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Form **990-EZ****Short Form**
Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2009**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

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(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.

A For the 2009 calendar year, or tax year beginning**, 2009, and ending****, 20****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization

International Brotherhood of Electrical Workers Local 0365

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite

610 Center Street

City or town, state or country, and ZIP + 4

Morristown, TN 37813

D Employer identification number

62 6046828

E Telephone number

423-587-4959

F Group Exemption Number ►

0064

• 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: ► www.ibew365.org**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 ☐ 527**K** 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. ► \$ **139501****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	1	0
	2	Program service revenue including government fees and contracts	2	0
	3	Membership dues and assessments	3	137440
	4	Investment income	4	2031
	5a	Gross amount from sale of assets other than inventory	5a	0
	b	Less: cost or other basis and sales expenses	5b	0
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ► <input type="checkbox"/>		
	a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	0
b	Less: direct expenses other than fundraising expenses	6b	0	
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	0	
Expenses	7a	Gross sales of inventory, less returns and allowances	7a	30
	b	Less: cost of goods sold	7b	31
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	(1)
	8	Other revenue (describe ► _____)	8	0
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	139470
	10	Grants and similar amounts paid (attach schedule)	10	69922
	11	Benefits paid to or for members	11	147
	12	Salaries, other compensation, and employee benefits	12	35845
	13	Professional fees and other payments to independent contractors	13	500
Net Assets	14	Occupancy, rent, utilities, and maintenance	14	640
	15	Printing, publications, postage, and shipping	15	918
	16	Other expenses (describe ► Contributions, Travel, Depreciation, Refunds, AFL-CIO, Confer., etc.)	16	27147
	17	Total expenses. Add lines 10 through 16	17	135119
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	4351
	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)	19	123419
	20	Other changes in net assets or fund balances (attach explanation)	20	(2)
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	127768

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	130479.70	22 134886
23 Land and buildings	0	23 0
24 Other assets (describe ► Printer, Laptop computer, & Projector)	2750.64	24 2063
25 Total assets	133230.34	25 136949
26 Total liabilities (describe ► Outstanding Checks)	9811.19	26 9181
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	123419.15	27 127768

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

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SCANNED JUN 29 2010

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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? Promote the material & intellectual welfare of members
 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	Represented members in wage negotiations with Tennessee Valley Authority to ensure fair wages.		
	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	
29	Represented members' grievances to ensure a safe, healthy, and fair workplace free from harassment and intimidation.		
	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30	Represented members' interests in contract negotiations with Tennessee Valley Authority.		
	(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
Danny E. Turner, II 4737 BRIERLEY DR., KNOXVILLE, TN 37921	Pres./BM - 8 hours	2133	0	0
Roger T. Mustard, II 210 WALLACE DR., ANDERSONVILLE, TN 37705	Vice President - 1 hour	1444	0	0
James R. Cox 610 CENTER ST., MORRISTOWN, TN 37813	Fin. Secretary - 24 hours	10794	0	0
Tim L. Wilkey 9208 CAMERON RD., MASCOT, TN 37806	Treasurer - 2 hours	2499	0	0
Danny W. Melton 340 ARNOLD ST., CHURCH HILL, TN 37642	Rec. Sec. (Jan-Mar) 1 hour	768	0	0
Jerrold W. Smith 5111 SWANNER RD., KNOXVILLE TN 37918	Rec. Sec.(Jun-Dec) 1 hour	1792	0	0
Sean L. Cash 6533 GENTLEWINDS DR., KNOXVILLE TN 37931	Exec. Board - 1 hour	1182	0	0
David W. Darnell 235 LAUREN DR., ROGERSVILLE TN 37857	Exec. Board - 1 hour	0	0	0
Ronnie L. Fletcher, Jr. 448 GREY FOX DR., CHURCH HILL TN 37642	Exec. Board - 1 hour	1575	0	0
Larriette L. Greene, 240 BRECKENRIDGE DR. NW APT. 141, CLEVELAND, TN 37312	Exec. Board - 1 hour	0	0	0
Travis E. Grizzle 442 GREY FOX DR., CHURCH HILL TN 37642	Exec. Board - 1 hour	0	0	0
Jason L. Melton 8124 HARMON RD., POWELL TN 37849	Exec. Board - 1 hour	3413	0	0
Jason C. Merritt 440 HILLTOP DR., LENOIR CITY TN 37772	Exec. Board - 1 hour	788	0	0
Michael C. Soderburg 516 SAWYER COURT, WHITESBURG TN 37891	Exec. Board - 1 hour	0	0	0

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		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		✓
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?		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?		
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		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0		
b	Did the organization file Form 1120-POL for this year?		✓
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?		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 39a		
b	Gross receipts, included on line 9, for public use of club facilities 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 ▶		
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 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. ▶ NONE		
42a	The organization's books are in care of ▶ <u>Tim L. Wilkey</u> Telephone no. ▶ <u>865-932-2851</u> Located at ▶ <u>9208 Cameron Rd., Mascot, TN</u> ZIP + 4 ▶ <u>37806</u>		
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)?	Yes	No
	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 ▶ 43		
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		✓

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	46	Yes	No
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47		
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		
b	If "Yes," was the related organization a section 527 organization?	49b		
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."			

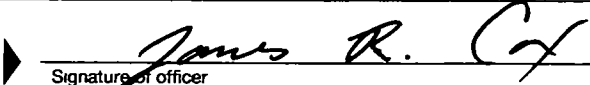
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

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."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

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			
	 Signature of officer		5-12-10 Date	
Paid Preparer's Use Only	James R. Cox, Financial Secretary Type or print name and title			
	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**

International Brotherhood of Electrical Workers Local # 365
EIN- 62-6046828

Part I

Line 10:

International Brotherhood of Electrical Workers
 900 Seventh Street, N. W.
 Washington, D. C. 20001

Amount: \$ 69,922.10

Purpose: This is our parent organization. This amount reflects our International Office's portion of dues received from members who wish to have membership (and thus receive benefits of membership) in IBEW.

Line 20:

Rounding figures on this form (990EZ) has caused a \$2.00 error which must be subtracted.

Part II

Line 24 (A):

Value of Projector, Laptop, &
 Printer (purchased in 2007) ----- \$ 3438.30
Depreciation of Equipment ----- 687.66
End of year 2008 Equipment Value \$ 2750.64

Line 24 (B):

2008 Value of Projector, Laptop, &
 Printer (purchased in 2007) ----- \$ 2750.64
Depreciation of Equipment ----- 687.66
End of year 2009 Equipment Value \$ 2062.98

Depreciation figured:

Equipment Purchase prices:

Projector (purchased in 2007) -- \$ 821.24
 Laptop (purchased in 2007) ----- 2447.74
 Printer (purchased in 2007) ----- 169.32
 Total \$ 3438.30

International Brotherhood of Electrical Workers Local # 365
EIN- 62-6046828

Part II (continued)

Line 24 (B) continued:

Expected life of property listed – 5 years

Straight Line Depreciation = 1 divided by 5 = 20%

Purchase price of equipment \$ 3438.30 x .20 = a yearly Depreciation of \$ 687.66.

Therefore: \$ 3438.30 (cost of equipment) minus \$1375.32 (2 years depreciation of equipment) equals a remaining value of \$ 2062.98

Line 26: Outstanding Checks

(A)

Check #	Amount
E. T.	\$ 5692.50
E. T.	223.94
3254	18.70
3265	12.20
3289	250.00
3291	250.00
3307	630.64
3312	381.22
3320	151.58
3321	288.84
110	1911.57
Total	\$ 9811.19

(B)

Check #	Amount
E. T.	\$ 5784.00
E. T.	216.08
3254	18.70
3265	12.20
3354	75.00
3509	70.00
3512	167.50
3517	250.00
3522	705.49
3535	1407.02
3536	250.54
3537	224.59
Total	\$ 9181.12

Part V

Line 35:

Reason for not reporting income on Line 7a on Form 990-T:

IBEW Local #365 is a labor organization and our gross income from the unrelated business activity is less than \$1000.00. Thus, by the instructions on Form 990-T, we are not required to file this form.