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# Form **990**

Internal Revenue Service

### **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)

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

OMB No 1545-0047 Open to Public Inspection

A F	or the	2010 calendar year, or tax year beginning and ending	
В	heck if	C Name of organization	D Employer identification number
а	pplicable	NATIONAL JOINT APPRENTICESHIP & TRAINING	
	_Address	COMMITTEE FOR THE ELECTRICAL INDUSTRY	· ·
	Name change	Doing Business As	53-0212938
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)  Room/suit	e E Telephone number
	Termin-	301 PRINCE GEORGE'S BLVD	301-715-2300
	Amend		G Gross receipts \$ 21,789,302.
	Applica		H(a) is this a group return
	pendin		for affiliates? Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates included? Yes No
1 7	Гах-ехе	mpt status X 501(c)(3)	<b>-1</b> ' ' '
		e: ► WWW.NJATC.ORG	H(c) Group exemption number ▶
			ir of formation: 1941 M State of legal domicile: MI
		Summary	
		Briefly describe the organization's mission or most significant activities. EDUCATION	OF ELECTRICIANS.
Governance			
'n.	2	Check this box   if the organization discontinued its operations or disposed of mo	re than 25% of its net assets
Ş.		Number of voting members of the governing body (Part VI, line 1a)	3
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)	4
8		Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5 47
)ŧi		Total number of volunteers (estimate if necessary)	6
Activities &	ł	Total unrelated business revenue from Part VIII, cotumn (C) Line 12	7a 82,254.
⋖		Net unrelated business taxable income from Form 990 Rine 37 FIVE	7b 7,734.
رے ۔۔۔۔		I DEIVED	Prior Year Current Year
203. s	8 (	Contributions and grants (Part VIII, line 1h)	534,517. 675,370.
Ž. ž	1	Program service revenue (Part VIII, line 2g)	18,935,127. 20,316,150.
0 1 2 Revenue	1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	86,223. 144,129.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 90 (3) (3) (1)	146,484. 122,307.
AUG 	1	Fotal revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)	19,702,351. 21,257,956.
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	20,000. 101,433.
SCANNED Expenses		Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
Z s		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,391,980. 4,095,412.
₹ esc	16a l	Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.
SCAME	b	Fotal fundraising expenses (Part IX, column (D), line 25)	
W A	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	15,604,205. 16,792,717.
	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	20,016,185. 20,989,562.
		Revenue less expenses Subtract line 18 from line 12	<313,834.> 268,394.
<u> </u>		l l	Beginning of Current Year End of Year
ets	20	Fotal assets (Part X, line 16)	19,784,929. 20,722,421
Net Assets or Find Balances	21	Total liabilities (Part X, line 26)	5,760,501. 6,325,623.
E Set	22	Net assets or fund balances Subtract line 21 from line 20	14,024,428. 14,396,798.
	art II	Signature Block	
Unc	ler pena	ties of perjury, I declare that I have examined this return, including accompanying schedules and state	ments, and to the best of my knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prepar	er has any knowledge.
		Mehod. Com Exacto Diacone	7.13.2011
Sig	ın	Signature of officer	Date
He		MICHAEL I. CALLANAN, EXECUTIVE DIRECTOR	
		Type or print name and title	
		Print/Type preparer's name Preparer's signature	Date Check PTIN
Pai	d	CRAIG A STEVENS CPA Trans a Slevens	5-12-11 self-employed
Pre	parer	Firm's name CALIBRE CPA GROUP PLAC	Firm's EIN
Use	Only	Firm's address 1850 K STREET, N.W.	
		WASHINGTON, DC 20006	Phone no. (202)331-9880
Ma	y the IF	RS discuss this return with the preparer shown above? (see instructions)	X Yes No
032	001 02-2	2-11 LHA For Paperwork Reduction Act Notice, see the separate instructions.	Form <b>990</b> (2010
			27/0
			ζ ν

Par	t III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	$\mathbf{x}$
1	Briefly describe the organization's mission	-
	TO DEVELOP AND STANDARDIZE TRAINING TO EDUCATE THE MEMBERS OF	THE
	INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS & THE NATIONAL	
	ELECTRICAL CONTRACTORS ASSOCIATION; INSURING AND PROVIDING THE	
	ELECTRICAL CONSTRUCTION INDUSTRY WITH THE MOST HIGHLY TRAINED	AND
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	Yes X No
	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?	Yes X No
	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	022 006
4a	(Code. ) (Expenses \$ 17,100,706. including grants of \$ 101,433.) (Revenue \$ 20	
	DEVELOPED AND PRESENTED ELECTRICAL APPRENTICESHIP COURSE STUDY	· · · · · · · · · · · · · · · · · · ·
	MATERIALS, WORKSHOPS, PUBLICATIONS, AND CONTINUING EDUCATION.	
		<del></del>
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
40	(Code:) (Expenses #	,
4c	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$	)
4d	Other program services. (Describe in Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$ )	
<u>4e</u>	Total program service expenses ► 17,100,706.	- 000
		Form <b>990</b> (2010)

orm (	990 (2010) COMMITTEE FOR THE ELECTRICAL INDUSTRY 53-0212	030	D	age 3
	IV Checklist of Required Schedules	<u> </u>		age o
-	Officerial of Frequency Constraints		Yes	No
1 1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		162	NU
	If "Yes," complete Schedule A	1	х	
	Is the organization required to complete Schedule B, Schedule of Contributors?	2	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		х
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		х
	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
	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	Х	
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	_8	<u> </u>	X
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	<u></u>	X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		1	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	<u> </u>	X
	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	11c		X
	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			1,7
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	_11e		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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	111		^
	Schedule D, Parts XI, XII, and XIII	12a	х	
	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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, Parts I and IV	14b		X
	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, Parts II and IV	15	X	
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? If "Yes," complete Schedule F, Parts III and IV	_16		X
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	<u> </u>	X
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	<u></u> .	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	1	1	

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20a

b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that

complete Schedule G, Part III

20a Did the organization operate one or more hospitals? If "Yes," complete Schedule  ${\it H}$ 

operate one or more hospitals must attach audited financial statements (see instructions)

53-0212938 Page 4 Part IV Checklist of Required Schedules (continued) Yes No 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 X 21 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 X 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Х Schedule J 23 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 X Schedule K. If "No", go to line 25 24a 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 d 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 Х 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 Х Schedule L, Part I 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified X person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 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 Х Schedule L, Part III 27 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) a 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 c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L. Part IV 28c Х Х Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? 31 Х If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Х 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Х 34 Х 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? 35 a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes X No Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 Х If "Yes," complete Schedule R, Part V, line 2 36

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Х

37

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

Note. All Form 990 filers are required to complete Schedule O

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197

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Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V							
			Yes	No				
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 75							
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?	1c						
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 27							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	ľ						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	_X_					
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			x				
financial account in a foreign country (such as a bank account, securities account, or other financial account)?								
b	If "Yes," enter the name of the foreign country							
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u>X</u>				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	_5b		X				
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_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?	<u>6a</u>		X				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
_	were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).  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				
a	b If "Yes," did the organization notify the donor of the value of the goods or services provided?							
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b						
·	to file Form 8282?	7c		х				
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d							
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X				
f								
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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 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		X				
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X				
10	Section 501(c)(7) organizations. Enter							
а	Initiation fees and capital contributions included on Part VIII, line 12							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities							
11	Section 501(c)(12) organizations. Enter.							
a	Gross income from members or shareholders  11a							
b	Gross income from other sources (Do not net amounts due or paid to other sources against							
40-	amounts due or received from them)  [11b]	40-						
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year  Section 501(a)(20) qualified perpendit health incurance issuers.							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	$\vdash$				
а	Note. See the instructions for additional information the organization must report on Schedule O	_13a_		<del>                                     </del>				
b								
ט	organization is licensed to issue qualified health plans							
С								
14a		14a	-	Х				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	l					
			990	(2010)				

Form 990 (2010) COMMITTEE FOR THE ELECTRICAL INDUSTRY

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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.

	Check if Schedule O contains a response to any question in this Part VI				X			
Sec	tion A. Governing Body and Management							
				Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	4					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	4					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with any other						
	officer, director, trustee, or key employee?		2		X			
3	Did the organization delegate control over management duties customarily performed by or under the	e direct supervision						
	of officers, directors or trustees, or key employees to a management company or other person?	•	3_		<u>X</u>			
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 was filed?	4		X			
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?	5_		X			
6	Does the organization have members or stockholders?		6		X			
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	embers of the			٠,,			
	governing body?		7a		X			
	Are any decisions of the governing body subject to approval by members, stockholders, or other pe		7b					
8	Did the organization contemporaneously document the meetings held or written actions undertaken by the following	during the year						
а	The governing body?		8a	Х				
b	Each committee with authority to act on behalf of the governing body?		8b	X	<del></del>			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ached at the	0.0	- 21				
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	ionea at the	9		x			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Fi	Revenue Code )	<del></del>					
				Yes	No			
10a	Does the organization have local chapters, branches, or affiliates?		10a		Х			
b	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					
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before f	iling the form?	11a	X				
b	<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.							
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13							
þ	<b>b</b> Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise							
	to conflicts?		12b	X				
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes," describe		.,	i			
40	in Schedule O how this is done		12c	X				
13	Does the organization have a written whistleblower policy?		13_	X				
14 15	Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approve	al by independent	14					
13	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•						
а	The organization's CEO, Executive Director, or top management official		15a	х				
b	Other officers or key employees of the organization		15b	X				
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment with a			}			
	taxable entity during the year?		16a		Х			
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva-	aluate its participation						
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	anization's		ļ				
	exempt status with respect to such arrangements?		16b	<u> </u>	<u> </u>			
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ► NONE							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (501(c)(3)s only) avaıla	ble for					
	public inspection. Indicate how you make these available. Check all that apply							
	Own website Another's website X Upon request							
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflict of interest policy	, and fina	ıncıal				
	statements available to the public							
20	State the name, physical address, and telephone number of the person who possesses the books a	ina records of the organ	ization 🕨	_				
	MARK J. CERULLA, CPA - 301-715-2367 301 PRINCE GEORGE'S BLVD, UPPER MARLBORO, MD 2077	7 A						
	301 PRINCE GEORGE'S BLVD, UPPER MARLBORO, MD 207	/ <del>'</del>			(0040)			

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

Check if Schedule O contains a response to any question in this Part VII

### 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.
- 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, if any 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

(A)	(B)	(C)						(D)	(E)	(F)	
Name and Title	Average			Pos				Reportable	Reportable	Estimated	
	hours per week	(check all that a			app	ly)	compensation from	compensation from related	amount of other		
	(describe	Individual trustee or director						the	organizations	compensation	
	hours for	E TO	_ 			ated		organization	(W-2/1099-MISC)	from the	
	related	ustee	trust			Suadr		(W-2/1099-MISC)	,	organization	
	organizations	lua! tr	tional		obloy	yee yee	_			and related	
	in Schedule O)	Individ	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations	
EDWIN D. HILL											
TRUSTEE	1.00	X	L.	<u> </u>				0.	0.	0	
JOHN M. GRAU	1										
PRUSTEE	1.00	X	<u> </u>	_	ļ		_	0.	0.	0	
JERRY WESTERHOLM											
PRUSTEE	1.00	X	<u> </u>	<u> </u>		<u> </u>		0.	0.	0	
GEARY HIGGINS								_			
TRUSTEE	1.00	X	┞		<u> </u>	<u> </u>		0.	0.	0	
MICHAEL I. CALLANAN	1										
EXECUTIVE DIRECTOR	40.00			X		-		201,025.	0.	63,372	
RICK HECKLINGER	40.00							146 000		40 504	
DIRECTOR	40.00	-	ļ	_		Х		146,993.	0.	48,524	
JIM BOYD	40.00					٠,		140 605	•	40 086	
DIRECTOR	40.00	<u> </u>	ļ			Х		142,625.	0.	48,076	
PALMER HICKMAN	40.00		Ì		ŀ	v		124 056	0	27 574	
DIRECTOR	40.00	-	<del>                                     </del>			Х		134,956.	0.	37,574	
TODD STAFFORD	40.00					x		141,395.	0.	E1 E20	
DIRECTOR	40.00	-	-			A		141,393.		51,520	
STEVE ANDERSON	40.00	i				X		133,473.	0.	46,393	
DIRECTOR	40.00		<u> </u>			^		133,473.	0.	40,393	
			<u> </u>			_					
			-							_	
<del></del>			-		-	-					
						<u></u>				,	
			$\vdash$			-					

Form 990 (2010)

Page 8

Part VII Section A. Officers, Directors, Tru		nplo	yee			ligh	est	1					
(A) Name and title	(B) Average			ر Pos	C) Ition	,		(D)	(E)		ì	F)	_,
Name and title	hours per	(cl				, арр	ly)	Reportable compensation	Reportable compensation		l .	nated unt o	
	week	_			Γ			from	from related		l .	her	
	(describe hours for	director						the	organization		compe		
	related	10 aa	stee			nsate		organization (W-2/1099-MISC)	(W-2/1099-MIS	3C)	i .	n the	
	organizations	Individual trustee or	nal tru		oyee	Highest compensated employee		(**-271099-101130)			organ and r		
	in Schedule	Jividu	strtutio	Officer	Key employee	thest (	Former				organi		
	O)	_ <u>≅</u>	Ë	5	5	분등	F0						
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		ļ								1			
1b Sub-total		l	1		<b>!</b>			900,467.		0.	295	4 -	59
									0.	200	<u>, = -</u>	0.	
d _Total (add lines 1b and 1c)	•					•		900,467.		0.	295	, 45	_ <u>-</u> -
2 Total number of individuals (including but r	not limited to th	ose	liste	d al	oove	e) wh	o r		,000 in reportabl				
compensation from the organization													10
											Y	es	No
3 Did the organization list any former officer,		stee	, ke	y em	plo	yee,	or h	highest compensated en	nployee on				
line 1a? If "Yes," complete Schedule J for s											_3	$\perp$	<u>X</u>
4 For any individual listed on line 1a, is the si									the organization		.		
and related organizations greater than \$15			-								4 2	X	
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes," corr					-		eiat	ted organization or indivi	dual for services		_		х
Section B. Independent Contractors	ipiete Scriedui	<i>E J I</i>	UI St	ICII ,	pers	OII					5		
Complete this table for your five highest co	mpensated inc	dene	ende	nt c	onti	racto	rs t	that received more than	\$100,000 of com	nens	ation fro		
the organization	,			0	•			and received more than	<b>\$100,000 01 0011</b>	ропо	4110111110		
(A)								(B)			(C)		
Name and business	address							Description of s	ervices	С	ompens	ation	i
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5 MAXWELL DRIVE, CLIFTON					<u> 55</u>		_	PRINTER		3	<u>,483</u>	, 33	<u> </u>
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627 OXFORD ROAD, ANN ARB	∩D MT 4	1 2 1	1 O /	1				CONFEDENCE D	BOMEDED	1	060	0.7	) 6
UNITED PARCEL SERVICE	OK, MI 4	± O .	<u> </u>	<u> </u>			-	CONFERENCE P	VOATDEK	T	,068	, 0 2	<u>. O .</u>
PO BOX 7247-0244, PHILAD	ELPHTA	ΡZ	Δ 1	L <b>9</b> 1	L70	0		SHIPPING			658	6 5	īΔ.
					- · ·	_						,	<i>,</i> - •

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization

Form 990 (2010)

Statement of Revenue Part VIII (D) Revenue excluded from (A) (B) (C) Total revenue Unrelated Related or exempt function business tax under sections 512, 513, or 514 revenue revenue Contributions, gifts, grants and other similar amounts 1 a Federated campaigns b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 675,370. similar amounts not included above 99,028. g Noncash contributions included in lines 1a-1f \$ 675,370. h Total. Add lines 1a-1f **Business Code** 900099 19191904. 19191904. Program Service Revenue 2 a TRAINING MATERIALS 1,041,992.1,041,992. **b** CLASSES & SEMINARS 900099 82,254 TRAINING TOOLS 900004 82,254. d f All other program service revenue 20316150 Total, Add lines 2a-2f Investment income (including dividends, interest, and 114,769 114,769. other similar amounts) 4 Income from investment of tax-exempt bond proceeds 100,012 100,012. Royalties 5 (ı) Real (II) Personal 6 a Gross Rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other 560,706 assets other than inventory b Less cost or other basis 531,346 and sales expenses 29,360. c Gain or (loss) 29,360 29,360. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events ▶ 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 900099 14,600. 14,600 11 a ADVERTISING INCOME 7,695. ь MISCELLANEOUS 900099 d All other revenue e Total. Add lines 11a-11d 22,295. 21257956. 82,254. Total revenue. See instructions. 20256191. 244,141. 032009 12-21-10 Form 990 (2010)

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 (R) (C) and (D)

	All other organizations must com	(A) but are		(C) (C), and (D).	
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	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				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	101,433.	101,433.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	263,857.	197,893.	65,964.	
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	2,570,744.	1,388,797.	1,181,947.	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	536,736.	298,636.	238,100.	
9	Other employee benefits	520,489.	224,084.	296,405.	
10	Payroll taxes	203,586.	104,877.	98,709.	
11	Fees for services (non-employees)				
а	Management				
b	Legal	125,389.	125,389.		
С	Accounting	40,500.		40,500.	
đ	Lobbying	·	·		
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	6,363.		6,363.	
13	Office expenses	393,573.		393,573.	
14	Information technology	207,371.	_	207,371.	
15	Royalties	35,151.	35,151.		
16	Occupancy	554,105.		554,105.	
17	Travel	118,631.		118,631.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	293,858.		293,858.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	117,201.		117,201.	
23	Insurance	146,102.		146,102.	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A)				
	amount, list line 24f expenses on Schedule 0.)				
а	UBIT	1,945.	1,945.		
b	MATERIALS AND PRODUCTS	11,860,904.	11,860,904.		
С	NATIONAL TRAINING INSTI	1,665,673.	1,665,673.		
d	CLASSES, COURSES AND SE	823,175.	823,175.		
е	SPECIAL RESEARCH	81,920.	81,920.		
f	All other expenses	320,856.	190,829.	130,027.	
<u>25</u>	Total functional expenses. Add lines 1 through 24f	20,989,562.	17,100,706.	3,888,856.	0
26	Joint costs. Check here   If following SOP				
	98-2 (ASC 958-720). Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and fundraising				
	solicitation				

Par	tΧ	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	832,741.	1	1,143,647.
	2	Savings and temporary cash investments	84,496.	2	72,047.
	3	Pledges and grants receivable, net	147,039.	3	368,472.
	4	Accounts receivable, net	1,129,889.	4	1,178,422.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees Complete Part II			
		of Schedule L		5	· · · · · · · · · · · · · · · · · · ·
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instructions)		_6	
Assets	7	Notes and loans receivable, net	304,591.	7	297,652.
Ass	8	Inventories for sale or use	8,903,814.	8	8,827,575.
	9	Prepaid expenses and deferred charges	203,913.	9	549,524.
	10a	Land, buildings, and equipment. cost or other			
		basis Complete Part VI of Schedule D 10a 9,238,661.			
	b	Less accumulated depreciation 10b 2,832,930.	6,509,183.	10c	6,405,731.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11	1,650,509.	12	1,860,597.
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	18,754.	15_	18,754.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	19,784,929.	16	20,722,421.
	17	Accounts payable and accrued expenses	1,635,501.	17	2,429,056.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			
iaț	1	highest compensated employees, and disqualified persons Complete Part II			
_		of Schedule L	4 125 000	22	2 006 567
	23	Secured mortgages and notes payable to unrelated third parties	4,125,000.	23	3,896,567.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D	5,760,501.	25 26	6,325,623.
	26	Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117, check here ► X and complete	3,700,301.	_26_	0,323,023.
	l				
ĕ	07	lines 27 through 29, and lines 33 and 34. Unrestricted net assets	13,898,306.	27	14,034,390.
lan	27	Temporarily restricted net assets	126,122.		362,408.
B3	28 29	Permanently restricted net assets	120,122.	29	302,400.
Ĕ	29	Organizations that do not follow SFAS 117, check here		25	
Ē		complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
t As	32	Retained earnings, endowment, accumulated income, or other funds		32	
Š	33	Total net assets or fund balances	14,024,428.	33	14,396,798.
	34	Total liabilities and net assets/fund balances	19,784,929.		20,722,421.
	1 34	Total habilities and thet assets/fully baldifices	17,104,747.	<u> </u>	5 000 (224

Form **990** (2010)

b 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

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Act and OMB Circular A-133?

## SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

2010

Open to Public Inspection

Name of t	the organizati	on NATIONA	L JOINT APPR	ENTIC	ESHIP	& TR	AININ	G	Employer id	dentificati	on number
		COMMITT	EE FOR THE E	LECTR	ICAL	INDUS	TRY		53	<u>-0212</u>	938
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part	t) See inst	ructions			
The organ	ization is not a	private foundation	because it is (For lines	1 through	11, check	only one b	ox)				
1 🔲	A church, co	nvention of churches	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)	١.			
2			0(b)(1)(A)(ii). (Attach Sc								
з 🔲	A hospital or	a cooperative hospi	tal service organization	described	n section	170(b)(1)	(A)(iii).				
4			operated in conjunction					(b)(1)(A)	(iii). Enter th	e hospital	's name,
	city, and stat								` '	•	,
5	An organizati	on operated for the	benefit of a college or ui	niversity ov	wned or op	erated by	a governi	nental u	nit describe	d in	
		(b)(1)(A)(iv). (Comple		•	•	,	J				
6 🔲			ent or governmental uni	t described	d in sectio	n 170(h)(1	ινανω				
7 🗍		•	eives a substantial part					r from th	e general o	ublic desc	ribed in
- —		b)(1)(A)(vi). (Comple				9				aaa aaaa	
8 🔲			ection 170(b)(1)(A)(vi).	(Complete	Part II )						
9 X			eives: (1) more than 33			rom contri	hutions m	nembersl	nin fees and	d aross rea	ceints from
-			nctions - subject to certa								
		•	axable income (less sec	•	•	•			• •	•	
		509(a)(2). (Complete			,	0,,,00000	20401100 0	<i>y</i> org	jamzation a	itor dano c	0, 1010
10			perated exclusively to te	st for publi	ic safety S	See sectio	n 509(a)(4	ı)			
11 🗔	_	= .	perated exclusively for the	•	-		, ,,	•	rny out the r	urnoses c	of one or
—	_		ations described in secti		-					•	
			organization and compl				., 000 360	,0011 508	nano. Once	or the box	tilat
	a Type		<b>–</b>	э 🔲 Тур	_		tegrated		4	Type III - (	Other
е 🗀			at the organization is not			-	_	r more di			
٠			han one or more publicl						-		
f			ten determination from						33(4)(1) 01 3	cotion 505	'(α)(Σ)
•	_	rganization, check th			at 11 10 u 1 j	po 1, 13po	п, от турс				
g		•	organization accepted ai	ny aift or c	ontribution	from any	of the follo	owing be	rsons?		<b>L</b>
9			irectly controls, either a			•		٠.			Yes No
		•	upported organization?	one or log	007 ******	po.00.10 c	accombca .	iii (ii) aira	(III) DOIOTT,	11g(i)	163 140
	_		n described in (i) above?	)						11g(ii)	<del>                                     </del>
		·	person described in (i)		e?					11g(iii)	
h			about the supported or	• •						119(11)	LL
.,	r rovide the r	ollowing information	about the supported of	garnzation	(3)						
(2) No	-6	(**) [1]	(iiı) Type of	(iv) Is the c	organization	(v) Did voi	u notify the	(vi)	Is the		
	of supported	(ii) EIN	organization		sted in your			lorganiza	tion in col.		nount of
Ol y	anization		(described on lines 1-9 above or IRC section		document?			(i) organ U	ized in the S.?	Sup	port
			(see instructions))	Yes	No	Yes	No	Yes	No		
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	aher work ut	saaction Act Notice	, see me mouucuons i	UI .				ocnedi	JIE A (FORM	SOU OF 95	90-EZ) 2010

032021 12-21-10

Form 990 or 990-EZ.

### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual grants ")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4						
Se	ction B. Total Support	<del>,</del>					
Cale	ndar year (or fiscal year beginning in) ►	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4						
8	Gross income from interest,				-		
	dividends, payments received on						
	securities loans, rents, royalties					•	
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10				1		
12	Gross receipts from related activities	•	•			12	
13	First five years. If the Form 990 is fo	r the organization	's first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3)	
80	organization, check this box and stor ction C. Computation of Publ	here	rooptogo	_			<u> </u>
						T	
	Public support percentage for 2010 (		•	column (f))		14	%
	Public support percentage from 2009			m lima 10. and line :	14 00 1/00/	15	<u>%</u>
108	33 1/3% support test - 2010. If the c stop here. The organization qualifies	•			14 IS 33 1/3% OF F	nore, check this bo	x and
	- ·				lung 15 to 22 1/20	/ ar mara abaak th	<b>▶</b>
, k	<ul> <li>33 1/3% support test - 2009. If the cand stop here. The organization qua</li> </ul>	-			IIIIe 13 IS 33 1/37	o of more, check in	IIS DOX
17-	•		,,		12 160 or 16b	and line 14 is 100/	2r mara
1/8	<ul> <li>10% -facts-and-circumstances tes and if the organization meets the "fac</li> </ul>	_					•
	meets the "facts-and-circumstances"			-		art iv now the organ	nization
		J	•		J	17a and line 15 := :	100/ or
ľ	10% -facts-and-circumstances tes	_					
	more, and if the organization meets to organization meets the "facts-and-circ				•		,
10							
_10	Private foundation. If the organization	ni did HOL CHECK a	LUUX OITIINE TO, T	oa, 100, 17a, 01 17			
					Scn	edule A (Form 990	or 990-⊏Z)2010

Schedule A (Form 990 or 990-EZ) 2010 COMMITTEE FOR THE ELECTRICAL INDUSTRY

Part III | Support Schedule for Organizations Described in Section 509(a)(2) 53-0212938 Page 3

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support				· · · · · · · · · · · · · · · · · · ·					
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	ınclude any "unusual grants ")	753,702.	489,233.	494,280.	534,517.	675,370.	2947102.			
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	16486452	20480190	24290876	18935127.	20233896	100426541			
_	Gross receipts from activities that	10400432.	20400170.	<u> </u>	10/3/12/-	20233030.	100420341			
3	are not an unrelated trade or bus- iness under section 513									
4	Tax revenues levied for the organ-									
•	ization's benefit and either paid to or expended on its behalf									
5	The value of services or facilities									
	furnished by a governmental unit to									
	the organization without charge									
6	Total. Add lines 1 through 5	17240154.	20969423.	<u>24785156.</u>	19469644.	20909266.	103373643			
7a	Amounts included on lines 1, 2, and	1								
	3 received from disqualified persons						0.			
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.			
_	Add lines 7a and 7b						0.			
	Public support (Subtract line 7c from line 6)						103373643			
	ction B. Total Support	<u> </u>		<u> </u>		<u> </u>	103373043			
	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total			
	Amounts from line 6			24785156	19469644.					
_	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	258,439.			236,641.					
Ŀ	Unrelated business taxable income		,							
•	(less section 511 taxes) from businesses acquired after June 30, 1975									
C	Add lines 10a and 10b	258,439.	257,215.	367,076.	236,641.	214,781.	1334152.			
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		64,704.	6,208.	2,184.	8,734.	81,830.			
12	Other income Do not include gain or loss from the sale of capital		6,556.	1,834.			77,383.			
13	assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12)	17498593.					104867008			
14	First five years. If the Form 990 is for						<del></del>			
• •	check this box and stop here	, _, _,	,,		,	\-/\-/ <del>g</del> arm	▶ □			
Sec	ction C. Computation of Pub	lic Support Pe	rcentage			·				
15	Public support percentage for 2010			column (fl)		15	98.58 %			
16	Public support percentage from 200			00.0 (1,)		16	98.61 %			
	ction D. Computation of Inve						<u> </u>			
17	Investment income percentage for 2		<del></del>			17	1.27 %			
	·			116 13, Coldilli (1))		18	1.27 %			
18	Investment income percentage from			on line 14 and line	a 15 is mara that					
198	a 33 1/3% support tests - 2010. If the									
_	more than 33 1/3%, check this box	•	•		• • • •		►\X			
ŀ	b 33 1/3% support tests - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and									
	line 18 is not more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization  Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions									
		on did not check a	box on line 14, 19	a, or 190, check t						
0320	23 12-21-10				Sch	nedule A (Form 99	0 or 990-EZ) 2010			

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

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

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Inspection

Name of the organization

NATIONAL JOINT APPRENTICESHIP & TRAINING

**Employer identification number** 

		ELECTRICAL INDUSTRY	53-0212938
Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or I	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	1	
2	Aggregate contributions to (during year)	20,000.	
3	Aggregate grants from (during year)	20,000.	
4	Aggregate value at end of year	20,000	
5	Did the organization inform all donors and donor advisors in		nde
3	are the organization's property, subject to the organization's	_	Yes X No
6	Did the organization inform all grantees, donors, and donor a	_	
U	for charitable purposes and not for the benefit of the donor of		•
	impermissible private benefit?	or donor advisor, or for any other purpose come	Yes X No
Par		ganization answered "Ves" to Form 990. Part IV	
	Purpose(s) of conservation easements held by the organizat		, 1110 7
1			ally important land area
	Preservation of land for public use (e.g., recreation or e		• •
	Protection of natural habitat	Preservation of a certified h	historic structure
_	Preservation of open space	6 - d	
2	Complete lines 2a through 2d if the organization held a quali	tied conservation contribution in the form of a c	conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	of an art dark of a	2b
C	Number of conservation easements on a certified historic sti	· ·	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	1
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the orga	anization during the tax
_	year >		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe	• •	П., П.,
_	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		· · · · · · · · · · · · · · · · · · ·
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170(h)(4)(	
_	and section 170(h)(4)(B)(ii)?		└ Yes
9	In Part XIV, describe how the organization reports conservat	•	·
	include, if applicable, the text of the footnote to the organiza	ition's financial statements that describes the o	rganization's accounting for
Da	conservation easements rt III   Organizations Maintaining Collections o	of Art. Historical Transuras, or Other	Similar Assats
га	Complete if the organization answered "Yes" to Form		Oninia Assets.
			and balance about well- of out
1a	If the organization elected, as permitted under SFAS 116 (Al		
	historical treasures, or other similar assets held for public ex		or public service, provide, in Part XIV,
_	the text of the footnote to its financial statements that desci		hadaaa hadaa ah a
b	If the organization elected, as permitted under SFAS 116 (A		
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public s	ervice, provide the following amounts
	relating to these items		
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre	-	n, provide
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items	
а	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

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Schedule D (Form 990) 2010

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		EE FOR THE							12938	
Par							-			
3	Using the organization's acquisition, accessi	on, and other record	ds, check	any of the	following tha	t are a s	ignificant us	e of its	collection i	tems
	(check all that apply)									
а	Public exhibition	c	ı 🖳 ı	oan or exc	hange progra	ams				
b	Scholarly research	е	, 🔲	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	in how th	ey further th	he organizati	on's exe	mpt purpose	ın Pari	t XIV	
5	During the year, did the organization solicit o	r receive donations	of art, his	storical trea	sures, or oth	er sımıla	r assets			
	to be sold to raise funds rather than to be ma								Yes	No No
	t IV Escrow and Custodial Arran					"Yes" to	Form 990, F	Part IV.	ine 9. or	
	reported an amount on Form 990, Par			J			,	·	·	
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contribution	s or other as	sets not	included	· •••		
	on Form 990, Part X?		,						Yes	☐ No
h	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowina t	able						
-	ii roo, oxpiain iio anangoment iir ait /iir	a., a co., p. c. c							Amount	
С	Beginning balance						1c		741104111	
	Additions during the year						1d			
	Distributions during the year						1e	<del></del>	<del></del> -	
e 4	Ending balance						1f			
f 20	Did the organization include an amount on Fe	orm 000 Part V line	212				L!!		Yes	No
	If "Yes," explain the arrangement in Part XIV	omi 330, Fait A, iiie	721:						J 162	NO
Par		f the organization ar	nswered	"Yes" to Fo	rm 990 Part	IV line 1	10			
	Eliastillone i aliasi somplete	(a) Current year		rior year	(c) Two year		(d) Three yea	re hack	(e) Four y	pare back
4-	Paginning of year halance	(a) Current year	(6) -	noi yeai	(C) TWO year	SUACK	(a) tinee yea	15 Daux	(e) rour y	sais vack
	Beginning of year balance									
b	Contributions									<del></del>
C	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs		-							
Ť	Administrative expenses				-					
g	End of year balance			<u> </u>	<u>.                                    </u>		·		L	
2	Provide the estimated percentage of the year	r end balance held a								
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С		%								
За	Are there endowment funds not in the posse	ession of the organiz	zation tha	at are held a	ind administe	ered for t	the organizat	ion	F	
	by.									es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
þ	If "Yes" to 3a(ii), are the related organization:	•							3b	
4	Describe in Part XIV the intended uses of the									
Pai	t VI Land, Buildings, and Equipm	<del></del>						<del></del>		
	Description of investment	(a) Cost or o			t or other		ccumulated	1	(d) Book	value
		basis (invest	ment)	basis	(other)	de	preciation	-		
1a	Land			<b>P</b> ^-						
b	Buildings				5,210.				<u>5,835</u>	
С	Leasehold improvements				0,309.		<u>569,34</u>			<u>,965.</u>
đ	Equipment			2,40	3,142.	2,	<u>263,58</u>	6.	<u> 139</u>	<u>,556.</u>
	Other							$-\!\!\!\!\!+$		
Total	I. Add lines 1a through 1e. (Column (d) must e	egual Form 990. Pari	t X. colur	nn (B), line 1	10(c) )			<b>▶</b>	6.405	.731.

Schedule D (Form 990) 2010

Schedule D (Form 990) 2010 COMMITTEE FOR THE ELECTRICAL INDUSTRY 53-0212938 Page 3 Part VII Investments - Other Securities. See Form 990, Part X, line 12 (a) Description of security or category (c) Method of valuation (b) Book value (including name of security) Cost or end-of-year market value (1) Financial derivatives (2) Closely-held equity interests Other (A) PUBLICLY TRADED 1,860,597. END-OF-YEAR MARKET VALUE (B) SECURITIES (C) (D) (E) (F) (G) (H) (I) 1,860,597 Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) Part VIII Investments - Program Related. See Form 990, Part X, line 13 (c) Method of valuation (a) Description of investment type (b) Book value Cost or end-of-year market value (1)(2)(3)(4)(5)(6)(7)(8)(9)(10)Total (Col (b) must equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, line 15 (a) Description (b) Book value (1)(2) (3)(4) (5) (6)(7)(8) (9) (10)Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability (b) Amount (1) Federal income taxes (2) (3)(4) (5) (6)(7)(8) (9) (10)(11)Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

FIN 48 (ASC 740) 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 2. FIN 48 (ASC 740)

Schedule D (Form 990) 2010

032053 12-20-10

NATIONAL JOINT APPRENTICESHIP & TRAINING
Schedule,D (Form 990) 2010 COMMITTEE FOR THE ELECTRICAL INDUSTRY 53-0212938 Page 4

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1 Total revenue (Form 990, Part VIII, column (A), line 12)

1 21, 257, 956.

Par	t XI	Reconciliation of Change in Net Assets from Form 990 to	<u>Audit</u>	ted Financ	ial Sta	<u>tem</u> e	ent	ts	
1	Total r	evenue (Form 990, Part VIII, column (A), line 12)			1			21,257,	
2	Total e	expenses (Form 990, Part IX, column (A), line 25)		[	2			20,989,	562.
3	Exces	s or (deficit) for the year. Subtract line 2 from line 1		Ĺ	3			268,	394.
4	Net ur	realized gains (losses) on investments		[	4			103,	<u>976.</u>
5	Donate	ed services and use of facilities			5				
6	Invest	ment expenses			6				
7	Prior p	period adjustments			7				
8	Other	(Describe in Part XIV.)		Ļ	8				
9	Total a	adjustments (net) Add lines 4 through 8			9			103,	<u>976.</u>
10_		s or (deficit) for the year per audited financial statements. Combine lines 3 and			10			372,	<u>370.</u>
Par		Reconciliation of Revenue per Audited Financial Statemer	nts W	ith Reven	ue per	Retu	urn		
1		evenue, gains, and other support per audited financial statements				1	1	21,361,	<u>932.</u>
2		nts included on line 1 but not on Form 990, Part VIII, line 12	1			_	ŀ		
а		nrealized gains on investments	2a	10:	3,976	•	- [		
b		ed services and use of facilities	2b						
С		eries of prior year grants	2c			_			
d		(Describe in Part XIV)	2d			$\dashv$	1	100	0.7.6
е		nes 2a through 2d				20		103,	976.
3		act line 2e from line 1				3	<u> </u>	21,257,	<u>956.</u>
4		nts included on Form 990, Part VIII, line 12, but not on line 1	1 .	1					
a		ment expenses not included on Form 990, Part VIII, line 7b	4a						
b		(Describe in Part XIV)	4b			$\dashv$ .			0
_C		nes 4a and 4b				40	$\overline{}$	21,257,	0.
5 Pai	H XIII	revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  Reconciliation of Expenses per Audited Financial Stateme	nts \	With Fyne	nses n	er Re			930.
1		expenses and losses per audited financial statements		THE EXPO	1000 р		1	20,989,	562
2		nts included on line 1 but not on Form 990, Part IX, line 25				<u>                                   </u>	-	20,505,	<u> </u>
- a		ed services and use of facilities	2a	1		-			
b		vear adjustments	2b				- 1		
c	•	losses	2c			_	1		
d		(Describe in Part XIV)	2d			7	ı		
e		nes 2a through 2d		·		20	e		0.
3		act line 2e from line 1				3		20,989,	
4	Amou	nts included on Form 990, Part IX, line 25, but not on line 1							
а	Invest	ment expenses not included on Form 990, Part VIII, line 7b	4a						
b	Other	(Describe in Part XIV)	4b						
С	Add I	nes <b>4a</b> and <b>4b</b>		·		4	С		0.
		expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)					5	20,989,	562.
Pa	rt XIV	Supplemental Information							
Com	plete th	nis part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III	, lines	1a and 4, Par	t IV, line	s 1b ar	nd :	2b, Part V, line 4	, Part
X, lın	e 2, Pa	rt XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also compl	ete th	s part to prov	ıde any	additic	onal	Information	
			_		<del></del>				
					······································				
								<del></del>	

### **SCHEDULE F** (Form 990)

### **Statement of Activities Outside the United States**

► Complete if the organization answered "Yes" to Form 990. Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization					Employer identif	cation number
NATIONAL JOINT COMMITTEE FOR T					53-021293	0
			Iside the United States. Compl	ete if the organ		
to Form 990, Part			iona and omica cratosi compi	ctc ii tiic oigai	nzation answered	103
		maintain record	ds to substantiate the amount of the g	rants or assista	ance, the	
grantees' eligibility for th	e grants or assis	stance, and the	selection criteria used to award the gra	ants or assistar	nce?	Yes No
2 For grantmakers. Desc	ribe in Part V the	e organization's i	procedures for monitoring the use of g	rant funds outs	side the United Stat	es
3 Activities per Region (Tr	ne following Part	Lline 3 table ca	an be duplicated if additional space is i	needed \		
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If acti is a pro describe	vity listed in (d) gram service, e specific type ce(s) in region	(f) Total expenditures for and investments in region
	_			CANADA: TRA		ļ
NORTH AMERICA	0	0	TRAINING MATERIALS	MATERIALS S	SALES \$69,318	0.
CENTRAL AMERICA AND				BERMUDA: TF	RAINING	
THE CARIBBEAN	0	0	TRAINING MATERIALS	MATERIALS S	SALES \$36,423	0.
	į					†
	:					
<ul><li>3 a Sub-total</li><li>b Total from continuation</li></ul>	c	0				0.
sheets to Part I		0				0.
c Totals (add lines 3a						<u>`</u>
and 3h)	1	۸ ا	1			

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Schedule F (Form 990) 2010

COMMITTEE FOR THE ELECTRICAL INDUSTRY

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any 53-0212938 Schedule F (Form 990) 2010

Part II

recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed

×	
<b>A</b>	

Page 2

(i) Method of valuation (book, FMV, appraisal, other)					
(h) Description of non-cash assistance					
(g) Amount of non-cash assistance					empt by
(f) Manner of cash disbursement					ecognized as tax-e>
(e) Amount of cash grant					foreign country, r
(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
(c) Region					s listed above that are re has provided a section
(b) IRS code section and EIN (if applicable)					recipient organization organizes or counsel
1 (a) Name of organization					2 Enter total number of r the IRS, or for which the

27

Schedule F (Form 990) 2010

Enter total number of other organizations or entities

COMMITTEE FOR THE ELECTRICAL INDUSTRY

53-0212938

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16 Schedule F (Form 990) 2010

Part III can be duplicated if additional space is needed

	ı ı	•	ı			1	1
(h) Method of valuation (book, FMV, appraisal, other)							
(g) Description of non-cash assistance							
(f) Amount of non-cash assistance							
(e) Manner of cash disbursement							
(d) Amount of cash grant							
(c) Number of recipients							
(b) Region							
(a) Type of grant or assistance (b) Region							

Schedule F (Form 990) 2010

Schedule F (Form 990) 2010 COMMITTEE FOR THE ELECTRICAL INDUSTRY <u>53-0212938</u> Page 4 Part IV | Foreign Forms Was the organization a U.S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Yes X No Corporation (see Instructions for Form 926) Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With Yes X No a U.S. Owner (see Instructions for Forms 3520 and 3520-A) . . . Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," 3 the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Yes X No. Certain Foreign Corporations. (see Instructions for Form 5471) Was the organization a direct or indirect shareholder of a passive foreign investment company or a 4 qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Yes X No Instructions for Form 8621)

Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"

Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions

the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain

Foreign Partnerships. (see Instructions for Form 8865)

Schedule F (Form 990) 2010

Yes X No

Yes X No

5

for Form 5713)

Employer identification number 53-0212938 Open to Public OMB No 1545-0047 Inspection (h) Purpose of grant or assistance Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed ame and address of organization (b) EIN (c) IRC section or government assistance or government as governm 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ▶ Attach to Form 990. NATIONAL JOINT APPRENTICESHIP & TRAINING COMMITTEE FOR THE ELECTRICAL INDUSTRY General Information on Grants and Assistance criteria used to award the grants or assistance? 1 (a) Name and address of organization Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE I (Form 990) Part 1 Part

% ⊠

2 Enter total number of section 501(c)(3) and government organizations	<b>A</b>
3 Enter total number of other organizations	•
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule I (Form 990) (2010

Page 2

53-0212938

Schedule | (Form 990) (2010) COMMITTEE FOR THE ELECTRICAL INDUSTRY

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
			c		
UL SCHOLARSHIP AWARD	02	,000,02			
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	de the informatio	in required in Part I,	line 2, and any other	additional information.	
SCHEDULE I, PART I, LINE 2: NOMINEES		MUST ALSO DISPLAY	AY A POSITIVE	IVE ATTITUDE	
TOWARDS THE IBEW/NECA, BE IN THE T	TOP 20% O	OF THEIR CL	CLASS, AND S	SHOULD HAVE	
THE POTENTIAL TO BE A FUTURE INDUSTRY	TRY LEADER	(I.E.,	APPRENTICE	INSTRUCTOR	
OR TRAINING DIRECTOR). IT IS ALSO	PREFERRED	р тнат тнв	THAT THE APPRENTICE HAVE	E HAVE 1008	
ATTENDANCE IN BOTH THE CLASSROOM A	AND ON THE	E JOB.			
THE SCHOLARSHIP RECIPIENTS ARE CHO	CHOSEN BY A	- 1	SELECTION COMMITTEE MADE	MADE UP OF	
NJATC AND UL REPRESENTATIVES; WINNERS	ARE	ANNOUNCED	AT THE NATIONAL	IONAL	
TRAINING INSTITUTE (NTI) IN AUGUST.	SINCE	THE SCHOLA	SCHOLARSHIP COVERS	RS BOOKS FOR	
THE REMAINDER OF THE STUDENT'S APPRENTICESHIP,	RENTICES		PREVIOUS WINNERS ARE NOT	S ARE NOT	(Groot) (GOO)
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•		NA	TIONAL	JOINT	APP	RENTI	CESHI	P & TF	RAINII	1G		
Schedule J (Form	990) 20	ental Information	MMITTEE	FOR	THE	ELECT	RICAL	INDUS	TRY	53-02	<u> 12938</u>	Page 2
Part IV   Su	ppiem	entai informatio	n									
	F\P	NOMINATION	ACATN									
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Schedule I (Form 990) 2010

# SCHEDULE J (Form 990)

### **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.

Part IV, line 23.

➤ Attach to Form 990. ➤ See separate instructions.

2010

pen to Public Inspection

Name of the organization

Department of the Treasury

NATIONAL JOINT APPRENTICESHIP & TRAINING COMMITTEE FOR THE ELECTRICAL INDUSTRY

Employer identification number 53 - 0212938

Schedule J (Form 990) 2010

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	_2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply			
	Compensation committee Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization		ŀ	
а	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	<u> </u>	X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
Ŭ	contingent on the revenues of.			
а	The organization?	5a		х
	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		ì	
	contingent on the net earnings of			
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	1		
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	<u> </u>	X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		<u></u>

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

COMMITTEE FOR THE ELECTRICAL INDUSTRY 53-0212938

Schedule J (Form 990) 2010

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

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 VII.

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 V	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(0)	(D)	(E)	(F)
(A) Name	J.,	(I) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	Total of columns (B)(I)-(D)	Compensation reported in prior Form 990 or Form 990-EZ
	8	197,200.	0	3,825.	41,763.	21,609.	264,397.	0
MICHAEL I. CALLANAN		4	0	0	0	0	0	0
	Ξ	143,468.	0	3,525.	31,191.	17,333.	195,517.	0.
2 RICK HECKLINGER	€	4	0	0.	0	0		0.
	Ξ	142,625.	0	.0.	30,752.	17,324.	190,701.	0.
3 JIM BOYD	Ξ	0	0	0.	: 1	0	- 1	0.
	Ξ	134,956.	0	.0	29,296.	8,278.	172,530.	0
4 PALMER HICKMAN	Ξ	0	0	0.	- 1			0
	Ξ	141,395.	0	0.	30,752.	20,768.	192,915.	0.
5 TODD STAFFORD	Ξ	0	0	0				0
	Θ	133,473.	0.	.0	29,104.	17,289.	179,866.	0
6 STEVE ANDERSON	(E)	0	0.	0	0	0	0.	0
	Θ							
7	Ξ							
	Ξ							
8	3							
	Ξ							
6	3					1		
	<u> </u>							
10	(1)							
	Ξ							
11	3							
	Ξ							
12	3							
	Ξ							
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14	Ξ							
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15	⊞							
	Ξ							
16	3							

Schedule J (Form 990) 2010

### **SCHEDULE M** (Form 990)

Department of the Treasury Internal Revenue Service

### **Noncash Contributions**

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Ferm 990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

NATIONAL JOINT APPRENTICESHIP & TRAINING COMMITTEE FOR THE ELECTRICAL INDUSTRY

Employer identification number 53-0212938

Schedule M (Form 990) (2010)

Par	t   Types of Property										
		(a)	(b)	(c)	(d)						
		Check if	Number of	Noncash contribution	Method of de		_				
		applicable	contributions or	amounts reported on Form 990, Part VIII, line 1g	noncash contribu	ution am	iounts	š			
1	Art - Works of art		North Contributor	T Offit Coo; T dit Vin; iii o 1g							
2	Art · Historical treasures										
3	Art - Fractional interests	<del>.                                      </del>			-						
	}										
4	Books and publications  Clothing and household goods										
5	Clothing and household goods										
6	Cars and other vehicles										
7	Boats and planes										
8	Intellectual property										
9	Securities - Publicly traded										
10	Securities - Closely held stock										
11	Securities - Partnership, LLC, or										
	trust interests										
12	Securities - Miscellaneous										
13	Qualified conservation contribution -										
	Historic structures										
14	Qualified conservation contribution - Other										
15	Real estate - Residential	· · -									
16	Real estate - Commercial										
17											
18	Real estate - Other  Collectibles										
						-					
19	Food inventory										
20	Drugs and medical supplies										
21	Taxidermy										
22	Historical artifacts										
23	Scientific specimens			·							
24	Archeological artifacts										
25	Other (SHIRTS)	X	1		CONTRIBUTOR						
26	Other (BAGS)	X	1	39,988.	CONTRIBUTOR	<u>t'S V</u>	/AL	<u>UAT</u>			
27	Other ()										
28	Other ()										
29	Number of Forms 8283 received by the organiz	zation durin	g the tax year for o	contributions							
	for which the organization completed Form 8283, Part IV, Donee Acknowledgement										
				<u> </u>		1	Yes	No			
30a	During the year, did the organization receive by	v contribution	on any property re	ported in Part I, lines 1-28 th	at it must hold for						
	Da During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?  30a										
h	If "Yes," describe the arrangement in Part II					302		<u> X</u>			
31											
s∠a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash										
	contributions?										
	If "Yes," describe in Part II						1				
33	If the organization did not report an amount in	column (c)	or a type of prope	πy for which column (a) is c	necked,						
	describe in Part II				<del>.</del>						
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	Ю.	Schedule M	(Form 9	<del>9</del> 90) (	2010)			

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

### **SCHEDULE O**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

NATIONAL JOINT APPRENTICESHIP & TRAINING COMMITTEE FOR THE ELECTRICAL INDUSTRY

Employer identification number 53-0212938

COMMITTEE FOR THE ELECTRICAL INDUSTRY 53-0212938 FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: HIGHLY SKILLED WORKFORCE POSSIBLE FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS SENT TO THE COMPTROLLER AND COMMENTS. THE EXECUTIVE DIRECTOR IS THE NEXT FOR REVIEW, QUESTIONS, REVIEWER. THE FORM IS THEN PROVIDED TO THE FULL BOARD BEFORE IT IS FILED. FORM 990, PART VI, SECTION B, LINE 12C: EACH DIRECTOR IS REQUIRED TO GET APPROVAL FROM THE EXECUTIVE DIRECTOR BEFORE AGREEING TO PARTICIPATE IN ANY ORGANIZATION THAT MAY CONFLICT WITH NJATC. ANY BREACH OF THIS POLICY IS EVALUATED BY THE BOARD OF TRUSTEES AND APPROPRIATE ACTION IS TAKEN. FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF TRUSTEES APPROVES COMPENSATION FOR THE EXECUTIVE DIRECTOR AFTER PERFORMING AN ANNUAL PERFORMANCE EVALUATION AND ANALYZING COMPENSATION STUDIES PERFORMED BY INDEPENDENT ORGANIZATIONS. THE BOARD OF TRUSTEES APPROVES COMPENSATION FOR OTHER KEY EMPLOYEES AFTER PERFORMING ANNUAL PERFORMANCE EVALUATIONS AND ANALYZING COMPENSATION STUDIES PERFORMED BY INDEPENDENT ORGANIZATIONS. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, OR FINANCIAL STATEMENTS

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
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AVAILABLE TO THE GENERAL PUBLIC.

Schedule O (Form 990 or 990-EZ) (2010)

	of the organization	NATIONA COMMITT	L JO	OINT FOR T	APPREI	NTICES ECTRIC	SHIP 8	TRA	INING RY	En	nployer id	lentification	number
<u>NET</u>	UNREALIZED	GAINS	ON :	INVES	TMENT	S:	·, .·					103	,976.
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### Form **8868**

(Rev. January 2011)

Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

OMB No 1545-1709

• If you	are filing for an Automatic 3-Month Extension, complet	te only Pa	irt I and check this box		<b>&gt;</b>	X				
<ul><li>If you</li></ul>	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of this	form)						
Do not o	complete Part II unless you have already been granted a	an automa	tic 3-month extension on a previously fi	led Fo	rm 8868					
Electron	nic filing (e-file). You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of time t	o file (I	6 months for a corp	oration				
required	to file Form 990-T), or an additional (not automatic) 3-mor	nth extens	sion of time. You can electronically file F	orm 8	868 to request an e	ktension				
of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain										
Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form,										
visit www	v.irs gov/efile and click on e-file for Chanties & Nonprofits				<u></u> .					
Part I	Automatic 3-Month Extension of Time	Only su	bmit onginal (no copies needed)							
A corpoi	ation required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and com	nplete						
Part I on	•				<b>&gt;</b>					
	corporations (including 1120-C filers), partnerships, REM	ICs, and t	rusts must use Form 7004 to request ar	exter	ision of time					
to file income tax returns										
Type or	ASSESSABLE TOTAL ADDRESSMENT CHARLED C MD A TATALO									
print		F2 0212020								
File by the	COMMITTEE FOR THE ELECTRICA	53-0212938								
due date for filing your return See	e for Number, street, and room or suite no. If a P.O. box, see instructions.  ur 3.0.1 PRINCE GEORGE'S BLVD. NO. D									
instructions										
					<u> </u>					
Enter the	e Return code for the return that this application is for (file	e a separa	te application for each return)			0 1				
Applica	tion	Return	Application	Application						
Is For		Code	Is For			Code				
Form 99	0	01	Form 990-T (corporation)		07					
Form 99	0·BL	02	Form 1041-A		08					
Form 99	0-EZ	03	Form 4720		09					
Form 990-PF			Form 5227		10					
Form 990-T (sec. 401(a) or 408(a) trust)			Form 6069			11				
Form 99	0-T (trust other than above)	06	Form 8870							
	MARK J. CERULLA									
	ooks are in the care of  301 PRINCE GEOR	RGE'S	BLVD - UPPER MARLBO	RO,	MD 20774					
	hone No ▶ 301-715-2367		FAX No. ▶		<del></del> -					
	organization does not have an office or place of business				<b>&gt;</b>					
<ul><li>If this</li></ul>	is for a Group Return, enter the organization's four digit	1	<del></del>							
box 🕨	If it is for part of the group, check this box		ich a list with the names and EINs of all		ers the extension is	for				
<b>1</b> Ir	equest an automatic 3-month (6 months for a corporation AUGUST 15, 2011 , to file the exemp		to file Form 990-T) extension of time unt tion return for the organization named a		The extension					
IS	for the organization's return for:									
<b>•</b>	X calendar year 2010 or									
<b>•</b>	tax year beginning	, an	d ending		_ ,					
2 If	the tax year entered in line 1 is for less than 12 months, c	heck reas	on· L Initial return L Fina	al retur	n					
L	Change in accounting period									
	this application is for Form 990-BL, 990 PF, 990-T, 4720, e	or 6069, e	nter the tentative tax, less any			•				
	onrefundable credits. See instructions	3a	\$	0.						
	this application is for Form 990-PF, 990-T, 4720, or 6069,			0						
estimated tax payments made Include any prior year overpayment allowed as a credit  3b					\$	0.				
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,						0.				
by using EFTPS (Electronic Federal Tax Payment System). See instructions.  3c   \$  Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.										
			orm 8868, see Form 8453-EU and Form	88/9						
LHA	For Paperwork Reduction Act Notice, see Instructions	<b>5.</b>			Form <b>8868</b> (Re	ev. 1-2011)				
023841										

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