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Form 990

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)

20**09**

Open to Public

Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Inspection Internal Revenue Service 01/01 2009, and ending 20 09 For the 2009 calendar year, or tax year beginning D Employer identification number C Name of organization International Brotherhood of Electrical Workers Loc Check if applicable use IRS Doing Business As 0268091 Address change Telephone number Number and street (or P O box if mail is not delivered to street address) print or Room/suite Name change type 3049 South 36th Street Suite 101 (253) 474-3646 Initial return City or town, state or country, and ZIP + 4 ☐ Terminated Tacoma, WA 98409 G Gross receipts S Amended return F Name and address of principal officer Gary Younghans Application pending H(a) Is this a group return for affiliates? Yes 3049 South 36th St, Suite 101, Tacoma, WA 98409 H(b) Are all affiliates included? Yes No Tax-exempt status If "No," attach a list (see instructions) Website: ► www.ibew76.org H(c) Group exemption number Form of organization ☐ Corporation ☐ Trust ☐ Association ☐ Other ▶ Chartered th L Year of formation 1894 M State of legal domicile WA Part I Summary Promotes collective bargaining process Briefly describe the organization's mission or most significant activities Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 8 Number of voting members of the governing body (Part VI, line 1a). **Activities &** 0 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 22 Total number of employees (Part V, line 2a) 6 0 Total number of volunteers (estimate if necessary) 0 7a Total gross unrelated business revenue from Part VIII, column (C), line 12. 7a b Net unrelated business taxable income from Form 990-T, line 34 0 **Pnor Year Current Year** 3,498,537 3.250,990 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) 66,380 33,518 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lunes 5: 6d, 8e, 9c, 10c, and 11e)
Total revenue—add lines 8 through in transferdual Part VIII, column (A), line 12) 89,646 68.824 11 12 3,654,563 3,353,332 Grants and similar amounts paid (Part IX, column (A), lines 13 O 0 Benefits paid to or for members (Rarpix(column) (A), Interest 0 0 15 Salaries, other compensation, employee benefits (Part IX, collyinn (A), lines 5–10) 941.491 983.925 16a Professional fundraising fees (Part IX, column (A), line 11a) b Total fundraising expenses (Part IX 26th (1914) Ind 251 ► 2,386,307 2,483,173 17 Other expenses (Part IX, column (A), lines 11a-11d, 111-24f) 3,327,798 3,467,098 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 326,765 19 Revenue less expenses. Subtract line 18 from line 12 -113,766 50 Beginning of Current Year **End of Year** 2.998,703 20 Total assets (Part X, line 16) . 2,888,852 269,045 Total liabilities (Part X, line 26) 272,960 Net assets or fund balances. Subtract line 21 from line 20 2,729,658 2,615,892 Part II Signature Block 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 complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here officer bunghana **Business Manager** Type or print name and title Check if Preparer's identifying number Preparer's (see instructions) employed ▶ Paid Preparer's Elana T McQuade PS Use Only 1532 McGilvra Blvd E, Seattle, WA 98112 329-7168 Phone no ► (206) May the IRS discuss this return with the preparer shown above? (see instructions) ✓ Yes No

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

Cat No 11282Y

Form **990** (2009)



Par	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission. Promotes collective bargaining process
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
_	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code:) (Expenses \$0 including grants of \$0) (Revenue \$0) Participates with labor and contractors to promote market share
	······································
4b	(Code.) (Expenses \$including grants of \$) (Revenue \$)
	· · · · · · · · · · · · · · · · · · ·
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
ر ده ام	Other program convince (Decembe in Schedule O.)
4 0	Other program services. (Describe in Schedule O.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
4e	Total program service expenses ▶ 0

Par	t IV Checklist of Required Schedules			
		-	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3	✓	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	,	1
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	1	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	, , , , , , , , , , , , , , , , , , ,	i Gur	
•	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	7. 12. 12. 12. 12. 12. 12. 12. 12. 12. 12		
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	*		
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	, ,	' '	
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X	, , ,	ا القامد الح	*
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	1, 7; ₹ . /	-
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	, <u>;</u>	· · · · ·	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14a		14a		✓
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? <i>If "Yes," complete Schedule F, Part I</i>	14b		1
15	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		1
16	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? <i>If "Yes," complete Schedule F, Part III</i>	16		1
17	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		1
18	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		1
19	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		1
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		✓

Pa	t 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		1
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		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.	23	1	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
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		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<u></u>	✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
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	1	
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	1	
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		1
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.		1	1

Fa	Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	l		l
	U.S. Information Returns. Enter -0- if not applicable			
		-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		1
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 2a 22			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1	
	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		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		-
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		t —	
-	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
b	If "Yes," enter the name of the foreign country. ▶		 	Ť
-	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.		₹\$, 4,
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	5c		
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	✓	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	1	
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	ů.	<u>i</u>
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		-
d	If "Yes," indicate the number of Forms 8282 filed during the year		٠٥٠٠	
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	3	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
a	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
8	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	<u> </u>		
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			Ì
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			l
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
40-	amounts due or received from them.)			ļ
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b	12a		<u> </u>

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body		3	£/3
b	Enter the number of voting members that are independent		25	2.24
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	(, ⁴	. 33	
_	any other officer, director, trustee, or key employee?	2		1
3	Did the organization delegate control over management duties customarily performed by or under the direct			
•	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		√
6	Does the organization have members or stockholders?	6		1
	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		✓
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	1.7	nitt nikt	
•	the year by the following:	i di	. 1	
а	The governing body?	8a	√	
	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		✓
Sec	tion B. Policies (This Section B requests information about policies not required by the Inte-	ernal		
Rev	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		√
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11		✓
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		إنظرار	1
	Does the organization have a written conflict of interest policy? If "No," go to line 13.	12a		\
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
•	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		✓
14	Does the organization have a written document retention and destruction policy?	14		✓
15	Did the process for determining compensation of the following persons include a review and approval by	H.,	ļ. 🦠	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	✓	
b	Other officers or key employees of the organization	15b	✓	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)	*		'n.
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		✓
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	. 4	*	ź
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	<u> </u>	سد	<u></u>
_	the organization's exempt status with respect to such arrangements?	16b		<u> </u>
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s	only)	
	available for public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of inte	erest	
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rds o	f the	
	organization: ► IBEW Local 76, (253)474-3646			 -
	3049 South 36 St Rm101, Tacoma, WA 98409			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors; institutional trustees, officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not o		any o	curr			cer, d	lirec		(E)	
(A)	(B)	Door t	/	•	C)	4ba+ -	andr A	(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	nstitutional trustee	Officer	a Key employee	Highest compensated employee	Former	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
Lennie Fluetsch Board Member	1.00							\$832	\$0	\$0
	 	1	_	├			-			
Allan Berg Board Member	1.00	1						\$416	\$0	\$0
Donald Waterhouse Board Member	1.00	1						\$832	\$0	\$0
Shawn Sias Board Member	1.00	/						\$832	\$0	\$0
Don McClellan Board Member	1.00	1						\$416	\$0	\$0
David LaFond Board Member	1.00	1						\$68	\$0	\$0
Scott Augustine Board Member	1.00	1						\$103	\$0	\$0
Christopher Dowllar Board Member	1.00	1						\$832	\$0	\$0
John Boespflug Board Member	1.00	1						\$832	\$0	\$0
Dale Waterman Board Member	1.00	1						\$416	\$0	\$0
Kenneth Jennings Board Member	1.00	1						\$416	\$0	\$0
Steven Ellingson Treasurer	1.00	1						\$1,664	\$0	\$0
Michael Hjelseth Vice-President	1.00	1						\$416	\$0	\$0
Tracy Prezeau Secretary	1.00	1					1	\$1,657	\$0	\$0
Dennis Callies President	1.00	1			1		Ī	\$81,763	\$0	\$0
Greg Elder Recording Secreary	1.00	1						\$1,992	\$0	\$0

Par	t VII Section A. Officers, Directors, Tru	istees, Key	Emp	loy	ees,	an	d Hig	hes	t Compensate	d Employees (co	ontinued)
	(A)	(B)			•)			(D)	(E)	(F)
	Name and title	Average hours per week	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	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
Boa	t Bryson rd Member	1.00	1			1			\$79,069	\$0	\$0
	y Younghans iness Manager	1.00				1			\$96,626	\$0	\$0
						1					
		-									
1h	Total	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	269,182	0	0
2	Total number of individuals (including but		to th	ose	list	ed a	above				
	reportable compensation from the organiz	ation ► 0						_			
3	Did the organization list any former office employee on line 1a? <i>If "Yes," complete S</i>	Schedule J	for su	ıch	ındi	ividi	ıal	٠.			Yes No
4	For any individual listed on line 1a, is the the organization and related organizations individual.										4
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," com	com plete	pen <i>Sch</i>	satı nedu	on <i>ile</i> .	from <i>I for s</i>	any such	unrelated org person .		5 1
Se	ction B. Independent Contractors										
1	Complete this table for your five highest compensation from the organization.	ompensate	ed ind	epe	ende	ent (contra ——	acto	rs that receive	d more than \$1	00,000 of
	(A) Name and business ad	dress							(B) Description of s	services	(C) Compensation
								-			
2	Total number of independent contractors (ıncludina b	uit no	tlin	niter	1 to	those	liet	ed abovo) who	received	· · · · · · · · · · · · · · · · · · ·
~	more than \$100.000 in compensation from					י נט	11056	, แรโ	eu above) wac	, received	* *

Par	t VII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d	Federated campaigns . 1a Membership dues . 1b Fundraising events . 1c Related organizations . 1d Government grants (contributions) . 1e All other contributions, gifts, grants,	3,250,990 0 0				
		and similar amounts not included above Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f	0	3,250,990	:		
		Total. Add lines 1a-11	Business Code	3,250,990			
Program Service Revenue	2a b c		Dusiness Code				
2	d						
rogram S	e f	All other program service revenue . Total. Add lines 2a–2f					
	<u>9</u>	· · · · · · · · · · · · · · · · · · ·	<u> ▶</u>	0			<u>.</u>
	3	Investment income (including dividend other similar amounts) . Income from investment of tax-exempt bor	▶	40,094	0	0	40,094
	5	Royalties	la proceeds	60,041	60,041	0	0
		(i) Real	(II) Personal	3,	00,041		0
	b	Gross Rents Less rental expenses Rental income or (loss) 0			* \ %%	′ •	», & .
	d	Net rental income or (loss)	•	,			
		Gross amount from sales of assets other than inventory Less cost or other basis	(II) Other 7,636	. 2 .		*	.
		and sales expenses 0 Gain or (loss) 0 Net gain or (loss)		-6,576	0	0	6 576
nue		Gross income from fundraising		*	·	U	-6,576
r Revenue		events (not including \$		ء ب ^چ	*	,	ř
Other	b b	Less: direct expenses b Net income or (loss) from fundraising 6					
	9a	Gross income from gaming activities. See Part IV, line 19 a		· · ·		*,	
	b b	Less: direct expenses b Net income or (loss) from gaming active	rities ►				
		Gross sales of inventory, less					
	b	returns and allowances a Less: cost of goods sold . b Net income or (loss) from sales of invent	0				
ŀ		Miscellaneous Revenue		0	0	0	
}		· · · · · · · · · · · · · · · · · · ·	Business Code				
	_						
	b						<u></u>
	C	AH					
		All other revenue	L	8,783	8,783	0	0
	е 12	Total. Add lines 11a–11d Total revenue. See instructions.		8,783 3,353,332	68.824	0	33 518

Part IX Statement of Functional Expenses

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

	All other organizations must complete col			, 	(C), and (D).
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the U.S See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members .				
5	Compensation of current officers, directors, trustees, and key employees	269,182			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	379,314			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0			
9	Other employee benefits	277,571			
10	Payroll taxes	57,858			
11	Fees for services (non-employees):				
	Management	0			
	Legal	17,041			
	Accounting	14,852			
		0			
		0	ii.		
	Professional fundraising services. See Part IV, line 17	0	matter of	**	
	Investment management fees	0			
	Other	0			
12	Advertising and promotion				
13	Office expenses	69,930			
14	Information technology	0		1	
15	Royalties				
16	Occupancy	47,286			· <u> </u>
17	Travel .	28,206			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings .	19,026			
20	Interest	0			
21	Payments to affiliates	454,338			
22	Depreciation, depletion, and amortization.	20,320			
23	Insurance	0			
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.)	*	*.		,
а	Political Activity	12,300			
a b	Donations	13,800			
_	Program Services/JOBS	1,755,731	<u> </u>		
d	Negotiations/Labor Management	13,971			
_	Dues/Subscriptions	6,992			
e £		9,380			
f 25	All other expenses	3,467,098	0	0	
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	3,407,030	0	U	0

Part X	Balance	Sheet

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	0	1	0
	2	Savings and temporary cash investments	2,861,407	2	2,717,553
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	57,333	4	32,166
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			`
		Schedule L	0	5	0
	6	Receivables from other disqualified persons (as defined under section	ą		
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L			
10	_		0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
155	8	Inventories for sale or use	0	8	0
•	9	Prepaid expenses and deferred charges	7,845	9	65,110
	10a	Land, buildings, and equipment cost or 10a 140,742 other basis. Complete Part VI of Schedule D	è s	•	
	ь	Less. accumulated depreciation . 10b 66,719	72,118	10c	74,023
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,998,703		2,888,852
	17	Accounts payable and accrued expenses	269,045		272,960
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
Liabilities	22	Payables to surrent and former officers directors trustees less		ś.	3. 1
abi		employees, highest compensated employees, and disqualified		#	
		persons Complete Part II of Schedule L	0	22	n
	23	Secured mortgages and notes payable to unrelated third parties .	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities. Complete Part X of Schedule D		25	0
	26	Total liabilities. Add lines 17 through 25	269,045	26	272,960
es		Organizations that follow SFAS 117, check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.	**	. 27	
ances	07		C40 400	~~	707 000
ale	27	Unrestricted net assets	640,406 2,089,252	27	767,203
P	28	Temporarily restricted net assets		28	1,848,689
Fund Bal	29	Permanently restricted net assets	0	29	0
ō		Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.	*		*
jts	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
				32	
t A	32	Retained earnings, endowment, accumulated income, or other funds		<u> </u>	
Net Assets	32 33 34	Total liabilities and net assets/fund balances	2,729,658	33	2,615,892

Form **990** (2009)

Pa	t XI Financial Statements and Reporting					
			Yes	No		
1	Accounting method used to prepare the Form 990. Cash Accrual Other Modified Acc					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O.	<u> </u>		Ĺ		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		1		
b		2b	\			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of					
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		✓		
	If the organization changed either its oversight process or selection process during the tax year, explain in					
	Schedule O					
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			,		
	issued on a consolidated basis, separate basis, or both:		, '	1		
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		•			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in					
	the Single Audit Act and OMB Circular A-133?	3a		1		
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b				

Form **990** (2009)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below.

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

OMB No 1545-0047

2009
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Department of the Treasury Internal Revenue Service

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

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

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-B If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III				
Na	me of organization				Employe	r identification number
		Electrical Workers Local 76			91	0268091
Pa		e organization is exempt unde				organization.
1 2 3	Provide a description of the Political expenditures . Volunteer hours	e organization's direct and indirect	et political campai 	gn activities in	Part IV. ▶ \$	12,300 0
Pa	rt I-B Complete if the	e organization is exempt und	er section 501(c)(3).		
1 2 3 4a b	Enter the amount of any e If the organization incurred Was a correction made? If "Yes," describe in Part I		managers under m 4720 for this ye	section 4955 . ear?	▶ \$ 	Yes No
						στ(σ)(σ).
1	activities	ing organization's funds contribute	ed to other organi	zations for sect	▶ \$ tion	12,300
3 4 5	line 17b Did the filing organization Enter the names, addresses were made. For each organiz contributions received that we	penditures. Add lines 1 and 2. Er	r (EIN) of all section the filing organ to a separate politic	n 527 political or ization's funds.	sirganizati Also ente	r the amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount par filing organiza funds If none, e	tion's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
Se	e Statement 1					

Schedule	\sim	/C	000	 000	F 73	2000

Sci	nedule C (Form 990 or 990-EZ) 2009					Page 2
Ρ	art II-A Complete if the organiza under section 501(h)).	ation is exem	pt under sectio	n 501(c)(3) and	filed Form 5768	
A B	Check ► ☐ if the filing organization Check ► ☐ if the filing organization				ons apply	
_		bbying Expend	litures	· · · · · · · · · · · · · · · · · · ·	(a) Filing organization's totals	(b) Affiliated group totals
	a Total lobbying expenditures to influer b Total lobbying expenditures to influer c Total lobbying expenditures (add lines d Other exempt purpose expenditures e Total exempt purpose expenditures (a f Lobbying nontaxable amount. Enter t	nce a legislative s 1a and 1b) add lines 1c and	body (direct lobb)	yıng)		
	columns. If the amount on line 1e, column (a) or (b) is Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$17,000,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000	20% of the ar \$100,000 plus \$175,000 plus	nontaxable amour mount on line 1e s 15% of the excess s 10% of the excess s 5% of the excess	over \$500,000 over \$1,000,000		
	g Grassroots nontaxable amount (enter h Subtract line 1g from line 1a. If zero c i Subtract line 1f from line 1c. If zero c if there is an amount other than zero c section 4911 tax for this year?	25% of line 1f) or less, enter -0 or less, enter -0-	or line 1ı, dıd the c	organization file Fo	rm 4720 reporting	☐ Yes ☐ No
	(Some organizations that n	nade a section		ection 501(h) lo not have to co 2a through 2f on		five
_	Lobbyi	ng Expenditure	s During 4-Year	Averaging Period	1	
	Calendar year (or fiscal year beginning ın)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2	a Lobbying nontaxable amount					
_	b Lobbying ceiling amount (150% of line 2a, column (e))				Ž. Š.	
_	c Total lobbying expenditures					
	d Grassroots nontaxable amount					
	e Grassroots ceiling amount (150% of line 2d, column (e))					
	f Grassroots Johnving expenditures		1			

Schedule C (Form 990 or 990-EZ) 2009

	(election under section 501(h)).	(a)		(b)	
	Y	/es	No		Amour	ıt
1	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:			·	12	·;
а	Volunteers?				198 12	٠,
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			^*	.70	8
C	Media advertisements?					<u></u>
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					
i	Total Add lines 1c through 1ı	, ž	¥.			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					35
b	If "Yes," enter the amount of any tax incurred under section 4912	1	52,			
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .		#\			
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			Z-	- (1)	Ã.
ar	t III-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5), o	rsec	tion	
	00 1(0)(0).				Yes	N
1	Were substantially all (90% or more) dues received nondeductible by members?			1		1
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	•		2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
1	"Yes." Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	al	. "			
а	Current year	.	2a			
b	Carryover from last year	.	2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	ļ	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					
•		.	4			
•	Taxable amount of lobbying and political expenditures (see instructions)	· .				
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 expenditure next year?					

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2009

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Department of the Treasury Internal Revenue Service

► Attach to Form 990. ► See separate instructions.

	e of the organization rnational Brotherhood of Electrical Worke	are Local 76	Employer identification number 91 0268091
		nor Advised Funds or Other Similar I	
	the organization answered "Yes		·
		(a) Donor advised funds	(b) Funds and other accounts
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 funds are the organization's property, subj		
6		onors, and donor advisors in writing that gr for the benefit of the donor or donor advis penefit?	
Pa	rt II Conservation Easements. Com	olete if the organization answered "Yes"	to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held Preservation of land for public use (e.g.		n of an historically important land area
	☐ Protection of natural habitat	☐ Preservation	on of a certified historic structure
2	Preservation of open space Complete lines 2a through 2d if the organiz easement on the last day of the tax year.	ation held a qualified conservation contribu	tion in the form of a conservation
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation e	asements	2b
c	Number of conservation easements on a conservation easement of conservation easement e		2c
d	Number of conservation easements includ	. ,	2d
3		ed, transferred, released, extinguished, or	terminated by the organization during
4	-	to conservation easement is located >	
5	• • • •	y regarding the periodic monitoring, inspec	
6		toring, inspecting, and enforcing conservat	
7		g, inspecting, and enforcing conservation e	easements during the year
8	Does each conservation easement reporte 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	d on line 2(d) above satisfy the requiremen	ts of section
9	In Part XIV, describe how the organization	reports conservation easements in its reverbe text of the footnote to the organization.	
Pa		ections of Art, Historical Treasures, or wered "Yes" to Form 990, Part IV, line 8.	Other Similar Assets.
1a		nder SFAS 116, not to report in its revenue ets held for public exhibition, education, or r te to its financial statements that describes	esearch in furtherance of public service
b		held for public exhibition, education, or re these items:	search in furtherance of public service
	(ii) Assets included in Form 990, Part X	/iii, line 1	► \$ ► \$
2	following amounts required to be reported	of art, historical treasures, or other similal under SFAS 116 relating to these items:	ir assets for financial gain, provide the
a b		line 1	► \$

_		0

Schedule	D (Form	qqn	2009

Pa	ort III Organizations Maintain	ing Col	lections	of Art H	istorio	al Treasur	rec 0	r Other 9	Similar A	scoto (a	Page 2
3	Using the organization's acquisition collection items (check all that app	, access									
a b		•		d e		Loan or ex Other					
C	Preservation for future genera	tions						· · · · · · · · · · · · · · · · · · ·		• • • • • • • • • • •	
4	Provide a description of the organizer AIV.		collections	s and exp	olain ho	w they furt	her the	e organiza	ation's ex	empt pur	pose in
5	During the year, did the organization assets to be sold to raise funds rather	r than to	be mainta	ained as p	art of the	ne organizat	tion's c	collection?			es 🗌 No
Pa	Escrow and Custodial / IV, line 9, or reported an	Arrange amount	ments. C on Form	omplete 990, Pai	if the o	organizatio e 21.	n ans	wered "Y	es" to Fo	orm 990,	Part
	is the organization an agent, truste included on Form 990, Part X? .						utions	or other	assets no		es 🗌 No
b	If "Yes," explain the arrangement in	Part XI	✓ and con	nplete the	follow	ıng table [.]	_				
									Α	mount	
С		•					. }	1c			
đ	Additions during the year							1d			
e	Distributions during the year .				•			1e			
							. L	1f			
b	Did the organization include an am If "Yes," explain the arrangement in	Part XI	٧					•		Y€	
Γa	rt V Endowment Funds. Co										
		(a) Cur	rent year	(b) Pric	or year	(c) Two ye	ears bac	k (d) Thre	e years bac	k (e) Four	years back
1a			 								
b	Contributions					 		¥		~.2	. 1
С	Net investment earnings, gains, and losses					3	**		· ·		~
	Grants or scholarships										
е	Other expenditures for facilities and programs								m _{rs}	*	
f g	Administrative expenses End of year balance		<u>.</u>						**	,	~ .
2	Provide the estimated percentage of	of the yea	ar end bal	lance held	d as:						
а	Board designated or quasi-endown		· • • • • • • • • • • • • • • • • • • •	%							
b											
С	,										
3a	Are there endowment funds not in thorganization by.	e posses	ssion of th	ie organiz	ation th	at are held	and a	dministere	d for the		Yes No
	(i) unrelated organizations .									3a(i)	
	(ii) related organizations									3a(iı)	
ь 4	If "Yes" to 3a(ii), are the related org	anızatıon	is listed a	s required	on Sc	hedule R?				3b	
•	Describe in Part XIV the intended us										
Par	rt VI Investments—Land, Bu						Part 2	X, line 10	· <u> </u>	 -	
	Description of investment	(2	a) Cost or oth			ost or other sis (other)	(c) Accumula depreciatio		(d) Book	value
1a	Land			0		0					0
b	• • • • • •	.		0		0			0		0
C	Leasehold improvements	.		0		0			0	<u>-</u> -	0
	Equipment	.		0		140,742	4	6	6,719		74,023
				0 0		0			0		0
ota	al. Add lines 1a through 1e. (Column (d)	must equ	aı rom 99	90, Part X,	column	(B), line 10	(c)) .	· .	<u> </u>		74,023

Schedule D (Form 990) 2009 Part VII Investments—Other Securities	O F 000 D 13		Page
		i, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-year	
Financial derivatives	0		
Closely-held equity interests	0		
Other			
***************************************	, , , , , , , , , , , , , , , , , , , ,		
Feder (Column A) must a multi-mode B. 144 (1914) 401			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12)	0		% ′
Part VIII Investments—Program Relate	d. See Form 990, Part X	k, line 13.	
(a) Description of investment type	(b) Book value	(c) Method of Cost or end-of-year	valuation market value
		-	····
			<u> </u>
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		P	
Part IX Other Assets. See Form 990, Part IX			
	(a) Description		(b) Book value
			-
Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) .		•
Part X Other Liabilities. See Form 990,			
1. (a) Description of liability	(b) Amount		, , , ,
ederal income taxes		0	
			(A)

			<*
		I	

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶

, b o c	dule D (Form 990) 2009		Da-sa
_	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial S	latamente	Page 4
		1	3,353,332
1	Total revenue (Form 990, Part VIII, column (A), line 12)	2	3,467.098
2	Total expenses (Form 990, Part IX, column (A), line 25)	3	-113,766
3	Excess or (deficit) for the year Subtract line 2 from line 1	4	-113,700
4	Net unrealized gains (losses) on investments	5	
5	Donated services and use of facilities	6	
6	Investment expenses	7	
7	Prior period adjustments	8	
8	Other (Describe in Part XIV.)	9	
9 0	Total adjustments (net). Add lines 4 through 8	10	-113,766
_	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue		
	Total revenue, gains, and other support per audited financial statements	1	3,353,332
1 2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		^	
	Net directized gains on investments	o *	
_	Donated Services and use of facilities	o (4)	
	recoveries or prior year grants	o	
	Add lines 2a through 2d	2e	(
3	Subtract line 2e from line 1	3	3,353,332
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	7 ,,,	
		o	
		o 🔃	
c	Add lines 4a and 4b	4c	(
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	3,353,33
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expense	ses per Re	
1	Total expenses and losses per audited financial statements	1 1	3,467,09
	the state of the s		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
2 a	20	0	
а	Donated services and use of facilities	0	
а	Donated services and use of facilities	0	
a b	Donated services and use of facilities	0	
a b c d	Donated services and use of facilities	0 0 0 2e	(
a b c d	Donated services and use of facilities	0	3,467,09
b c d	Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIV.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	0 0 0 2e 3	3,467,09
a b c d e 3 4 a	Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIV.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	0 0 0 2e 3	3,467,09
a b c d e 3 4 a b	Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIV.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV.)	0 0 0 2e 3	3,467,09
a b c d e 3 4 a b c	Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIV.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV.) Add lines 4a and 4b	0 0 0 2e 3 0 0 4c	
a b c d e 3 4 a b c 5	Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIV.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV.) Add lines 4a and 4b	0 0 0 2e 3	3,467,09 3,467,09
a b c d a b c 5 Par	Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIV.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV.) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	0 0 0 2e 3 0 0 4c 5	3,467,09

· SCHEDULE J (Form 990)

Part I

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

0268091

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

International Brotherhood of Electrical Workers Local 76

Questions Regarding Compensation

Employer identification number

91

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Fo 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items	rm 🌅	\t\t	\$0.
	☐ First-class or charter travel ☐ Housing allowance or residence for personal us	se .	32%	200
	☐ Travel for companions ☐ Payments for business use of personal residen	1 4%		76
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees	- · }		1 7
	☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)	1.7		,
		* 11.		100
h	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payme	n+ 53	, ,	3 ,
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
^	,	10	1	-
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all	2		
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?		~3	,
		6)
3	Indicate which, if any, of the following the organization uses to establish the compensation of the	ρ.		
	organization's CEO/Executive Director. Check all that apply.	7		h .
	Compensation committee	žŽ	3.	- 4
	☐ Independent compensation consultant ☐ Compensation survey or study	8		
	Form 990 of other organizations Approval by the board or compensation committee	e 📗	111	, , ,
		(C)		- '-
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing	\$9. . 88.		
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	ļ	1
ь	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	<u> </u>	✓
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	ļ	✓
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part	III. 🖟	* 3.	1.3
		, ,		
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.	\$		1.5
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	*	1	4
	compensation contingent on the revenues of:	2.3		
а	The organization?	5a	<u> </u>	
b	Any related organization?	5b	<u> </u>	
	If "Yes" to line 5a or 5b, describe in Part III			7
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any		3,	
	compensation contingent on the net earnings of:	3, 1		,
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" to line 6a or 6b, describe in Part III.	- 8	1	¥9°,
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was	<u> </u>		
-	subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe			İ
	in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	1	 	
-	Regulations section 53 4958-6(c)?	۵	1	

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

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

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

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation			T (1)	ij
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(ii) Other reportable compensation	compensation	(b) vontaxable benefits	(B)(i)—(D)	(r) Compensation reported in prior Form 990 or Form 990-EZ
Gary Younghans	3	\$96,626	\$0	\$0	\$0	80	\$96,626	\$96,626
	Ξ	\$	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	80	0\$	0\$	80	
Dennis Callies	Ξ	\$81,763		80	80	0\$	\$81,763	
	(E)	\$0	\$0	\$0	0\$	0\$	0\$	\$0
Clint Bryson	Θ	\$79,069	\$0	\$0	0\$	\$0	690'62\$	\$0
	: E	\$0	0\$	80	0\$	0\$	0\$	
	3							
	3 8							
						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	5							
	Ξ	1	1					+ + + + + + + + + + + + + + + + + + +
	Ξ							
)	€							
	3	1						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1)	Ξ							
	33							
	€ €							
j)	€ €							1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	3							
	: : E	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	Ξ:							
1)								
	€ 8							
	<u>=</u> :							
	<u>.</u>							
A								

Schedule J (Form 990) 2009

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection ▶ Attach to Form 990. Employer identification number

International Brotherhood of Electrical Workers Local 76	91	0268091
Form 990, Part VI, Section B, Line 11 - The Form 990 is reviewed by an administrative ass filing	istant p	rior to signing and
Form 990, Part VI, Section B, Line 15 - All salaries and wages are determined by a negotia agreement. The business manager and representative wages are determined by the collective and the by-laws of the organization. The office staff wages are determined by a collective between the IBEW 76 and the OPEIU 23.	ctively l	pargained agreement
Form 990, Part VI, Section C, Line 19 - There are International policies that the Local are reavailable to any interested party. The Local has its own by-laws that are approved by the		
polícies and by-laws are available upon request.		
	•••••	
	-	
	•••••	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. See separate instructions. A ▶ Attach to Form 990.

OMB No. 1545-0047

Employer identification number

Schedule R (Form 990) 2009 (f)
Direct controlling entity (f)
Direct controlling entity 0268091 Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (e)
Public charity status
(if section 501(c)(3)) 9 (e) End-of-year assets Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (d) Exempt Code section (d) Total income Cat No 50135Y (c)
Legal domicile (state
or foreign country) (c)
Legal domicile (state or foreign country) Primary activity Primary activity For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. International Brotherhood of Electrical Workers Local 76 (a) Name, address, and EIN of related organization (a) Name, address, and EIN of disregarded entity Name of the organization See Statement 2 Part I Part II

Schedule R (Form 990) 2009

Yes No managing partner? Percentage ownership General or 3 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, Ξ Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 (a)
Code V—UBI
amount in box 20 of
Schedule K-1
(Form 1065) Share of end-of-year assets 6 (h)
Disproportionate
allocations? ŝ Yes (f) Share of total income (g) Share of end-of-year assets line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Type of entity (C corp, S corp, or trust) because it had one or more related organizations treated as a partnership during the tax year.) (f) Share of total income Otc.
(d)
| Direct controlling entity Predominant income (related, unrelated, excluded from sections 512-514) Legal domicile (state or foreign country) ō (d) (Direct controlling | Primary activity (c) Legal domicile (state or foreign Name, address, and EIN of related organization Primary activity (a)
Name, address, and EIN of related organization Part III Part IV

Schedule R (Form 990) 2009

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

Note. Complete line 1 if any entity is listed in Parts II. III. or IV of this schedule.		Yes	SS No
	s II-IV?		
		<u>a</u>	<u>`</u>
		÷	<u> </u>
		2	,
c Gift, grant, or capital contribution from other organization(s)		10	>
of Loans or loan disparates to or for other organization(s)		70	<u> </u>
e Loans or loan guarantees by other organization(s)		D	>
			-
f Sale of assets to other organization(s)		+	>
		5	>
		27 ;	<u> </u>
h Exchange of assets		Ę	>
i Lease of facilities equipment or other assets to other organization(s)		;	>
	•		
i loon of family or ather contains from other executions.		F	7
Lease of facilities, equipment, or other assets from other		7	•
k Performance of services or membership or fundraising solicitations for other organization(s)		٦ ۲	>
l Performance of services or membership or fundraising solicitations by other organization(s)		=	<u>></u>
	•	£	>
		4	
n Sharing of paid employees		=	•
o Reimbursement paid to other organization for expenses		10	>
	•	10	>
		-	
d Other transfer of cash or property to other organization(s))	<u> </u>
L		-	>
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	iships and transac	ction thres	sholds.
(a) Name of other organization Tra	(b) Transaction type (a-r)	(c) Amount involved	olved
IBEW Building Association (I			
(1)		\$(\$64,102
8			
(6)			
(4)			
(5)			
(6)			
	Schedule I	Schedule R (Form 990) 2009	90) 2009

Page 4

Schedule R (Form 990) 2009

Unrelated Organizations Taxable as a Partnership (Complete of the organization answered "Yes" to Form 990, Part IV, line 37.) Part VI Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) (d) (a)	(q)	(5)	9	(9)	€	(6)	Ξ
Name, address, and EIN of entity	Primary activity	nicile	Are all partn section	ers Share of end-of-vear	Disproportionate allocations?		General or managing
			501(c)(3) organizations?		_	of Schedule K-1 (Form 1065)	partner?
			Yes No	0	Yes No		Yes No
						37	
					-		
					İ		
					į	Schedule R (Form 990) 2009	m 990) 2009

Statement 1 : Section 527 Political Organizations

Statement 2 : Description of Identification of Related Tax-Exempt Organizations

Statement 2

Form Schedule R

Page 1

Line Number Part II

International Brotherhood of Electrical Workers Local 76 91-0268091

Description of Identification of Related Tax-Exempt Organizations

Name, address and EIN

IBEW Building Association II

3040 South 3th Street

Suite 101

Tacoma, WA 98409

911816310

Primary activities

holding company for rental activities

State or foreign country Exempt code section WA 501(c)(2)

Public charity status

ublic charity status

Direct controlling entity

IBEW Local 76