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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)

OMB No 1545-0047

Open to Public

Depa	rtment of th nal Revenue	e Treasury Service		► Th	ie organizatio	n may have to ι	ise a copy of t	his return to s	atisfy sta	ate reportin	g requiren	nents			În	spection	١ .
$\overline{A}$	For the 2	011 calend	dar v	ear, or tax y	year begin	ning		, 20	11, and	d ending				,			
В	Check if app	licable	CN	lame of organia	zation ILA	CLERKS	& CHEC	KERS LO	CAL	1771		D Em	ploye	er Identif	cation	Number	
	1 3	s change	ا ا	oing Business	As							5	7-6	0265	00		
	Name o	-			_	ox if mail is not	delivered to str	eet addr)		Room/su	ite	E Tel	ephor	ne numbe	er —		
	Initial r		211	3 COUR	TLAND A	AVENUE						l (	843	3) 72	3-1	1774	
	Termin			City, town or co				St	ate ZIP	code + 4							
	1 1	ed return	CHA	ARLESTO	N			S	C 2	9403		G Gro	oss re	ceipts \$	33	38,457	
	H	ition pending		Name and addre	_	al officer					I(a) Is this					Yes	X No
			1	RT STRIPLIN	ig 2113 CO	OURTLAND A	VE CHARL	ESTON	SC 25	9403 4	l(b) Are all					Yes	No
$\overline{}$	Tax-exem				501(c) (		insert no )	4947(a)(1)		527	If 'No,'	attach a	list (	(see ınstr	uction	s) —	_
<u>-</u>	Websit	•			-1 00.(0) (	<del>-</del>	···	1 1 1 1 ( 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1			i(c) Group	exemption	วก กนเ	mber ►			
ĸ		rganization	$\overline{}$	Corporation	Trust	Association	Other ►		L Year	of Formatio					al dor	nicile SC	<u> </u>
Pa		Summar		sorporation _1	71.001	1 100001211011				-		<del></del>			<b>,</b>		
-				e organizat	ion's missi	on or most s	significant a	ctivities.	PROM	OTE S	OLIDA	RITY	' A	ND M	ЕМВ	ER WE	FARE
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Ē																	
Activities-& Governance	2 Ch	eck this bo	x ►	lf the o	organizatio	n discontinu	ed its opera	ations or dis	posed	<b>South 26</b>	154V25	% of it	s ne	t asset	5		
				members of	f the gover	ning body (F	Part VI, line	la)	I					3			143
98-	4 Nu	mber of ind	depei	ndent voting	g members	of the gove	rning body	(Part VI, lir	le lb) lφί	1411	. 4 004		S	4			143
375	5 Tot	al number	ofin	idividuals ei	mployed in	calendar ye	ear 2011 (P	art V, line 2	<b>設</b>	MAY	<b>4</b> 201	12	SO-S	5 6			22
₽ct				olunteers (e		Part VIII, col	umn (C) lir	na 12	ΙL				8	7a		337	,952.
5						from Form 9			<b>i</b> ,	OGD	FN I	JT	_	7b		337	, ,,,,,,
	<b>D</b> 110.	un ciaca	. 505	TIOSS TONOB	10 111001110		30 1,0		<u> </u>			rior Ye	ear		-	urrent Y	ear
	8 Coi	ntributions	and	grants (Par	rt VIII. line	1h)					<u> </u>	1101 11					
e .			service revenue (Part VIII, line 2g) 341,7									.,7	39.		337	,952.	
Revenue		_		•		A), lines 3, 4	, and 7d)							06.			505.
æ						nes 5, 6d, 8d		ind 11e)									
						(must equal			line 12	2)		342	2,2	45.		338	,457.
	<b>13</b> Gra	ants and si	ımılaı	r amounts p	oaid (Part I	IX, column (	A), lines 1-3	3)									
	<b>14</b> Bea	nefits paid	to or	r for membe	ers (Part I)	K, column (A	), line 4)										
_	<b>15</b> Sat	aries, othe											<u>,918.</u>				
Expenses	<b>16a</b> Pro	fessional f	fundr	aising fees	(Part IX, o	column (A),	line 11e)										
pen	<b>b</b> Tot	al fundrais	sına e	expenses (F	Part IX. col	umn (D), lın	e 25) ►					7 45 J			**		
EX			-			nes 11a-11d						113,235			122,001		. 001 -
						equal Part IX		A), line 25)						27.			,919.
						8 from line		,, 20,						82.			,462.
h 8	70 110										Beginnii	_				End of Ye	
arc of	<b>20</b> Tot	al assets (	(Part	X, line 16)								593					,311.
A B			-	art X, line 2	6)							193	3,0	54.			,469.
Net Assets or Fund Balancos	<b>22</b> Net	t assets or	r fund	l balances	Subtract li	ne 21 from I	ıne 20					400	),3	04.		374	,842.
Pa		Signatur									•			•			·
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com	olete Declar	ation of prepa	arer (o	the than office	r) is based or	turn, including a all information	of which prepa	rer has any kn	owledge	_				,			
		<b></b>	M	this s	Lis							MA	4	<u>4.                                     </u>	Zo 1	2	
Sig	ın	Signatu	ure of c	officer	1/						Da	ate					
He	re	ROBI	ERT	STRIPL	ING												
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		Print/Type p	prepare	er's name		Preparer's su	gnature	1	المالك	ate		Check	Х	J "	TIN		
Pa	id	LISA I	L. 1	MCDONAL	D	1760	K.Ma	W NOW	<u> 0</u>	5/07/3	12	self-em	ploye	d E	014	133 <u>528</u>	
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		<u> </u>		SUMMER	RVILLE			SC 29	483-	5304		Phone	no				
May	the IRS	discuss th	ıs rel	turn with the	e preparer	shown abov	e? (see ins	tructions)							Х	Yes	No

orm <b>990</b> (20			57-6	026500 Page <b>2</b>
	Statement of Program Service	•		
	Check if Schedule O contains a respon	se to any question in this Part III		
	describe the organization's mission.			
TOME				- <b></b>
2 Did the	organization undertake any significant	program services during the year w	which were not listed on the prior	
	90 or 990-EZ?			Yes X No
If 'Yes,'	describe these new services on Scheo	lule O		
3 Did the	organization cease conducting, or mak	ce significant changes in how it conc	ducts, any program services?	Yes X No
	describe these changes on Schedule (			
4 Describe Section	e the organization's program service a 501(c)(3) and 501(c)(4) organizations	ccomplishments for each of its three and section 4947(a)(1) trusts are re	e largest program services, as me equired to report the amount of gi	easured by expenses rants and allocations to
others,	the total expenses, and revenue, if any	/, for each program service reported	<u> </u>	
4a (Code.	) (Expenses \$	including grants of \$_	) (Revenue	\$)
	N_SUPPORT			
		<b></b>		
		. <b>_</b>		
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<b>4b</b> (Code	) (Expenses \$	including grants of \$_	) (Revenue	\$)
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<b>4c</b> (Code:	) (Expenses \$	including grants of \$_	) (Revenue	\$)
		<b>-</b>		
		. <b></b>		<b>-</b>
		. <b></b>		
				- <b></b>
4d Other p	rogram services (Describe in Schedul	e O )		
(Expens		uding grants of \$	) (Revenue \$	)
	rogram service expenses	TEFA0100 07/05/11	<del></del>	Form <b>990</b> (2011)
BAA		TEEA0102 07/05/11		1 0000 <b>330</b> (2011)

			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		х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	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
4	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		
5	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	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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_		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8_		х
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		х
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	S. Contract	X
1	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			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	х	
	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	11 b		х
	c 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	11 c		х
•	d 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	11 d		х
•	e Did the organization report an amount for other liabilities in Part X, line 25° If 'Yes,' complete Schedule D, Part X	11 e	Х	
f	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	11 f		х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	_ x_	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	х	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	X
ı	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
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, Parts II and IV	15		х
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 (see instructions)	17	_	х
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	_	х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19	_	X
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
	h If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b	1	1

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		х
ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	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		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
ŧ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		X
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).			
ā	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		_X_
ŧ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
•	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
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	contributions? If 'Yes,' complete Schedule M	30		X
	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
1	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	35b		_ X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	х	
AA		Form	990 (	(2011)

	Check if Schedule O contains a response to any question in this Part V				Г
	Shock if Ocheane O contains a response to any queenent in the rest			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a  5			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors	and reportable gaming		_	
	(gambling) winnings to prize winners?	i i	1 c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	<b>2a</b> 22			
L	If at least one is reported on line 2a, did the organization file all required federal employment		2b	X	
L	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see ins			- 21	
2 -	Did the organization have unrelated business gross income of \$1,000 or more during the year		За		Х
	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		3b		<u> </u>
	At any time during the calendar year, did the organization have an interest in, or a signature	or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other fir If 'Yes,' enter the name of the foreign country	nancial account)?	4a		Х
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Fi	nancial Accounts			L
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax	year <sup>?</sup>	5a		<u> </u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter	r transaction?	5b		X
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, ar solicit any contributions that were not tax deductible?	nd did the organization	6a		х
b	If 'Yes,' did the organization include with every solicitation an express statement that such connot tax deductible?	ntributions or gifts were	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and paservices provided to the payor?	artly for goods and	7a		X
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 <u>b</u>		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for who	ich it was required to file	7.		.,
	Form 8282?	7d	7с		X
	If 'Yes,' indicate the number of Forms 8282 filed during the year	· · ·	7e		х
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal base		<del>/e</del> 7f		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit to the organization of the directly of an algorithms and the organization of the directly of the directly of the organization of the directly of the organization of th			-	_^
	If the organization received a contribution of qualified intellectual property, did the organization as required?	;	7g		
r	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C? $ \frac{1}{2} \left( \frac{1}{2} \right) = \frac{1}{2} \left( \frac{1}{2} \right) \left( \frac{1}{2}$	organization file a	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, had holdings at any time during the year?	ng organizations. Did the ave excess business	8		
9	Sponsoring organizations maintaining donor advised funds.		and the second		
a	Did the organization make any taxable distributions under section 4966?		9a		
Ŀ	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
Ŀ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	• • • •	1 1			
	Gross income from members or shareholders	11 a			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of		12a		
	of f'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.		12-		<del> </del>
ā	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule	; 0			
t	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13ь			
	Enter the amount of reserves on hand	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
	If 'Yes' has it filed a Form 720 to report these payments? If 'No.' provide an explanation in S	chedule O	14b		

Form 990 (2011) ILA CLERKS & CHECKERS LOCAL 1771 57-6026500 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 **Section A. Governing Body and Management** Yes No 1a 143 1 a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 1 b 143 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х Х 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7а Х members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7Ь Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a Х a The governing body? 8Ь **b** Each committee with authority to act on behalf of the governing body? Х Is there any officer, director or 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* 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a 10a Did the organization have local chapters, branches, or affiliates? X b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b operations are consistent with the organization's exempt purposes? 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Х 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise Х to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 12c Х Schedule O how this is done 13 Х 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? Х 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Х X b Other officers of key employees of the organization 15b 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 arrangement with a 16a Х taxable entity during the year? b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ South Carolina 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 X Upon request X Another's website Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the organization

•						
form <b>990</b> (2011)	ILA	CLERKS	æ	CHECKERS	LOCAL	1771

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age 7

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

- 1 a 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

Check this box if neither the organization	nor any r	elated	org	anız	atıo	n com	pen	sated any current office	er, director, or trustee	<u> </u>
(A) Name and title	(B) Average hours per week	·	t che s per and a	Posi ck mo son is direc	ition ore the	an one n an offi ustee)	(E)  Reportable compensation from	(F) Estimated amount of other compensation		
	(describe hours for related organiza- tions in Schedule O)	adivid a tracee or director	anshiritomel trustee	Offirer	Key employee	Higl est coinnarisated employee	Forner	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) WILLIAM STRIPLING ALTERNATE TRUSTEE	4.00	Х						7,651.	0.	0.
(2) NEAL EDGERTON TRUSTEE	4.00	х						9,216.	0.	0.
(3) LANCE MCLAUGHLIN EXECUTIVE BOARD MEMBER	2.00	х						18,996.	0.	0.
(4) JOHN ALVANOS PRESIDENT	20.00			Х				42,979.	0.	0.
(5) RICHARD L HEITERER VICE-PRESIDENT	16.00			Х				1,826.	0.	0.
(6) ROY MCPHERSON SECRETARY	4.00			Х				6,291.	0.	0.
(7) ROBERT STRIPLING TREASURER	10.00			Х				20,442.	0.	0.
(8) DAVID DUNLAP EXECUTIVE BOARD MEMBER	2.00	Х				_		3,826.	0.	0.
(10)										
(11)										
(12)										
<u>(13)</u>										
<u>(14)</u>										

Part VII   Section A. Officers, Directors, Trust	ees, r	ley	EIII		) (2)	ts,	anc	nighest com	pensateu Em	loyees (cont)
(A) Name and title	(B) Average hours per	offic	not ch unles er an	Pos heck	ition more rson irecto	s both or/trus	h an tee)	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation
	week (describe hours for related organi- zations in Sch O)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(15)										
(16)										
(17)	-			-						
(18)										
(19)	-									
(20)										
(21)	-									
(22)									-	
(23)										
(24)	-									
(25)										
1 b Sub-total							<b>•</b>	111,227.	0	. 0.
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)	4						<b>&gt;</b>	111,227.	0	. 0.
Total number of individuals (including but not limited from the organization	to tho	se lis	sted	abo	ve) v	who	rece			
3 Did the organization list any former officer, director	or trust	ee. k	ev e	emp	love	e. or	hia	hest compensated	emplovee	Yes No
on line 1a <sup>3</sup> If 'Yes,' complete Schedule J for such in  4 For any individual listed on line 1a, is the sum of ref	<i>dividua</i> oortable	ıl e con	noen	satı	on a	and o	othei	r compensation fro		3 X
the organization and related organizations greater the such individual										4 X
<ul> <li>5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' consistency of the services rendered to the organization?</li> <li>Section B. Independent Contractors</li> </ul>	ompens omplete	satioi e Sci	n troi hedu	m a le J	ny u for	nreia such	ated <i>per</i>	organization or ir	dividual	5 X
Complete this table for your five highest compensate compensation from the organization. Report comper	ed inde	pend	lent o	cont	ract	ors t	hat	received more tha	n \$100,000 of	tov voor
(A)  Name and business addres		101 (	ile Ca	alcii	luai	year	CIRC	Description		(C) Compensation
	-									
										· · · · ·
						_				
2 Total number of independent contractors (including l	but not	lımıt	ed to	the	ose I	listed	d ab	ove) who received	more than	, , ,
\$100,000 in compensation from the organization										

rai	A VIII Statement of Nevenue	(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	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions)  f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lns 1a-1f h Total. Add lines 1a-1f				
PROGRAM SERVICE REVENUE	Business Code  2a MEMBERSHIP DUES AND AS 900099  b	337,868.	0.	337,868.	0.
ROGRAM :	f All other program service revenue g Total. Add lines 2a-2f	84. 337,952.	0.	84.	0.
<b>a.</b>	3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties  (i) Real (ii) Personal	505.	0.	0.	505.
	b Less rental expenses c Rental income or (loss) d Net rental income or (loss)  7a Gross amount from sales of (i) Securities (ii) Other				
	assets other than inventory  b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)	— · · · · · · · · · · · · · · · · · · ·			
OTHER REVENUE	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18  b Less direct expenses  b			- <u></u>	
	c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19  b Less direct expenses  b				
	c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances  b Less cost of goods sold  b				
	c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11a  b  c				
	d All other revenue e Total. Add lines 11a-11d  12 Total revenue. See instructions	338,457.	0.	337,952.	505.

Page 10

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	Check if Schedule O contains a response to any question in this Part IX									
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses					
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21		_							
2	Grants and other assistance to individuals in the United States. See Part IV, line 22									
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16									
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	111,227.								
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	112,717.								
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)									
9	Other employee benefits									
10	Payroll taxes	17,974.								
11	Fees for services (non-employees)									
а	Management									
b	Legal	3,608.								
c	: Accounting	13,847.								
c	l Lobbying									
e	Professional fundraising services See Part IV, line 17									
f	Investment management fees									
ç	Other									
12	Advertising and promotion									
13	Office expenses	7,500.								
14	Information technology	757.								
15	Royalties									
16	Occupancy									
17	Travel				_					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials									
	Conferences, conventions, and meetings									
20	Interest	12,855.								
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	13,923.								
23	Insurance	10,301.								
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				,					
а	TELEPHONE	9,400.								
	DUES AND ASSESSMENTS	6,158.	·-···········							
	REPAIRS & MAINTENANCE	1,711.								
	UTILITIES	4,113.								
	All other expenses	37,828.		·						
	Total functional expenses. Add lines 1 through 24e	363,919.								
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation									
	Check here ► if following SOP 98-2 (ASC 958-720)									

Pa	rt X	Balance Sheet		(A)		(B) End of year				
				Beginning of year		End of year				
	1	Cash - non-interest-bearing		27,640.	1	12,927.				
	2	Savings and temporary cash investments		59,786.	2	60,290.				
	3	Pledges and grants receivable, net			3					
	4	Accounts receivable, net			4					
	5	Receivables from current and former officers, director and highest compensated employees Complete Part	s, trustees, key employees, Il of Schedule L		5					
	6	persons described in section 4958(c)(3)(B), and contr	from other disqualified persons (as defined under section 4958(f)(1)), cribed in section 4958(c)(3)(B), and contributing employers and organizations of section 501(c)(9) voluntary employees' beneficiary is (see instructions)							
Ą	7	Notes and loans receivable, net			7					
A S E T S	8	Inventories for sale or use			8					
Ţ	9	Prepaid expenses and deferred charges			9					
	-	Land buildings and equipment cost or other basis	10a 582,526.							
		Complete Part VI of Schedule D	10b 90,365.	504,599.	10 c	492,161.				
		Less accumulated depreciation	10b) 90,363.	304,399.	11	432,101.				
		Investments — publicly traded securities  Investments — other securities See Part IV, line 11		<del></del>	12					
	12	Investments — other securities See Part IV, line 11  Investments — program-related See Part IV, line 11			13					
	13				14					
	14	Intangible assets		1,333.	15	933.				
	15	Other assets See Part IV, line 11	24)	593,358.	16	566,311.				
	16 17	Total assets. Add lines 1 through 15 (must equal line Accounts payable and accrued expenses	34)	393,336.	17	300,311.				
	18	Grants payable			18	_				
	19	Deferred revenue			19					
١, ١	20	Tax-exempt bond liabilities			20					
Ļ	21	•	or custodial account liability. Complete Part IV of Schedule D							
B	22	Payables to current and former officers, directors, true highest compensated employees, and disqualified per	stees, kev emplovees.	* * *		V, v				
L T		of Schedule L	sons complete rait ii		22					
i E S	23	Secured mortgages and notes payable to unrelated th	ird parties	191,513.	23	185,941.				
ξ	24	Unsecured notes and loans payable to unrelated third	parties		24					
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24) Com	es to related third parties, plete Part X of Schedule D	1,541.	25	5,528.				
	26	Total liabilities. Add lines 17 through 25		193,054.	26	191,469.				
Ň		Organizations that follow SFAS 117, check here ▶	X and complete lines	*						
E		27 through 29 and lines 33 and 34.		<u> </u>						
Ą	27	Unrestricted net assets		400,304.	27	374,842.				
A SOUTH S	28	Temporarily restricted net assets			28					
	29	Permanently restricted net assets			29					
R		Organizations that do not follow SFAS 117, check he	ere ► 🔲 and complete	•	,					
		lines 30 through 34.								
FUND	30	Capital stock or trust principal, or current funds			30					
- 1	31	Paid-in or capital surplus, or land, building, or equipn	nent fund		31					
BALAZCES	32	Retained earnings, endowment, accumulated income			32					
Ñ	33	Total net assets or fund balances		400,304.	33	374,842.				
Š	34	Total liabilities and net assets/fund balances		593,358.	34	566,311.				

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566, 311. Form **990** (2011)

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Pai	t XI Reconciliation of Net Assets	•						
	Check if Schedule O contains a response to any question in this Part XI	<u>_</u>		Ш				
	1 1							
1	Total revenue (must equal Part VIII, column (A), line 12)		338,4					
2	Total expenses (must equal Part IX, column (A), line 25)		363, <u>9</u>					
3	Revenue less expenses Subtract line 2 from line 1		-25,4 100,3					
4								
5								
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))  6		374,8	342.				
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response to any question in this Part XII		_	Щ				
			Yes	No				
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		Ì					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O							
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х				
1	b Were the organization's financial statements audited by an independent accountant?	2 b	X	<u> </u>				
•	c 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?	20	x					
	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 separate basis, consolidated basis, or both.	*	*.					
	X Separate basis Consolidated basis Both consolidated and separate basis		<u></u>					
3	a 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?	3 a		x				
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required aud or audits, explain why in Schedule O and describe any steps taken to undergo such audits	ıt 3b						
BAA		Forr	n <b>990</b> (	(2011)				

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#### 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

2011

- Open to Public and Inspection

Department of the Treasury Internal Revenue Service

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, 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-A

	e organization answered 'Yes,' Section 501(c)(4), (5), or (6) or	to Form 990, Part IV, line 5 (Proxy Tax) or	Form 990-EZ, Part V,	line 35a (Proxy Tax), th	en
	of organization	gamzations. Complete Factor	<del></del>	Employer identifica	ition number
	A CLERKS & CHECKERS	LOCAL 1771		57-602650	0
Par	TI-AT Complete if the or	ganization is exempt under section	on 501(c) or is a s	section 527 organiz	zation.
1		rganization's direct and indirect political ca			
2	Political expenditures			<b>►</b> \$	
	Volunteer hours			•	
		ganization is exempt under section	on 501(c)(3).		
1		se tax incurred by the organization under se		<b>▶</b> \$	
2		se tax incurred by organization managers u		<b>►</b> \$	-
3		section 4955 tax, did it file Form 4720 for t			Yes No
4 a	a Was a correction made?				Yes No
t	If 'Yes,' describe in Part IV				
Par	til C Complete if the or	rganization is exempt under section	on 501(c), excep	t section 501(c)(3).	
1	Enter the amount directly exp	ended by the filing organization for section	527 exempt function	activities ►\$	
2	Enter the amount of the filing function activities	organization's funds contributed to other or	rganizations for section	n 527 exempt ►\$	
3	Total exempt function expendine 17b	litures Add lines 1 and 2 Enter here and o	n Form 1120-POL,	<b>►</b> \$	
4	Did the filing organization file	Form 1120-POL for this year?			Yes No
5	organization made payments	and employer identification number (EIN) of For each organization listed, enter the amons received that were promptly and directly action committee (PAC). If additional space	ount paid from the fili delivered to a separa	ng organization's funds. ate political organization	Also enter the
	(a) Name	( <b>b)</b> Address	(c) EiN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 201				57-6026	
Part II-A Complete if section 501(		s exempt under se	ction 501(c)(3) and	filed Form 5768 (ele	ction under
				ffiliated group member's	name,
	•	are of excess lobbying of			
B Check ► I if the filin	ig organization checked	d box A and 'limited con	trol' provisions apply		
(The term	Limits on Lobbying 'expenditures' means	Expenditures amounts paid or incurre	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	res to influence public	opinion (grass roots lob	bying)		
<b>b</b> Total lobbying expenditu	res to influence a legis	lative body (direct lobby	ing)		<del></del>
c Total lobbying expenditu	res (add lines 1a and	1b)	]-		
d Other exempt purpose e			-		<del></del>
e Total exempt purpose ex	spenditures (add lines	1c and 1d)	-		<del></del>
f Lobbying nontaxable am both columns	ount Enter the amoun	t from the following table	e in		
If the amount on line 1e, colu	umn (a) or (b) is The	lobbying nontaxable a	mount is		
Not over \$500,000	201	% of the amount on line 1e			
Over \$500,000 but not over \$1,	000,000 \$10	00,000 plus 15% of the excess	over \$500,000.		
Over \$1,000,000 but not over \$	1,000,000	75,000 plus 10% of the excess			
Over \$1,500,000 but not over \$	17,000,000 \$22	25,000 plus 5% of the excess of	over \$1,500,000		
Over \$17,000,000		000,000			
<b>g</b> Grassroots nontaxable a			-		
h Subtract line 1g from lin			-		
i Subtract line 1f from line	e 1c If zero or less, en	ter -0-		<u></u>	<del></del>
j If there is an amount oth section 4911 tax for this	ner than zero on either year?	line 1h or line 1i, did the	e organization file Form	1720 reporting	Yes No
(Son	ne organizations that r	Year Averaging Period L nade a section 501(h) el below. See the instruction	ection do not have to co	emplete all of the five 2f.)	
	Lobbyi	ng Expenditures During	4-Year Averaging Perio	d	
Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	(e) Total
2a Lobbying non-taxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))	· }-	*	* "	-	
c Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))		3			
f Grassroots lobbying					

For each 'Yes' response to lines 1a through 1 $\iota$  below, provide in Part IV a detailed description of the lobbying activity.

No

Yes

(b)

**Amount** 

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

		1 1			1
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				
	Volunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	: Media advertisements?				
	Mailings to members, legislators, or the public?	1			
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
•	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total Add lines 1c through 1:				
•	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	of If 'Yes,' enter the amount of any tax incurred under section 4912		***************************************		
	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?	-  -			
	t III-A   Complete if the organization is exempt under section 501(c)(4), section 501(c)	5), or			
Га	section 501(c)(6).	J), UI			
	3001011 001(0)(0).			Yes	No
	Manage that the state of the st		1	163	X
1	Were substantially all (90% or more) dues received nondeductible by members?		2	X	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		3	1	X
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?  † III-B   Complete if the organization is exempt under section 501(c)(4), section 501(c)(	5) or co		<u></u>	
rai	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (i answered 'Yes.'	o) Part I	II-A, lin	e 3, is	;
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
á	Current year	2a			
ı	Carryover from last year	2b			
	: Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political				
	expenditure next year?	4			
	Taxable amount of lobbying and political expenditures (see instructions)	5			
Par	t IV   Supplemental Information				
Also	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A, complete this part for any additional information		  		
BAA	Schedu	e <b>C</b> (Form	990 or 9	90-EZ	2011

TEEA3203 06/14/11

Schedule C (Form 990 or 990-EZ) 2011 ILA CLERKS & CHECKERS LOCAL 1//1	57-6026500	Page 4
Rand Supplemental Information (continued)		
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		<b>-</b> -
	<del></del>	
	·	
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## 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, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public

Inspection

Name of the organization Employer identification number

ILF	A CLERKS & CHECKERS LOCAL 1771	1	57-6026500
Pai	ば  Organizations Maintaining Donoi	Advised Funds or Other Similar Fund	ds or Accounts. Complete if
	the organization answered 'Yes' to	o Form 990, Part IV, line 6.	
		(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 dono funds are the organization's property, subject to	or advisors in writing that the assets held in done of the organization's exclusive legal control?	or advised Yes No
6	purpose conferring impermissible private benef	ne benefit of the donor or donor advisor, or for a	ny other Yes No
	Conservation Easements. Compl		to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by	the organization (check all that apply)	
	Preservation of land for public use (e.g., re		f an historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organizatio last day of the tax year	n held a qualified conservation contribution in th	e form of a conservation easement on the
	last day of the tax year		Held at the End of the Tax Year
2	Total number of conservation easements		2a
	Total acreage restricted by conservation easen	nents	2b
	Number of conservation easements on a certific		2c
	Number of conservation easements included in		
	structure listed in the National Register		2d
3	Number of conservation easements modified, t tax year ▶		d by the organization during the
4	Number of states where property subject to cor		_
5	and enforcement of the conservation easement		Yes No
6	Staff and volunteer hours devoted to monitoring	g, inspecting, and enforcing conservation easem	ents during the year
7	Amount of expenses incurred in monitoring, ins ▶ \$	specting, and enforcing conservation easements	during the year
8	Does each conservation easement reported on 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements of section	Yes No
9	In Part XIV, describe how the organization repo include, if applicable, the text of the footnote to conservation easements	orts conservation easements in its revenue and on the organization's financial statements that des	expense statement, and balance sheet, and cribes the organization's accounting for
Par		ctions of Art, Historical Treasures, or wered 'Yes' to Form 990, Part IV, line	Other Similar Assets. 8.
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finance	held for public exhibition, education, or research	e statement and balance sheet works of h in furtherance of public service, provide,
ł	If the organization elected, as permitted under historical treasures, or other similar assets hel- following amounts relating to these items	SFAS 116 (ASC 958), to report in its revenue st d for public exhibition, education, or research in	atement and balance sheet works of art, furtherance of public service, provide the
	(i) Revenues included in Form 990, Part VIII,	line 1	<b>-</b> \$
	(ii) Assets included in Form 990, Part X		►\$ ►\$
2	If the organization received or held works of ar amounts required to be reported under SFAS 1	t, historical treasures, or other similar assets for 16 (ASC 958) relating to these items:	
á	Revenues included in Form 990, Part VIII, line		<b>&gt;</b> \$
	Assets included in Form 990, Part X		<b>▶</b> \$

		HECKERS LOCAL		57-602			Page 2
Part III   Organizations Mainta	ining Collect	ons of Art, Histo	rical Treasures, or	Other Similar Ass	ets (c	<u>ontınu</u>	ıed)
3 Using the organization's acquisition items (check all that apply).	on, accession, ai	nd other records, chec	ck any of the following th	nat are a significant use	of its c	ollectio	n
a Public exhibition		<b>d</b> Loan o	or exchange programs				
<b>b</b> Scholarly research		e 💹 Other					
c Preservation for future generation							
4 Provide a description of the organ Part XIV					≀n		
5 During the year, did the organizat assets to be sold to raise funds re	tion solicit or rec	eive donations of art,	historical treasures, or of the organization's collection	other similar	Yes	Γ	No
Part IV Escrow and Custodia							
line 9, or reported an	amount on Fo	orm 990, Part X,	line 21.			.,	,
1 a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian, o	r other intermediary f	or contributions or other	assets not	Yes		No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV and	complete the following	a table			_	
on roo, onpiani in an analysini		,		<u> </u>	Amoun	t	
c Beginning balance				1c			
<b>d</b> Additions during the year				1 d			
e Distributions during the year				1 e			
f Ending balance				_1f			
2a Did the organization include an a	mount on Form 9	90, Part X, line 21?			Yes		No
b If 'Yes,' explain the arrangement							
Part V Endowment Funds. Co	omplete if the	organization ans	swered 'Yes' to For	m 990, Part IV, line	<u>: 10.</u>		
	(a) Current yea	r (b) Prior year	(c) Two years back	(d) Three years back	(e)	Four year	s back
1 a Beginning of year balance							
<b>b</b> Contributions							
c Net investment earnings, gains, and losses							* 4
d Grants or scholarships						, ,	3.
<ul> <li>Other expenditures for facilities and programs</li> </ul>					- ,	۸	<b>%</b> /*
f Administrative expenses							* *
<b>g</b> End of year balance						. ~ .	7 0
2 Provide the estimated percentage		ear end balance (line	1g, column (a)) held as	;			
a Board designated or quasi-endow							
<b>b</b> Permanent endowment		•					
c Temporarily restricted endowmer		*					
The percentages in lines 2a, 2b,	and 2c should ed	juai 100%					
3a Are there endowment funds not in	n the possession	of the organization th	nat are held and adminis	stered for the	Ī	Yes	No
organization by					3a(i)	162	140
(i) unrelated organizations					3a(ii)		
(ii) related organizations  b If 'Yes' to 3a(ii), are the related or	raanizatione liete	ad as required on Sch	edule R2		3b	-	
4 Describe in Part XIV the intended	•				<u> </u>		<u></u>
Part VI Land, Buildings, and							
Description of property		Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d)	Book va	lue
1a Land		22,083.				22.	,083.
<b>b</b> Buildings		519,556.		52,786.			,770.
c Leasehold improvements							
<b>d</b> Equipment		34,099.		31,797.		2,	,302.
e Other		6,788.		5,782.			,006.
Total. Add lines 1a through 1e (Column	nn (d) must equa	Form 990, Part X, co	olumn (B), line 10(c))	<b>•</b>		492	,161.
BAA				Sched	lule <b>D</b> (f	orm 99	90) 2011

Schedule **D** (Form 990) 2011

(a) Description of security or category

(including name of security)

(1) Financial derivatives (2) Closely-held equity interests

Total. (Column (b) must equal Form 990 Part X, column (B) line 12.) Part VIII Investments - Program Related. See Form 990, Part X, line 13. (a) Description of investment type (b) Book value (1) (2) (3) (4)(5) (6) (7) (8) (9) (10)Total (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets. See Form 990, Part X, line 15. (a) Description (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)Total. (Column (b) must equal Form 990, Part X, column (B), line 15) Other Liabilities. See Form 990, Part X, line 25. Part X (a) Description of liability (b) Book value (1) Federal income taxes (2) DUES 383. (3) PAYROLL LIABILITIES 5,145 (4) (5)(6)

2 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 FIN 48 (ASC 740)

Total (Column (b) must equal Form 990, Part X, column (B) line 25)

(7)(8) (9) (10)(11)

5,528.

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	dule D (Form 990) 2011 ILA CLERKS & CHECKERS LOCAL 1771	57-6026500	Page 4
Par	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements	<del></del> -	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		338,457.
2	Total expenses (Form 990, Part IX, column (A), line 25)		363,919.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	_	-25,462.
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities	<u> </u>	
6	Investment expenses		
7	Prior period adjustments .		
8	Other (Describe in Part XIV)		<del></del>
9	Total adjustments (net) Add lines 4 through 8		
	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	<u> </u>	-25,462.
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Keturn	<del></del>
1	Total revenue, gains, and other support per audited financial statements	1 34.432	<del> </del>
	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
	Net unrealized gains on investments 2a		
	Donated services and use of facilities 2b		
	Recoveries of prior year grants		
	Other (Describe in Part XIV )	<u> 588,4</u>	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3 (5)(4)(4)	<del></del>
	Amounts included on Form 990, Part VIII, line 12, 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	4c	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	<del></del>
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Return	<del></del>
1	Total expenses and losses per audited financial statements		
	Amounts included on line 1 but not on Form 990, Part IX, line 25		
	Donated services and use of facilities		
	Prior year adjustments 2b		
_	Other losses 2c		
	d Other (Describe in Part XIV )		
•	e Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	<del></del>
	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		
	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV) 4b		
	Add lines 4a and 4b	4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
	Supplemental Information		
Part	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Par V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also compadditional information	t IV, lines 1b and 2b plete this part to prov	ride
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Schedule **D** (Form 990) 2011

Schedule D (Form 990) 2011 ILA CLERKS & CHECKERS LOCAL 1//I	5/-6026500	Page 5
Ranking Supplemental Information (continued)		
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#### **SCHEDULE O** (Form 990 or 990-EZ)

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

OMB No. 1545 0047

2011

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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.

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

07/14/11