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Short Form
Return of Organization Exempt From Income TaxUnder 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(b)(13) 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.

OMB No. 1545-1150

2009

Open to Public
Inspection

A For the 2009 calendar year, or tax year beginning

, 2009, and ending

, 20

B Check if applicable		C Name of organization IBEW LOCAL 2357		D Employer identification number 55-0540394	
<input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		Please use IRS label or print or type. See Specific Instructions.		Number and street (or P.O. box, if mail is not delivered to street address) 673 HALLECK RD City or town, state or country, and ZIP + 4 FAIRMONT, WV 26554	
				E Telephone number 3042913130	
				F Group Exemption Number ►	

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

G Accounting Method: Cash Accrual
Other (specify) ►

I Website: ►

H Check ► if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).J Tax-exempt status (check only one) — 501(c) (5) ► (insert no.) 4947(a)(1) or 527K Check ► if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$

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

	Revenue	1 Contributions, gifts, grants, and similar amounts received	5a Gross amount from sale of assets other than inventory	5b Less: cost or other basis and sales expenses	5c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	6a Gross revenue (not including \$ reported on line 1)	6b Less: direct expenses other than fundraising expenses	6c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	7a Gross sales of inventory, less returns and allowances	7b Less: cost of goods sold	7c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	8 Other revenue (describe ►)	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	10 Grants and similar amounts paid (attach schedule)	11 Benefits paid to or for members	12 Salaries, other compensation, and employee benefits	13 Professional fees and other payments to independent contractors	14 Occupancy, rent, utilities, and maintenance	15 Printing, publications, postage, and shipping	16 Other expenses (describe ►)	17 Total expenses. Add lines 10 through 16	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	20 Other changes in net assets or fund balances (attach explanation)	21 Net assets or fund balances at end of year. Combine lines 18 through 20
1	0	0	62132	394	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
3	62132	394	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
4	394	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
5c	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
6c	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
7c	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
9	62526	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
10	19260	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
11	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
12	24685	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
13	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
14	3263	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
15	899	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
16	13818	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
17	61925	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
18	601	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
19	66558	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
20	1258	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
21	68417	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year	
22 Cash, savings, and investments	67816	22	68417
23 Land and buildings	0	23	0
24 Other assets (describe ►)	0	24	0
25 Total assets	67816	25	68417
26 Total liabilities (describe ►)	(1258)	26	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	66558	27	68417

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

What is the organization's primary exempt purpose?

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)

28				
(Grants \$)	If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	28a		
29				
(Grants \$)	If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	29a		
30				
(Grants \$)	If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	30a		
31 Other program services (attach schedule)				
(Grants \$)	If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	31a		
32 Total program service expenses (add lines 28a through 31a)				32

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
DOUGLAS W. TAYLOR 71 ROBINSON LN WEIRTON WV 26062	PRES/10 HRS PER WK	3825		1074
DALE P. MCCRAY 25049 VETERANS MEM HWY TERRA ALTA WV 26764	VP/10 HRS PER WK	3378		1872
MICHAEL J. CLARK 2144 ROLLING ACRES RD NEW CUMBERLAND WV 2604	UNIT CHAIR 5HRS PER WK	1978		351
JOSEPH A. BLANKENSHIP 18223 BRANDONVILLE PIKE BRUCETON MILLS 26525	UNIT CHAIR 5HRS PER WK	2442		428
DENNIS D. KELLEY 2633 ELDERSVILLE RD FOLLANSBEE WV 26037	TREA. /5HRS PER WK	1875		72
RICHARD C. WINDON 673 HALLECK RD FAIRMONT WV 26554	FIN.SEC. 10HRS PER WK	1636		201
TIMOTHY L. HAIRSTON 197 MARSHALL AVE WESTOVER WV 26501	REC. SEC. 10HRS PER WK	4055		628
TIMOTHY J. CRISS 111 EUCLID AVE CLARKSBURG WV 26301	UNIT CHAIR 5HRS PER WK	1926		414
RICHARD A. MICHAEL 153 BROOMSAGE RD FAIRMONT WV 26554	AUDIT COMM. 10HRS PER	251		17
DAVID F. RYAN 268 TOMS RUN RD MORGANTOWN WV 26508	AUDIT COMM. 10 HRS PER	251		17
BRIAN S. MISCH RD 1 BOX 2375 WELLSBURG WV 26070	MEMBER	387		183
GERALD D. FARKAS 2301 BOWMAR RD TUNNELTON WV 26444	MEMBER	243		108
KARL G. TAYLOR 308 DICKSON DR MIDWAY PA 15060	MEMBER	478		11
MARK A. FALKENSTEIN PO BOX 259 BRUCETON MILLS WV 26525	MEMBER	193		11
TERRY M. DEUESSENBERRY 2310 MORNINGSIDE DR MORGANTOWN WV 26508	member	251		11

Part V Other Information (Note the statement requirements in the instructions for Part V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	✓
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	✓
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did 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(e) notice, reporting, and proxy tax requirements?	35a	✓
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a	37a	
b Did the organization file Form 1120-POL for this year?	37b	✓
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?	38a	✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations. Enter:	39a	
a Initiation fees and capital contributions included on line 9	39b	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► _____ ; section 4912 ► _____ ; section 4955 ► _____	40b	
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	40e	
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.		
41 List the states with which a copy of this return is filed. ► _____		
42a The organization's books are in care of ► RICHARD C. WINDON Telephone no. ► 3042913130 Located at ► 673 HALLECK RD- FAIRMONT, WV ZIP + 4 ► 26554		
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)?	42b	✓
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 .	42c	✓
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 ► 43 □		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	✓
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	✓

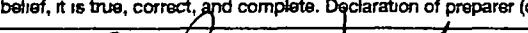
Part VI **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

46	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	Yes	No
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	46	
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	47	
49a	Did the organization make any transfers to an exempt non-charitable related organization?	48	
b	If "Yes," was the related organization a section 527 organization?	49a	
50	Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."	49b	

f Total number of other employees paid over \$100,000 ►

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

d Total number of other independent contractors each receiving over \$100,000 . . ►

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
		1322-10	Date	
	Signature of officer			
		Type or print name and title		
Paid Preparer's Use Only	Preparer's signature 	Date	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (See Instructions) 
	Firm's name (or yours if self-employed), address, and ZIP + 4 			EIN 
				Phone no 

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Explanation for line 20.

Amount of \$857 was added on the 2007 return line 26B when it should have been subtracted