, see instructions.	For IRS use only			
the date for P O BOX 10				
ream See City, town or post office, state, and ZIP code. For a foreign address, see instructions.				
Check type of return to be filed (File a separate application for each return):				
Form 990 X Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 104				
Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 472	0 Form 6069			
STOPI Do not complete Part II if you were not already granted an automatic 3-month extension on a	previously filed Form 8868.			
MIKE EVANS				
• The books are in the care of ▶ 210 N. WALNUT ST GRAND ISLAND, N	R 68801			
Telephone No. ► 308-390-3422 FAX No. ►				
If the organization does not have an office or place of business in the United States, check this box				
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this				
box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.				
4 I request an additional 3-month extension of time until NOVEMBER 15, 2010.				
5 For calendar year 2009, or other tax year beginning, and e	nding			
6 If this tax year is for less than 12 months, check reason: Initial return	n Change in accounting period			
7 State in detail why you need the extension				
ADDITIONAL TIME IS NEEDED TO PREPARE AN ACCURATE T	AX RETURN			
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any				
nonrefundable credits. See instructions.	\$			
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimate	d   j			
tax payments made. Include any prior year overpayment allowed as a credit and any amount paid	1-4			
previously with Form 8868.	80 \$			
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, depo	d 1			
with FTO coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instru	retions.   8c   \$ N/A			
Signature and Verification				
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that Aan/authorized to prepare this form.				
//// / 11/0	Date > 8 13/10			
Signature CPA	Form 8868 (Rev. 4-2009)			
·				

Form 8868 (Rev. April 2009) Department of the Treasury Internal Revenue Service

## Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 4-2009)

	you are filing for an Automatic 3-Month Extension, complete only Part I and check this box you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	 form)	<b>▶ </b> 🛣	
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.				
Pa	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		<del></del>	
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete  Part I only				
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.				
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.urs.gov/efile and click on e-file for Charities & Nonprofits.				
Type print	INTERNATIONAL BROTHERHOOD OF ELECTRICAL	Emp	loyer identification number	
File by	WORKERS 1597 LOCAL	4	7-0785547	
dus date for Rimg your return. See P O BOX 10				
Instructions  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  GRAND ISLAND, NE 68802-0010				
Check type of return to be filed (file a separate application for each return):				
Form 990				
MIKE EVANS  • The books are in the care of ▶ 210 N. WALNUT ST GRAND ISLAND, NE 68801				
Telephone No. ► 308-390-3422 FAX No. ►				
	he organization does not have an office or place of business in the United States, check this box			
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box > If this is for part of the group, check this box > and attach a list with the names and EINs of all members the extension will cover.				
I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until  AUGUST 15, 2010 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:  X calendar year 2009 or				
	tax year beginning, and ending		<u>.</u> .	
2	If this tax year is for less than 12 months, check reason: Initial return Final return		Change in accounting period	
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	nonrefundable credits. See instructions.	3a	\$	
	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3ь	\$	
	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,		<del></del>	
,	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3с	s N/A	
Cautio	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-1	EO for payment instructions	

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.