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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)

OMB No 1545 0047

2009

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

		Ear #	ho 2009 calon	darvoar	or tax year begi	nning		20	ing an	d endir						
				uar year,	C Name of organ			, 20	103, all	a enan	<u>'9</u>	D Emple	over iden	tification	Number	
	В		if applicable	Please use	1							· ·	-		Number .	
		⊢ ^	ddress change	IRS label or print	ILA CLERK					 :			-6026		. —	
		N	ame change	or type. See	Number and st	reet (or PO box	ıf mail is n	not delivered to stree	etadodr)	Room/s	suite	E Telep	hone num	iber		
		ln In	nitial return	specific	2113 COUR	TLAND AV	ENUE					(84	<u>43) 7</u>	23-1	774	
		T	ermination	Instruc- tions.	City, town or co	ountry		St	ate ZIP	code +	\$					
			mended return		CHARLESTO	N		s	C 2	9403		G Gross	receipts	\$ 33	4,846	i .
		$\prod_{\mathbf{A}}$	pplication pending	F Name a	and address of princip	oal officer					H(a) Is this	a group ret	urn for aff	iliates?	Yes	X No
		ш.,	, , , , , , , , , , , , , , , , , , ,		RIPLING 2113 C		VE CHA	RIESTON	SC 2	9403	H(b) Are all	affiliates in	cluded?		Yes	No
	_	Tax	k-exempt statu			(insert no)	VE CIII	4947(a)(1) or		527	If 'No,'	attach a lis	it (see in:	structions)	, —	ш
	!				(6) (3)	· (IIISELLIIO)		1 4347 (a)(1) Or		327	ł <u>.</u>					
	<u></u>		bsite: ► N/		<u> </u>				Γ	-	H(c) Group					
	<u>K</u>		n of organization	X Corpora	ation Trust	Association	Other	· >	L Year	of Forma	tion 195	<u> </u>	State of	legal dom	icile SC	
	Pa	<u>rt l</u>	Summa													_
		1	Briefly descri	be the org	ganization's miss	sion or most s	significa	nt activities	PROM	<u> 10TE</u>	SOLIDA	RITY_	<u>AND</u> I	MEMBE	CR WEJ	FARE
	0															
_	anc															
2010	E	E														
7	ò	2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its assets														
0	94	3			bers of the gove									154		
ಾ	89	2 Check this box I if the organization discontinued its operations or disposed of more than 25% of its ass 3 Number of voting members of the governing body (Part VI, line 1a) . 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of employees (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7 Total gross unrelated business revenue from Part VIII Isolumn (C), use 13											154			
Z	¥											5	25			
N	cti										6	0				
	•		-		usiness revenue		•						7 a		331	<u>,551.</u>
Ш		b	Net unrelated	business	taxable income	from Form 9	90-T, lır	ne 34					7b			
SCANNED								CENTED:	Ĭ		P	rior Yea	r	C	urrent Y	ear
4		8	Contributions	and gran	ts (Part VIII, line	عم 🖟 (1h e		36.400	769		<u></u>					
$\ddot{\circ}$	Š	9	Program serv	reven	ue (Part VIII, lin	e 2g)			OSO-						331	,551.
Š	Revenue	10	Investment in	icome (Pa	art VIII, column (A), lines (3) 4	, MAY 0	n <u>l</u> 7 2010							3	,295.
	Œ	11	Other revenue	e (Part VI	II, column (A), I	ines 5, 6 ດື, ຊ ີດ	, 9c, 10	c, and 11e)	SS							
		12	Total revenue	e – add Iir	nes 8 through 11	(must equat	PartV	II, column (A),	Tine 2	2)					334	,846.
		13	Grants and si	ımılar amo	ounts paid (Part	IX, column (AL HEEL	JBN, UI	1							
		14	Benefits paid	to or for a	members (Part I	X, column (A), line 4)								-
		15			nsation, employe				es 5-10))					241	,547.
	Expenses				g fees (Part IX,					,						
	ë							,								
	ᄶ	b Total fundraising expenses (Part IX, column (D), line 25) ▶														
		17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)								173	<u>,565.</u>					
		18	Total expense	es Add Iır	nes 13-17 (must	equal Part IX	ر, colum	in (A), line 25)							415	,112.
		19	Revenue less	expenses	s Subtract line	18 from line 1	2								-80	,266.
	8				·						Begi	nning of	Year	F	nd of Ye	ar
	Net Assets or Fund Balanco	20	Total assets ((Part X. Iu	ne 16)							459,				,548.
	A BB	21	Total liabilitie	• ,	,								224.			,062.
	ž,š			•	•	01.6	00									
		22			nces Subtract	ine ∠≀ trom i	ine Zu		 		<u> </u>	451,	252.		410	<u>,486.</u>
	Га	Part II Signature Block Under penalties of peruly, I declare that I have exampled this return, including accompanying schedules and statements, and to the best of my true, correct/ and complete_Declaration of pleparer wifer. Hand efficient is based on all information of which preparer has any knowledge.														
										of my kno	owledge a	nd belief, i	t is			
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		Here Signature of officer Date								5/15/	10					
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			Type or pr	rint name and	d title								_			
					•	\sim			Date			heck if	P	reparer's i	identifying tions)	number
	Pai		Preparer's	نے	Suc M	Y PAR	1200	₽.	-			elf- nployed I	- V `		-,	
	Pre		signature		ruce /		المناطب		05/	15/1	l l	-				
		er's	Firm's name (or LTS	A L. MCDON	IALD CPA			-1							
	Us	-	yours if self- employed),		KINGSTON							ın ►				
	On	ıy	address, and		MERVILLE			SC 29	483-	230 A			101	31 00	1-60	10
	N.A.:	. Al 1	ZIP + 4				-2 /-		403-	JJ04	IP	hone no	(84		1-684	~~~~
	iviay	tne i	ino aiscuss thi	is return v	vith the preparei	snown abov	e'(see	iristructions)						X Y	res	No

	990 (2		ILA CLERKS &	CHECKERS LOCA	L 1771		57-6	02650	0		Page 2
Par	t III	St	atement of Progran	n Service Accom	plishments		·				
			ribe the organization's m	uission.							
	NON!	E	- 								
			. 								
2		_	anization undertake any	significant program se	rvices during the yea	r which were not lis	sted on the prior			_	
	Form	990 oı	r 990-EZ?			•			Yes	X	No
			cribe these new services								
3	Did th	ne orga	anization cease conducti	ng, or make significar	t changes in how it c	onducts, any progra	am services?		Yes	X	No
			cribe these changes on								
4	Descr	ibe the	e exempt purpose achiev 4) organizations and sec	vements for each of th	e organization's three	largest program s	ervices by expense	s. Section	on 501	(c)(3)	
	exper	ises, a	and revenue, if any, for e	each program service i	reported	t the amount of gra	nts and anocations	to other	5, 1116	totai	
			-								
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48	(Code	·' —) (Expenses \$		including grants of	۶) (Revenue	۶			—,
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4 b	(Code	:) (Expenses \$		including grants of	\$) (Revenue	\$)
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40	(Code) (Expenses \$		including grants of	\$) (Revenue	\$)
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4 d	l Other	progra	am services. (Describe ii	n Schedule O)							
	(Expe	nses	\$	including grants	s of \$) (Rev	enue \$)	
4e	Total	progra	am service expenses 🕨	<u>.</u>							

Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A 1 Х 2 2 Is the organization required to complete Schedule B, Schedule of Contributors? X 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 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II Δ 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 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. 6 X 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 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III 8 Х 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 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 Х Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or Х 11 • Did the organization report an amount for land, buildings and equipment in Part X, line 109 If 'Yes,' complete Schedule D, Part VI Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 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 167 If 'Yes,' complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X • Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If Yes, complete Schedule D, Part X 12 Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12 Х Yes No 12A Was the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 Х 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a Х b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I 14b Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II 15 Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III 16 Х Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I 17 Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II 18 Х Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III 19 Х

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

Х

20

Form 990 (2009) ILA CLERKS & CHECKERS LOCAL 1771

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 United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		х
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		Х
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? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No, 'go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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	1	
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		-, · -
b	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	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		_X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		X
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		Х
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? <i>If 'Yes,' complete Schedule R, Part I</i>	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		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		Х
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	х	
BAA		Form	990 (2009)

Par	t v Statements Regarding Other IRS Fillings and Tax Compliance			
			Yes	No
1 a	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			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 reportable gaming (gambling) winnings to prize winners?	1 c	x	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 25			
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		х
b	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3ь		
4a	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)?	4a		х
b	If 'Yes,' enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		х
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		х
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		X
	If 'Yes,' indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	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-C as required?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business			
9	Sponsoring organizations maintaining donor advised funds.	8		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make any distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	}	İ	
	Section 501(c)(12) organizations. Enter		ŀ	i
а	Gross income from other members or shareholders	ŀ		
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			

BAA

Form **990** (2009)

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.

	Schedule O. See Instructions.				
Sec	ction A. Governing Body and Management				
1.	a Enter the number of voting members of the governor had	1154		Yes	No
		154			
	Did any officer, director, trustee, or key employee have a family relationship or a business relation	· · · · · · · · · · · · · · · · · · ·			
	officer, director, trustee or key employee?		2	Х	
3	Did the organization delegate control over management duties customarily performed by or under of officers, directors or trustees, or key employees to a management company or other person?	the direct supervision	3		х
4	Did the organization make any significant changes to its organizational documents		4		Х
	since the prior Form 990 was filed?				
5	<u> </u>	sets?	5		<u> </u>
6	•	-	6	Х	
7:	a Does the organization have members, stockholders, or other persons who may elect one or more r governing body?	nembers of the	7a	х	
I	b Are any decisions of the governing body subject to approval by members, stockholders, or other pe	ersons?	7b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken the following	during the year by			
i	a The governing body?		8a	х	
ı	b Each committee with authority to act on behalf of the governing body?		8b		Х
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot b organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	e reached at the	9		х
Sec	ction B. Policies (This Section B requests information about policies not requ	ured by the Internal		'	
Rev	renue Code)				
		г		Yes	No
	a Does the organization have local chapters, branches, or affiliates?		10 a		<u> </u>
1	b If 'Yes,' does the organization have written policies and procedures governing the activities of such and branches to ensure their operations are consistent with those of the organization?	chapters, affiliates,	10b		
	Has the organization provided a copy of this Form 990 to all members of its governing body before	filing the form?	11	Х	
	A Describe in Schedule O the process, if any, used by the organization to review this Form 990				
	a Does the organization have a written conflict of interest policy? If 'No,' go to line 13		12a	Х	
	b Are officers, directors or trustees, and key employees required to disclose annually interests that c to conflicts?	ould give rise	12b	x	
•	c Does the organization regularly and consistently monitor and enforce compliance with the policy? I Schedule O how this is done	f 'Yes,' describe in	12c	х	
13	Does the organization have a written whistleblower policy?		13	X	
14	Does the organization have a written document retention and destruction policy?		14	Х	
15	Did the process for determining compensation of the following persons include a review and appropersons, comparability data, and contemporaneous substantiation of the deliberation and decision?	val by independent			
ä	a The organization's CEO, Executive Director, or top management official		15a		_X
ı	b Other officers of key employees of the organization		15b		<u>X</u>
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)			Ì	
16 a	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangementity during the year?	gement with a taxable	16a		<u>x</u>
ı	b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to eval in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization with respect to such arrangements?	aluate its participation ganization's exempt	16b		
Sec	ction C. Disclosures	<u></u>		'	
	List the states with which a copy of this Form 990 is required to be filed South Carolin	a			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 inspection. Indicate how you make these available. Check all that apply)-T (501(c)(3)s only) avail	lable 1	or pul	olic
	Own website X Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, statements available to the public	conflict of interest policy,	and f	ınancı	al
20	State the name, physical address, and telephone number of the person who possesses the books a	and records of the organiz	ation:		
	► ROBERT_STRIPLING 2113 COURTLAND AVE CHARLESTON SC	_29403-3003(84	3)_7	23-1	774

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations'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 employees'
- 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

Check this box if the organization did not compensate any current officer, dire								T	45	
· · ·	(B)	Daniel Daniel		•	•		l. A	(D)	(E)	(F)
Name and Title	Average hours per week	andivide of the state	onstitutional trustee	Offire	a key amployee	an High est compensated employee) रेक्सिक	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
WILLIAM STRIPLING										
ALTERNATE TRUSTEE	4.00	Х						6,783.	0.	0.
NEAL EDGERTON TRUSTEE	4.00	Х				:		7,044.	0.	0.
LANCE MCLAUGHLIN EXECUTIVE BOARD MEMBER	2.00	Х						3,412.	0.	0.
JOHN ALVANOS PRESIDENT	20.00			х				35,560.	0.	0.
RICHARD L HEITERER VICE-PRESIDENT	16.00			х				26,231.	0.	0.
ROY MCPHERSON SECRETARY	4.00			х				6,099.	0.	0.
ROBERT STRIPLING TREASURER	10.00			х				20,194.	0.	0.
DAVID DUNLAP EXECUTIVE BOARD MEMBER	2.00	Х						3,050.	0.	0.
BOARD MEMBER	2.00	Λ						3,030.	· · ·	<u></u>

Part VII Section A. Officers, Directors, Trus		(ey	En			es,	an			loyee		nt.)
(A)	(B)	Base			c)	hat a	anh.	(D)	(E)		(F)	
Name and Title	Average hours per week	├ ─		Officer	т—-	Highest compensated employee	- -	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	ame co	Estimated ount of ou	ther ion on ed
		-		_		ä						_
									·			
		<u> </u>										
~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ 	-											
	-		-									
	-											
									· · · · · · · · · · · · · · · · · · ·			
												
				_								
		ļ										
								:				
1 b Total							◀	108,373.	0.	l		0
2 Total number of individuals (including but not limited from the organization ►	to those	e list	ed a	abov	/e) v	vho	rece	eived more than \$1	00,000 in reportab	le comp	ensati	on
3 Did the organization list any former officer, director of	or trusta	با م	av 6	mnle	OVA	. or	hial	hest compensated	employee		Yes	No
on line 1a? If 'Yes,' complete Schedule J for such inc. 4 For any individual listed on line 1a, is the sum of rep	dıvıdual		•	•	•	•	Ū	,		3	-	Х
the organization and related organizations greater the individual	an \$150	,000)? If	'Ye	s' co	ompi	lete	Schedule J for suc	ch	4	ļ	х
5 Did any person listed on line 1a receive or accrue co rendered to the organization? If 'Yes,' complete Sche	mpensa edule J i	ation for s	fror uch	n ar <i>pers</i>	ny ui s <i>on</i>	nrela	ated	organization for s	ervices	5		х
Section B. Independent Contractors												
Complete this table for your five highest compensate compensation from the organization	d indep	ende	ent c	ontr	racto	ors t	hat r	received more that	n \$100,000 of			
(A) Name and business address	S							(B) Description o	f Services	Comp	(C) ensatio	n
· · · · · · · · · · · · · · · · · · ·												
2 Total number of independent contractors (including b \$100,000 in compensation from the organization ►	out not li	mite	d to	tho	se li	sted	abo	ove) who received	more than			

ra	ŢΥ	III Statement of Revenue						
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
v	1 a	Federated campaigns	1 a					
NS N	ŧ	Membership dues	1 b					
₩ <u>0</u>		•						
A, TS		Fundraising events	1c			1		
늘		Related organizations	1 d					
S.S.	е	Government grants (contributions)	1 e					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f	All other contributions, gifts, grants, and similar amounts not included above	1 f					
EO	a	Noncash contribns included in Ins 1a-1f	\$	· · · · · · · · · · · · · · · · · · ·				
Ş₹	_	Total. Add lines 1a-1f	'					
		Total Add lines full		Business Code		<u> </u>		
2	2.	MEMBERGUID DUES AND	N.C	900099	221 551	0.	221 551	
2		MEMBERSHIP_DUES_AND_		900099	331,551.	0.	331,551.	0.
Ä	b	'						
≨	С						·	
SE	d	 -						
¥	е	'						
PROGRAM SERVICE REVENUE	f	All other program service revenue	;					
Æ	q	Total. Add lines 2a-2f		>	331,551.			
	3	Investment income (including divi	dends	: interest and				
	3	other similar amounts)	uerius	, interest and	3,295.	0.	0.	3,295.
	4	Income from investment of tax-ex	emnt	bond proceeds	,			•
	5	Royalties	Jp.	▶				
	_	(i) Re	al .	(II) Personal				
	6.	Gross Rents		(1) / 51-551151				
		Less rental expenses						
		Rental income or (loss)						
	d	Net rental income or (loss)				_		
	7a	Gross amount from sales of assets other than inventory	rities	(II) Other				
	b	Less cost or other basis and sales expenses						
		· ——						
		Gain or (loss)						
		Net gain or (loss) Gross income from fundraising ev	ents					
FNUE		(not including \$						
RE		See Part IV, line 18	-	_				
OTHER REVEN		·		a				
E		Less direct expenses		b				
	С	Net income or (loss) from fundrais	sing e	vents				
	9a	Gross income from gaming activit See Part IV, line 19		a				
	b	Less direct expenses		b				
	С	Net income or (loss) from gaming	activ	ities ►				
		Gross sales of inventory, less retuand allowances	ırns					
				a				
		Less cost of goods sold		b				
	С	Net income or (loss) from sales o	inve					
		Miscellaneous Revenue		Business Code				
	11 a							
	b							
	c							
	d	All other revenue	- [
	е	Total. Add lines 11a-11d	-	•				
	12	Total revenue. See instructions		•	334,846.	0.	331,551.	3,295.

Part IX | Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21		expenses	general expenses	expenses
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	108,373.			
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	110,248.	-		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	, ===,			
9	Other employee benefits				
10	Payroll taxes	22,926.			
11	Fees for services (non-employees)				
;	a Management				
ı	b Legal	12,511.			-
,	C Accounting	22,490.			
(d Lobbying	16,872.			
(Prof fundraising svcs. See Part IV, In 17		···		
1	Investment management fees				
(g Other		.		
12	Advertising and promotion	300.			
13	Office expenses	11,707.	· · · · · · · · · · · · · · · · · · ·		
14	Information technology	7,621.			
15	Royalties	<u> </u>	 	<u> </u>	
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	22,608.			
20	Interest	8,749.			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	6,169.			
	Insurance	16,015.			
24	Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
ā	TELEPHONE	12,520.			
ŀ	DUES AND ASSESSMENTS	6,953.			
•	REPAIRS & MAINTENANCE	7,211.			
•	UTILITIES	4,375.			
•	MISCELLANEOUS	14,114.			
f	All other expenses .	3,350.			
_25	Total functional expenses Add lines 1 through 24f	415,112.			
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA				<u>. </u>	Form 990 (2009)

Pa	in X	Balance Sheet	· · · · · · · · · · · · · · · · · · ·				
				(A) Beginning of year		(B) End of year	
	1	Cash – non-interest-bearing		48,626.	1	29,732.	
	2	Savings and temporary cash investments		227,884.	2	59,282.	
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net			4		
	5	Receivables from current and former officers, directors and highest compensated employees. Complete Part I	s, trustees, key employees, I of Schedule L		5		
	6	Receivables from other disqualified persons (as define					
^		and persons described in section 4958(c)(3)(B) Comp	lete Part II of Schedule L		6		
Ş	7	Notes and loans receivable, net			7		
ASSETS	8	Inventories for sale or use		8			
Ś	9	Prepaid expenses and deferred charges	· ' - - - - - - - - -				
	10 a	Land, buildings, and equipment cost or other basis	10a 582,180.		l [
		Complete Part VI of Schedule D					
	t	Less: accumulated depreciation	10b 62,646.	182,966.	10 c	519,534.	
	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		15			
	16	Total assets Add lines 1 through 15 (must equal line	34)	459,476.	16	608,548.	
	17	Accounts payable and accrued expenses			17		
	18	Grants payable			18		
	19	Deferred revenue		**** M. * * * * * * * * * * * * * * * *	19	· · · · · · · · · · · · · · · · · · ·	
į	20	Tax-exempt bond liabilities	1		20		
A B	21	Escrow or custodial account liability Complete Part IV	/ of Schedule D		21		
Ļ	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified personal disqualified perso	tees, key employees, sons Complete Part II				
į		of Schedule L	<u> </u>		22		
E S	23	Secured mortgages and notes payable to unrelated thi	rd parties		23	196,731.	
	24	Unsecured notes and loans payable to unrelated third	parties		24		
	25	Other liabilities Complete Part X of Schedule D		8,224.	25	1,331.	
	26	Total liabilities. Add lines 17 through 25		8,224.	26	198,062.	
N E T		Organizations that follow SFAS 117, check here ►	X and complete lines				
		27 through 29 and lines 33 and 34.					
ASSE	27	Unrestricted net assets		451,252.	27	410,486.	
	28	Temporarily restricted net assets			28		
Ĭ	29	Permanently restricted net assets			29		
R		Organizations that do not follow SFAS 117, check her	e ► and complete				
FUND		lines 30 through 34.					
Ď	30	Capital stock or trust principal, or current funds			30		
B A	31	Paid-in or capital surplus, or land, building, and equipro			31	· · · · · · · · · · · · · · · · · · ·	
BALAZCES	32	Retained earnings, endowment, accumulated income,	or other funds		32		
Ě	33	Total net assets or fund balances		451,252.	33	410,486.	
<u> </u>	34	Total liabilities and net assets/fund balances		459,476.	34	608,548.	

BAA Form 990 (2009)

Form 990 (2009)	TT.A	CLERKS	۶	CHECKERS	T.OCAT.	1771
. O.IIII 330 (2003)	Thu	CHURICA	Œ	CHECKERS	TOCAL	

57-6026500

Page **12**

TOTAL STOCKED OF THE CHERKS & CHECKERS LOCAL 1771			age 12
Part XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990 X Cash Accrual Other			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b Were the organization's financial statements audited by an independent accountant?	2b	X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for overs review, or compilation of its financial statements and selection of an independent accountant?	sight of the audit,	Х	
If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ain		
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year w consolidated basis, separate basis, or both.	ere issued on a		
X Separate basis 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 Audit Act and OMB Circular A-133?	h in the Single		x
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	the required audit		

BAA

Form **990** (2009)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047 2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

► Complete if the organization is described below.

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

• 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.

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 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	anewored "	Vac 'ta	Form 990	Part IV	line 5 (Provi	/Tavl than

• :	Section 501(c)(4), (5), or (6) o	rganizations: Complete Part III						
Name	e of organization			Employer identifica	ation number			
	A CLERKS & CHECKERS			57-602650				
Pa	rt I-A Complete if the o	rganization is exempt under section	on 501(c) or is a s	section 527 organi	zation.			
1	Provide a description of the	organization's direct and indirect political ca	impaign activities in P	art IV				
2	Political expenditures			► \$				
	Volunteer hours							
Pa	rt I-B Complete if the o	rganization is exempt under section	on 501(c)(3).					
1	Enter the amount of any exc	ise tax incurred by the organization under s	ection 4955	▶ \$				
2	Enter the amount of any exc	ise tax incurred by organization managers ι	inder section 4955	▶ \$				
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for t	his year?		Yes No			
4:	a Was a correction made?				Yes No			
I	b If 'Yes,' describe in Part IV							
Pa	rt I-C Complete if the o	rganization is exempt under section	on 501(c), excep	t section 501(c)(3).				
1	Enter the amount directly exp	pended by the filing organization for section	527 exempt function	activities >\$				
2	Enter the amount of the filing	g organization's funds contributed to other o	roanizations for section	n 527 exempt				
_	function activities	g organization s fantas contributed to other o	rgariizations for seeme	► \$				
3	Total of exempt function expeline 17b	enditures Add lines 1 and 2 Enter here and	d on Form 1120-POL,	▶ \$				
4		e Form 1120-POL for this year?		~	Yes No			
5	* *	_	f all section 527 polity	nal organizations to whi				
•	5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political							
	or a political action committee	ere promptly and directly delivered to a sep ee (PAC). If additional space is needed, pro-	arate political organiz	ation, such as a separa	te segregated fund			
	or a pointed action committee		vide information arr a					
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds	ling (e) Amount of political contributions received and			
				If none, enter-0-	promptly and directly delivered to a separate			
					political organization If none, enter -0-			
					Whole, enter 101			
		<u> </u>						
				·				
-								
		<u></u>						
-				,	 			

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

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 20 Part II-A Complete if	the organization	& CHECKERS LOCAL on is exempt under se		57-6020 d filed Form 5768 (e l	
section 501(A Check ► If the filli	· · · · · · · · · · · · · · · · · · ·	ongs to an affiliated group	· · · · · · · · · · · · · · · · · · ·		
—		ecked box A and 'limited cor	ntrol' provisions apply		
	Limits on Lobby	ing Expenditures — eans amounts paid or incur		(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	ures to influence pu	iblic opinion (grass roots lot	obying)		· · · · · · · · · · · · · · · · · · ·
b Total lobbying expenditu	ures to influence a	legislative body (direct lobby	ying) ,		,
c Total lobbying expenditu	ures (add lines 1a a	and 1b)			
d Other exempt purpose e	expenditures				
e Total exempt purpose e	xpenditures (add li	nes 1c and 1d)			
f Lobbying nontaxable and both columns	nount. Enter the an	nount from the following tabl	le in		
If the amount on line 1e, colu	umn (a) or (b) is	The lobbying nontaxable a	mount 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 \$		\$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 of	over \$1,500,000		
Over \$17,000,000		\$1,000,000.		<u> </u>	
g Grassroots nontaxable a	•	•			
h Subtract line 1g from lin		•		<u> </u>	
i Subtract line 1f from line	e ic if zero or less	s, enter -0-			
j If there is an amount oth section 4911 tax for this	her than zero on ei year?	ther line 1h or line 1i, did the	e organization file Form	4720 reporting	Yes No
(Son	ne organizations th colun	4-Year Averaging Period l nat made a section 501(h) e nns below. See the instructi	lection do not have to d	complete all of the five h 2f.)	
	Lot	bying Expenditures During	4-Year Averaging Per	iod	
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable 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					
ЗАА				Schedule C (Form	1 990 or 990-EZ) 2009

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

(election under Section 501(n)).			
	(8	1)	(b)
	Yes	No	Amount
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 or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			·
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If 'Yes,' describe in Part IV			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			<u>'</u>
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or s	ection 501(c)(6).
· · · · · · · · · · · · · · · · · · ·		•	Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1 X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2 X
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?			3 X
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501	c)(5)	, or s	ection 501(c)(6)
if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3	is a	nswe	red 'Yes.'
1 Dues, assessments and similar amounts from members	-	1	331,551.
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		_	
a Current year		2a	16,872.
b Carryover from last year		2b	
c Total		2c	16,872.
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	al		
expenditure next year?	4.	4	
5 Taxable amount of lobbying and political expenditures (see instructions)		5	16,872.
Part IV Supplemental Information			
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and also, complete this part for any additional information.	Part II	-B, lın	e 1ı.
			

Scriedule C (r	OIM 990 OF 990-EZ) ZOO9 ILA CLERKS & CHECKERS LOCAL 1//I	57-6026500	Page 4
Part IV	Supplemental Information (continued)		
Y			
- -			
			
			- -
- 			-
			
- 			
- -			
. -			
			_
. -	·		

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions OMB No 1545-0047

2009

Open to Public Inspection
Employer Identification number

тт.:	A CLERKS & CHECKERS LOCAL 177	1		57-6026500	
Pa		r Advised Funds or Other Similar			ıf.
	the organization answered 'Yes' t	o Form 990, Part IV, line 6.		and complete	, ,,
		(a) Donor advised funds	(b) Fu	nds and other acc	ounts
1	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and dor funds are the organization's property, subject			Yes	☐ No
6	Did the organization inform all grantees, donoused only for charitable purposes and not for purpose conferring impermissible private bene	he benefit of the donor or donor advisor or f		Yes	☐ No
Pa	rt II Conservation Easements Compl	ete if the organization answered 'Ye	es' to Form 990	, Part IV, line	 7.
1	Purpose(s) of conservation easements held by				
	Preservation of land for public use (e.g., r	ecreation or pleasure) Preservat	tion of an historically	y important land a	area
	Protection of natural habitat	· — — —	tion of certified histo		
	Preservation of open space				
2	Complete lines 2a through 2d if the organization last day of the tax year.	on held a qualified conservation contribution	in the form of a coi	nservation easem	ent on the
				Held at the End of	f the Year
	a Total number of conservation easements		2a		
١	Total acreage restricted by conservation easer	nents	2b		
	Number of conservation easements on a certif	ied historic structure included in (a)	2c		
	Number of conservation easements included in	•	2d		
3	Number of conservation easements modified,	transferred, released, extinguished, or termi	nated by the organi	zation during the	tax
	year ▶				
4	Number of states where property subject to co	nservation easement is located >			
5	Does the organization have a written policy re-		handling of violation		
6	and enforcement of the conservation easemer Staff and volunteer hours devoted to monitorin during the year ▶		asements	Yes	∐ No
7	Amount of expenses incurred in monitoring, in during the year ►	specting, and enforcing conservation easem	nents \$		_
8	Does each conservation easement reported or 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements of	section	Yes	☐ No
9	In Part XIV, describe how the organization rep include, if applicable, the text of the footnote to conservation easements	orts conservation easements in its revenue the organization's financial statements that	and expense staten it describes the orga	nent, and balance anization's accour	sheet, and nting for
Pa	Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical Treasures wered 'Yes' to Form 990, Part IV, II	s, or Other Similine 8.	ar Assets	
1 8	a If the organization elected, as permitted under treasures, or other similar assets held for publ the text of the footnote to its financial stateme	ic exhibition, education, or research in furth	ement and balance serance of public ser	sheet works of art vice, provide, in F	t, historical Part XIV,
ı	b If the organization elected, as permitted under treasures, or other similar assets held for publ amounts relating to these items.	SFAS 116, to report in its revenue stateme ic exhibition, education, or research in furth-	nt and balance shee erance of public ser	et works of art, his vice, provide the	storical following
	(i) Revenues included in Form 990, Part VIII,	line 1		► \$	
	(ii) Assets included in Form 990, Part X			►\$ ►\$	-
	If the organization received or held works of a amounts required to be reported under SFAS	16 relating to these items	ts for financial gain,		
	Revenues included in Form 990, Part VIII, line	1		► \$	
ı	Assets included in Form 990, Part X			► \$	

		HECKERS LOCAL			57-602			Page 2
Part III Organizations Mainta	ining Collec	tions of Art, Hist	<u>orical Treasu</u>	res, or O	ther Similar Ass	ets (c	<u>ontinu</u>	ıed)
3 Using the organization's acquisiti items (check all that apply)	on accession ar	nd other records, chec	ck any of the folio	owing that a	are a significant use	of its co	llection	
a 🔲 Public exhibition		d 🔲 Loan	or exchange pro	grams				
b Scholarly research		e 🗌 Othei						
c Preservation for future gener	ations							
4 Provide a description of the organ Part XIV	nızatıon's collec	tions and explain how	they further the	organizatio	on's exempt purpose	ın		
5 During the year, did the organizar assets to be sold to raise funds r	ather than to be	: maintained as part o	f the organization	n's collection	on?	Yes		No
Part IV Escrow and Custodia 9, or reported an amo	I Arrangeme unt on Form	ents Complete if on 990, Part X, line	organization a 21.	answered	'Yes' to Form 99	90, Pa	rt IV,	ine
1 a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian,	or other intermediary	for contributions	or other as	ssets not	Yes		No
b If 'Yes,' explain the arrangement	ın Part XIV and	complete the following	ng table:			Amoun	. <u>.</u>	
c Beginning balance					1 c	71110411	•	
d Additions during the year					1 d			
e Distributions during the year				•	1 e	-		
f Ending balance					1 f			
2a Did the organization include an a	mount on Form	990. Part X. line 21?				Yes	Γ	No
b If 'Yes,' explain the arrangement		,					_	
Part V Endowment Funds Co		anization answer	ed 'Yes' to Fo	orm 990,	Part IV, line 10.			
	(a) Current ye	· · · · · · · · · · · · · · · · · · ·		years back	(d) Three years back	(e)	Four year	s back
1 a Beginning of year balance								
b Contributions								
c Net Investment earnings, gains, and losses								
d Grants or scholarships								
e Other expenditures for facilities and programs								
f Administrative expenses								
g End of year balance								
2 Provide the estimated percentage	e of the year en	d balance held as						
a Board designated or quasi-endow	vment ►	 %						
b Permanent endowment ►	- %							
c Term endowment ►								
3a Are there endowment funds not in organization by	n the possession	n of the organization t	hat are held and	administer	ed for the	Γ	Yes	No
(i) unrelated organizations						3a(i)		
(ii) related organizations						3a(ii)		
b If 'Yes' to 3a(II), are the related o	rganizations list	ted as required on Sci	hedule R?			3b		
4 Describe in Part XIV the intended	-	•					***	
Part VI Investments-Land, B				Part X. III	ne 10.			
Description of investment		a) Cost or other basis (investment)	(b) Cost or o basis (othe	ther	(c) Accumulated Depreciation	(d) [Book Va	lue
1 a Land		22,083.					22	,083.
b Buildings		519,556.			26,453.			,103.
c Leasehold improvements								
d Equipment		31,753.			30,999.			754.
e Other		8,788.			5,194.		3,	,594.
Total. Add lines 1a through 1e (Column	n (d) must equa	Form 990, Part X, co	olumn (B), line 1	0(c).)	•		519	,534.
DAA		· · · · · · · · · · · · · · · · · · ·			Cala	Inda D. /	Orm 00	2000

BAA

Schedule D	(Form 990) 2009 ILA CLERKS & CHECK	CERS LOCAL 1771	57-6026500	Page 3
	Investments-Other Securities See Fo	<u>rm 990, Part X, line 1</u>	2.	
, (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation	
			Cost or end-of-year market value	
Financial dei				
	equity interests			
Other				
				
				
				
-				
Total (Column	(b) must equal Form 990 Part X, col (B) line 12)			
Part VIII	Investments-Program Related (See F			
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
			Cost of end-of-year market value	
			·	
			· · · · · · · · · · · · · · · · · · ·	
Total (Column	(b) must equal Form 990, Part X, Col (B) line 13)			
Part IX	Other Assets (See Form 990, Part X, I		(h) Doole u	
	(a) Des	scription	(b) Book v	alue
	· · · · · · · · · · · · · · · · · · ·			
		· · · · · · · · · · · · · · · · · · ·		
	· · · · · · · · · · · · · · · · · · ·			
	4) 15 000 B 17 150 1		b	
	mn (b) must equal Form 990, Part X, col (B), line			
Part X	Other Liabilities (See Form 990, Part)			
	(a) Description of Liability	(b) Amount		
Federal Inco	me laxes			
DUES		725.		
PAYROLL	LIABILITIES	606.		
	·			
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 25)	1,331.		
2. FIN 48 Fo for uncertain	otnote In Part XIV, provide the text of the footnot tax positions under FIN 48	te to the organization's fina	ancial statements that reports the organization's lia	bility

	edule D (Form 990) 2009 ILA CLERKS & CHECKERS LOCAL 1771	57-6026500	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statement	S	
1	Total revenue (Form 990, Part VIII,column (A), line 12)		334,846.
2	Total expenses (Form 990, Part IX, column (A), line 25)		415,112.
3	Excess or (deficit) for the year Subtract line 2 from line 1		-80,266.
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)	-	
	•		
9	Total adjustments (net) Add lines 4 through 8	-	00 000
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	Data was	-80,266.
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue pe	er Return	
1	Total revenue, gains, and other support per audited financial statements	1	334,846.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments		
t	Donated services and use of facilities .		
(: Recoveries of prior year grants		
c	Other (Describe in Part XIV)		
	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	334,846.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	· •	331/0101
٦,			
	Investments expenses not included on Form 990, Part VIII, line 7b	 	
	Other (Describe in Part XIV)		
	Add lines 4a and 4b	4c	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	334,846.
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return	
1	Total expenses and losses per audited financial statements	1	415,112.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities 2a		
Ŀ	Prior year adjustments 2b		
	Other losses		
	d Other (Describe in Part XIV)		
		─ ₂₂	
	e Add lines 2a through 2d	2e	415 110
	Subtract line 2e from line 1	3	415,112.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
ā	Investments expenses not included on Form 990, Part VIII, line 7b		
Ŀ	Other (Describe in Part XIV)		
(Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	5	415,112.
Par	t XIV Supplemental Information		
line 4	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part 4; Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this mation	part to provide any	additional
 	TEEA3304 02/02/10	Schedule D /F	orm 990) 2009
DMA	IEEA3304 U2/02/10	Scriedule D (F	OHH 3307 2003

Schedule D	(Form 990) 2009	ILA CLERKS & CHECKI	ERS LOCAL 1771	57-6026500	Page 5
Part XIV	Supplemental	ILA CLERKS & CHECKI Information (continued)			
•		•			
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				· -	
- 					

SCHEDULE O (Form 990) .

Supplemental Information to Form 990

OMB No 1545-0047

Open to Public

Employer identification number

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.

57-6026500 ILA CLERKS & CHECKERS LOCAL 1771 Pt VI-A, Line 2 ROBERT STRIPLING, TREASURER IS THE BROTHER OF WILLIAM STRIPLING, ALTERNATE TRUSTEE. Pt VI-A, Line 6 THE ORGANIZATION IS A UNION COMPRISED OF MEMBERS. Pt VI-A, Line 7a ALL THE ORGANIZATION'S MEMBERS ELECT THE GOVERNING BOARD OF OFFICERS. Pt VI-A, Line 7b ALL CHANGES TO THE BY-LAWS AND POLICIES OF THE ORGANIZATION ARE REQUIRED TO BE VOTED ON BY THE MEMBERS AND REQUIRES APPROVAL BY 2/3 OF VOTING MEMBERS. Pt VI-A, Line 8b COMMITTEES CAN MAKE RECOMMENDATIONS TO THE EXECUTIVE BOARD BUT CANNOT ACT ON THEIR BEHALF. Pt VI-B, Line 11A A COPY OF THE 990 WAS PROVIDED TO EACH VOTING BOARD MEMBER AT A RECENT BOARD MEETING. THE ENTIRE VOTING BOARD REVIEWED THE 990. AFTER A DISCUSSION PERIOD AND QUESTION/ANSWER PERIOD, THE BOARD VOTED TO APPROVE AND ACCEPT THE FORM 990 AS PRESENTED. Pt VI-C, Line 19 THE ORGANIZATION MAKES THESE DOCUMENTS AVAILABLE UPON REQUEST AT THE ADMINISTRATION OFFICES AND ON WWW.GUIDESTAR.ORG. Pt VI-B, Line 12c EACH BOARD MEMBER IS REQUIRED TO SIGN THE ORGANIZATION'S CONFLICT Pt VI-B, Line 12c CONTINUED OF INTEREST POLICY ON AN ANNUAL BASIS. PURSUANT TO THIS POLICY EACH OFFICER AND BOARD MEMBER WILL RECUSE THEMSELVES FROM ANY DISCUSSION AND VOTE FOR WHICH A CONFLICT FOR THEMSELVES OR THEIR FAMILY EXISTS. DETERMINATIONS OF WHETHER A CONFLICT EXISTS ARE MADE AT A MANAGEMENT, BOARD MEMBER, OFFICER, AND INDIVIDUAL LEVEL. ACTUAL CONFLICTS ARE REVIEWED BY THE BOARD, WITHOUT THE PRESENCE OF THE INTERESTED PARTY.

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

OMB No 1545-0172

2009

Attachment Sequence No 67

Name(s) shown on return

Identifying number

	A CLERKS & CHECK		71				5	7-6026500
	ess or activity to which this form re							
	rm 990 / Form 99							<u>-</u>
Par		kpense Certain	Property Under Sec	ction 179	4 <i>1</i>			
1			complete Part V before		rt i		1	6250 000
1			•					\$250,000.
2	Total cost of section 179 Threshold cost of section		• • • • • • • • • • • • • • • • • • • •				3	
3 4	Reduction in limitation S						4	
5	Dollar limitation for tax y		· ·		arriad filing		-	
3	separately, see instruction		from time 1 if zero or les	ss, enter -u- ii m	arried illing		5	
6	(a) Description of property		(b) Cost (business	use only)	(C) Elected cos	t	
7	Listed property Enter the	e amount from line 2	29		7			
8	Total elected cost of sec		•	;), lines 6 and 7			8	
9	Tentative deduction. Ent						9	
	,		=				10	
	Business income limitation		•	,	•	ınstrs)	11	
	Section 179 expense dec						12	
	Carryover of disallowed				► 13			
Par	: Do not use Part II or Pa		ice and Other Depre				<u></u>	
			•	*			See	instructions)
14	Special depreciation allo	wance for qualified	property (other than liste	d property) place	d in service di	uring the		
4.5	tax year (see instructions	•			•		14	- ·
	Property subject to section	,	1				15	<u> </u>
	Other depreciation (inclu						16	553.
Par	t III MACRS Depr	eciation (Do not i	nclude listed property) (
		·	Section				r 	1 000
17	MACRS deductions for a	ssets placed in serv	rice in tax years beginnin	g before 2009			17	1,990.
18	If you are electing to gro		d in service during the ta	ax year into one o	or more genera	al		
	asset accounts, check he					P		
			in Service During 2009				iyst	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method		(g) Depreciation deduction
19 a	3-year property							_
b	5-year property							
C	7-year property			•				
d	10-year property							
е	15-year property		2,136.	15.0 yrs	HY	S/L		276.
	20-year property							
g	25-year property			25 yrs		S/L		
h	Residential rental			27.5 yrs	ММ	S/L		
	property			27.5 yrs	MM	S/L		
i	Nonresidential real	10/09	446,389.	39 yrs	мм	S/L		2,790.
	property	10/09	39,500.	39.0yrs	MM	S/L		293.
	Section C		n Service During 2009 Ta				Svs	
20 a	Class life		,			S/L		
b	12-year			12 yrs		S/L		
	: 40-year		<u> </u>	40 yrs	MM	S/L		
_	t IV Summary (See	instructions.)	'		<u> </u>			· · · · · · · · · · · · · · · · · · ·
	Listed property Enter an						21	
	Total Add amounts from line 1		nes 19 and 20 in column (a) ar	nd line 21 Enter here	and on	 		
	the appropriate lines of your re	turn Partnerships and S	corporations — see instruction	s		2	22	5,902.
23	For assets shown above	and placed in service	ce during the current yea	r, enter	22		1	

Form 4562 (2009) ILA CLERKS & CHECKERS LOCAL 1771 57-6026500 Page 2 Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles) 24 a Do you have evidence to support the business/investment use claimed? Yes No 24b If 'Yes,' is the evidence written? No Yes (c) Business/ investment (i) Type of property (list vehicles first) Basis for depreciation (business/investment Date placed Cost or Elected section 179 Recovery Method/ Depreciation in service other basis period Convention deduction use use only) cost percentage Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25 26 Property used more than 50% in a qualified business use 27 Property used 50% or less in a qualified business use 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 Add amounts in column (i), line 26 Enter here and on line 7, page 1 29 29 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (b) (d) **(f)** (a) (c) Total business/investment miles driven 30 Vehicle 1 Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 5 Vehicle 6 during the year (do not include commuting miles) Total commuting miles driven during the year Total other personal (noncommuting) 32 miles driven 33 Total miles driven during the year Add lines 30 through 32 Yes No Yes Nο Yes No Yes Nο Yes Nο Yes No Was the vehicle available for personal use 34 during off-duty hours? Was the vehicle used primarily by a more 35 than 5% owner or related person? 36 Is another vehicle available for personal use? Section C — Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) No Yes 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? Do you meet the requirements concerning qualified automobile demonstration use? (See instructions) Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles. | Part VI | Amortization (a) (b) (c) (d) (e) **(f)** Description of costs Date amortization Amortization Amortizable Code section Amortization period or percentage for this year Amortization of costs that begins during your 2009 tax year (see instructions) 42 267. LOAN FEES 04/28/09 2,000 n/a 5.00 yrs 43 Amortization of costs that began before your 2009 tax year 43 44 Total. Add amounts in column (f) See the instructions for where to report 44 267.