

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**

Return of Organization Exempt From Income Tax

2011

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Don to Ovelli

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Α	For the 2	2011 calend	ar year, or tax year beginning	, 2011, and endin				
В	Check if ap	plicable	С		D	Employ	er Identific	ation Number
	Addre	ss change	INDEPENDENT ELECTRICAL CONTRACTORS			86-0	02675	36
	\vdash		ASSOCIATION OF ARIZONA		E		ne number	
	\vdash	return	1791 W. UNIVERSITY #161		Ī	(603	2) 200	0-8883
	H	!	TEMPE, AZ 85281		<u> </u>	(002	200	3 0003
	Termir	1						000 601
	Amend	ded return	<u></u>			Gross re		282,631.
	Applic	ation pending	F Name and address of principal officer		H(a) Is this a gi	-		₽ ′°° ₽ ′°°
			SAME AS C ABOVE		H(b) Are all affi		ıaea≠ (see ınstru	rctions) Yes Mo
L	Tax-exen	npt status	501(c)(3) X 501(c) (6) → (insert no) 4947(a	a)(1) or 527	,		(,
J	Websit	te:► IE0	CAZ.ORG		H(c) Group exe	mption nu	mber 🟲	
K		organization	X Corporation Trust Association Other►	L Year of Format	tion 1968	M s	ate of lega	al domicile AZ
Pa	art I	Summary						
k			e the organization's mission or most significant activities	TO PROMO	TE AND F	URTHI	R TH	E_EDUCATION
Ф			SSOCIATION'S MEMBERS AND PROMOTE PUR					
ğ			AL CONTRACTORS INDUSTRY.			يين بيديد	20 25	
Шa		367.7						
Activities & Governance	2 Ch	eck this box	if the organization discontinued its operations or	disposed of mor	e than 25%	of its ne	t assets	
Ğ			ing members of the governing body (Part VI, line 1a)			1	3	10
တ			ependent voting members of the governing body (Part VI	, line 1b)		Ī	4	10
ite	5 To	tal number	of individuals employed in calendar year 2011 (Part V, lin	e 2a)			5	1
ŧ	6 To	tal number	of volunteers (estimate if necessary)				6	C
ď	7a Tol	tal unrelated	d business revenue from Part VIII, column (C), line 12			L	7 a	0.
	b Ne	t unrelated	business taxable income from Form 990-T, line 34				7b	0.
					Prio	r Year		Current Year
_	8 Co	ntributions a	and grants (Part VIII, line 1h)			44,80	65.	33,234.
Jue.	9 Pro	ogram servi	ce revenue (Part VIII, line 2g)		1	165,881.		200,171.
Revenue	10 inv	estment inc	ome (Part VIII, column (A), lines 3, 4, and 7d)				9.	8.
ď	11 Oth	ner revenue	(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			26,30)4.	26,066.
	12 Tot	tal revenue	 add lines 8 through 11 (must equal Part VIII, column (A 	A), line 12)	2	37,05	59.	259,479.
	13 Gra	ants and sin	nılar amounts paid (Part IX, column (A), lines 1-3)			3,39	90.	1,585.
	14 Bei	nefits paid t	o or for members (Part IX, column (A), line 4)					···
		-	compensation, employee benefits (Part IX, column (A),	lines 5-10)		85,00	00.	85,561.
8			indraising fees (Part IX, column (A), line 11e)	,		,		00,0021
Expenses								
ά.			ng expenses (Part IX, column (D), line 25)					
ш			s (Part IX, column (A), lines [1a] Id VI (24a)		1	50,50)3.	139,310.
	18 Tot	al expenses	s Add lines 13-17 must equal Part IX, column (A) line 2	5)	2	<u>38,89</u>	3.	226,456.
	19 Rev	venue less e	expenses Subtract 10 18 from/line 12 2012			-1,83	34.	33,023.
៦ខ្ល			÷ war 2 - v S		Beginning of	Current	Year	End of Year
Net Assets Fund Balanc	20 Tot	al assets (F	Part X, line 16)			54,43	19.	75,035.
A B	21 Tot	al liabilities	(Part X, line 26)			17,06	6.	4,639.
S.E.	22 Net	assets or f	und balances Subtract line 21 from line 20			37,37	3.	70,396.
Pa		Signature			<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>	<u> </u>	70,330.
				nd statements, and to	the best of mul	ra avula da a	and halve	
com	plete Declar	ation of prepar	clare that I have examined this return, including accompanying schedules a er (other than officer) is based on all information of which preparer has any	/ knowledge	the best of my	rnowleage	and belief	, it is true, correct, and
Sig	n	Signature	of officer		Date		-	
Hei	re C	-	100		5.4	14.1	7	
1101	•	Type or p	rint name and title		J.,	7,76		
		Print/Type pre		1 Data	1	. 🗖	, PTIN	
		l		Date 5/11/	Chec		"	
Pai		KENNETH	TOTAL TO CO		COI Cheelf-	employed	150	0074185
Pre	parer	Firm's name		LC				
US	Only	Firm's address		· · · · · · · · · · · · · · · · · · ·	Firm	's EIN ►	26-47	769965
		,	PHOENIX, AZ 85021-4917	·	Phor	ne no (602)	433-2727
Mav	the IRS	discuss this	return with the preparer shown above? (see instructions)				ĺχ	Yes No

Form 990 (2011) INDEPENDENT ELECTRICAL CONTRACTORS	86-0	267536		Page 2
Part III Statement of Program Service Accomplishments				_
Check if Schedule O contains a response to any question in this Part III				X
1 Briefly describe the organization's mission TO PROMOTE AND FURTHER THE EDUCATION OF THE ASSOCIATION'S MEMBE SAFETY AND AWARENESS OF THE ELECTRICAL CONTRACTORS INDUSTRY.		PROMOTE		
2 Did the organization undertake any significant program services during the year which were not listed form 990 or 990-EZ?	on the prior	Yes	s 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 s	ervices?	Ye	s X	No
 If 'Yes,' describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program ser Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the a others, the total expenses, and revenue, if any, for each program service reported 	mount of gr	ants and allo	ocations	s to
4a (Code) (Expenses \$ including grants of \$) SEE SCHEDULE 0	(Revenue	\$)
~			- 	
4b (Code) (Expenses \$ including grants of \$)	(Revenue	\$)
~		 	. 	
	·			
~	· ·			
	· - ·			
4c (Code) (Expenses \$ including grants of \$)	(Revenue	\$)
		- ~ - ~		
4d Other program services. (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$	})	
4e Total program service expenses ►				

	•		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	X	
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		X
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		X
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	_	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		X_
10	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		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, 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	
١	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
•	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
•	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		X
ē	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	<u>X</u>	
	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		X
12a	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
	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		<u>X</u>
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
ł	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		X
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		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		<u>X</u>
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		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	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20 a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20	.	X
Ь	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

INDEPENDENT ELECTRICAL CONTRACTORS 86-0267536 Page 4 Form 990 (2011) 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 17 If 'Yes,' complete Schedule I, Parts I and II 21 Χ Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part 22 Χ IX, column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III 23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete 23 Χ Schedule J 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, 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 Χ 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 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? 240 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 disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25 a 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 25b Schedule L, Part I 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 26 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 Χ 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 X 28 a **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Χ 28b Schedule L, Part IV 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 280 Χ X 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 X contributions? If 'Yes,' complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Χ 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Χ 32 Schedule N, Part II 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 Χ 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V. 34 34 Χ line 1 Χ 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35 a **b** 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 Χ 35b 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 36

> X Form 990 (2011)

Χ

37

37

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is

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

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

Page 5 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 1 b 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming Χ 1 c (gambling) winnings to prize winners? 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 1 Χ b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За Χ b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3ь 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? Χ 4 a **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 Χ b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5Ь 5с c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Χ solicit any contributions that were not tax deductible? 6a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6ь 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and 7 a services provided to the payor? b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82823 7с d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7 q as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business 8 holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a 9Ь b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter 10a a 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 10b 11 Section 501(c)(12) organizations. Enter 11a a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources 11b against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? 13 a Note. See the instructions for additional information the organization must report on Schedule O b 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 13b 13c c Enter the amount of reserves on hand X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

14b

Form 990 (2011) INDEPENDENT ELECTRICAL CONTRACTORS 86-0267536 Page 6 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. X Check if Schedule O contains a response to any question in this Part VI Section 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 If there are material differences in voting rights among members 10 1 a of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 10 b Enter the number of voting members included in line 1a, above, who are independent 1 b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Χ officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision Χ of officers, directors or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents X 4 since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Χ X 6 6 Did the organization have members or stockholders? SEE SCHEDULE O 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? SEE SCHEDULE O X 7 a 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 SEE SCH O 7 b Χ Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. a The governing body? 8a 8Ь Χ b Each committee with authority to act on behalf of the governing body? 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a X 10a Did the organization have local chapters, branches, or affiliates? 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 b Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b Χ c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done SEE SCHEDULE O 12 c 13 Χ 13 Did the organization have a written whistleblower policy? 14 Χ 14 Did the organization have a written document retention and destruction policy? 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 SEE SCHEDULE O X 15 a SEE SCHEDULE O 15b Χ \boldsymbol{b} Other officers of key employees of the organization 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 16 a 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 16b organization's exempt status with respect to such arrangements? Section C. Disclosure AZ 17 List the states with which a copy of this Form 990 is required to be filed > 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 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 SEE SCHEDULE O State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► NANCY LEVEY EXECUTIVE DIRECTOR 1791 W. UNIVERSITY # 161

TEMPE AZ 85281 (602) 200-8883

orm 990 (2011)	TNDEPENDENT	ELECTRICAL	CONTRACTORS

86-0267536

2ana **7**

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

- 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	n nor any	related	dorg	ganı	zatio	on con	nper	nsated any current off	icer, director, or truste	ee	
**************************************					C)						
(A) Name and title	(B) Average hours per week	(do no unles	t che s per and a	Pos ck mo son : direc	ation ore the s both ctor/ti	nan one h an offi rustee)	box, icer	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
_	(describe hours for related organiza tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W 2/1099 MISC)	(W 2/1099 MISC)	from the organization and related organizations	
(1) DENNIS CASTEEL DIRECTOR	0	X						0.	0.	0.	
(2) GARY GOLKA	+									<u></u>	
PRESIDENT	1 o	X		Х				0.	0.	0.	
(3) KENT LANG											
DIRECTOR	0	X						0.	0.	0.	
(4) DOUG SKELTON											
DIRECTOR	0	X						0.	0.	0.	
(5) LAURA SPOSI-WHETSTINE											
DIRECTOR	00	X						0.	0.	0.	
(6) DEBRA SWIER	_										
DIRECTOR	00	Х						0.	0.	0.	
7) JOHN FLOYD								_			
VICE PRESIDENT	0			X				0.	0.	0.	
(8) MIKE WALLIS	_ :								_	_	
TREASURER	0			Х			-	0.	0.	<u> </u>	
_(9)_STAN_FERRIN	_										
SECRETARY	0			Х				0.	0.	0.	
(10) NANCY LEVEY	40			7,			l	72 500	0	0	
EXECUTIVE DIREC	40			Χ			\dashv	73,500.	0.	0.	
(11)	1			ĺ			Ì		1		
(12)											
<u>(14)</u>	-										
											

Part VII Section A. Officers, Directors, Trus	tees,	Key	Er Er			ees,	an	d Highest Co	npensated Em	ployees (c	ont)
•				•	C)						
(A) Name and title	(B) Average hours	box offic	Position (do not check more than one box, unless person is both an officer and a director/trustee)			th an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of o	ther	
	per week (describ e hours for related organi zations	or di	Insti	Officer	Key	emp	Former	the organization (W 2/1099 MISC)	related organizations (W 2/1099-MISC)	compensat from the organization	: on
	e hours for	rector	Institutional trustee	Q	/ employee	Highest cor employee	ner			and relate organizatio	
	related organi	truste	al trus		yee	mpensated		}			
	Sch O)	"	tee			sated					
(15)		-			-						
(16)							 				
(17)											
<u>(18)</u>											
<u>(19)</u>											······································
(20)											
(21)											
(22)											
(23)											
(24)											
(25)											
1 b Sub-total	1						-	73,500.	0.		0.
c Total from continuation sheets to Part VII, Section A							•	73,500.	0.		0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited	to thos	e lis	ted	abov	ve) v	who	rece			le compensati	
from the organization 🕒 0									·	· 	
3 Did the organization list any former officer, director of	or truste	e, k	ey e	empl	loye	e, or	· hıgi	hest compensated	employee	Yes 3	No X
 on line 1a³ If 'Yes,' complete Schedule J for such integration and related on line 1a, is the sum of rep the organization and related organizations greater th 	ortable	com	npen	satio	on a	ind c	ther	compensation fro	m	3	
such individual 5 Did any person listed on line 1a receive or accrue co									dıvıdual	4	<u>X</u>
for services rendered to the organization? If 'Yes,' co	omplete	Scl	nedu	ile J	for	such	n pei	rson		5	X
Section B. Independent Contractors 1 Complete this table for your five highest compensate	d indep	end	ent i	cont	ract	ors t	hat	received more tha	n \$100,000 of		
compensation from the organization Report compen (A)	sation 1	for tr	ne ca	alen	<u>dar</u>	year	end	ling with or within (B)	the organization's	tax year (C)	
Name and business address	S							Description o	f services	Compensation	า
							-				
							\dashv				
						.					
2 Total number of independent contractors (including b \$100,000 in compensation from the organization >		ımıte	ea to	tho	se l	sted	abo	ove) who received	more than		

Pa	rt VIII Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) 1 d e Government grants (contributions) 1 d f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lns la-lf: \$ 14,080.	33,234.			
PROGRAM SERVICE REVENUE	h Total. Add lines 1a-1f Business Code 2a MEMBERSHIP DUES & ASSESSMENTS b APPRENTICE PROGRAM c TRADE SHOW d PEP EDUCATION PROGRAM e SEMINARS f All other program service revenue g Total. Add lines 2a-2f	107,872. 76,514. 5,700. 4,000. 3,461. 2,624. 200,171.	107,872. 76,514. 5,700. 4,000. 3,461. 2,624.		
<u>a.</u>	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 6 Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less, cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)	8.			8.
OTHER REVENUE	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a 49,218. b Less direct expenses b 23,152. c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a b Less. direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b Less. cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code	26,066.			26,066.
	b c d All other revenue e Total. Add lines 11a-11d	259,479.	200,171.	0.	26,074.

Page 10

Part IX | Statement of Functional Expenses

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

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

	Check if Schedule O contains a re	sponse to arry question in			
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	1,585.			
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	73,500.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	ļ		ļ	
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits.	5,502.			
10	Payroll taxes	6,559.			
	Fees for services (non-employees)				
	, , , , , , , , , , , , , , , , , , , ,				
	Management	2,600.			· · · · · · · · · · · · · · · · · · ·
ŀ	Legal				
c	: Accounting	6,200.			
C	l Lobbying		1		
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
c	Other				
12	Advertising and promotion	2,320.			
13	Office expenses	3,873.			
14	Information technology				
					· · · · · · · · · · · · · · · · · · ·
15	Royalties	24,068.	······		· · · · · · · · · · · · · · · · · · ·
16	Occupancy				
17	Travel	6,713.			· ············· -
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	320.			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	9,515.		ł	
23	Insurance	2,317.			
	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)	ì			
а	APPRENTICESHIP EDUCATION COSTS	47,828.			
	PROGRAM MATERIALS	17,968.			
	PROGRAM EXPENSES	12,301.			-
		1,771.		-	
	BANK CHARGES	1,516.			
	All other expenses				
25	Total functional expenses Add lines 1 through 24e.	226,456.			
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)				

37,373

54,439.

33

34

70,396.

75,035.

Form 990 (2011)

Page 11 Part X Balance Sheet (A) Beginning of year End of year 8,012 1 23,036. Cash - non-interest-bearing 2 14,941. 14,934 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 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 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10 a 79,834. 42.776. 31.493 37,058. 10 b 10 c b Less. accumulated depreciation Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 54,439 75,035. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue. 19 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 17,066 25 4,639. 17,066 4,639. 26 Total liabilities. Add lines 17 through 25 X and complete lines Organizations that follow SFAS 117, check here 27 through 29 and lines 33 and 34. 37,373. 70,396. 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 Permanently restricted net assets o R Organizations that do not follow SFAS 117, check here and complete FUND lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32

33

BAA

Total net assets or fund balances

Total liabilities and net assets/fund balances

Form 990 (2011) INDEPENDENT ELECTRICAL CONTRACTORS	86-0267530	5	Page 12
Part XI Reconciliation of Net Assets			
Check if Schedule O contains a response to any question in this Part XI			
1 Total revenue (must equal Part VIII, column (A), line 12)	1		<u>259,479.</u>
2 Total expenses (must equal Part IX, column (A), line 25)	2		26,456.
3 Revenue less expenses Subtract line 2 from line 1	3		<u>33,023.</u>
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		37,373.
5 Other changes in net assets or fund balances (explain in Schedule O)	5		0.
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		70,396.
Part XII Financial Statements and Reporting			_
Check if Schedule O contains a response to any question in this Part XII	<u> </u>		
1 Accounting method used to prepare the Form 990. X Cash Accrual Other			Yes No
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
b Were the organization's financial statements audited by an independent accountant?		2ь	X
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	t of the audit,	2c	
if the organization changed either its oversight process or selection process during the tax year, explain in Schedule \mbox{O}			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were separate basis, consolidated basis, or both	issued on a		
Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single	3a	X
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required audit	3ь	
BAA		Form	990 (2011)

SCHEDULE D (Form 990)

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Employer identification number INDEPENDENT ELECTRICAL CONTRACTORS ASSOCIATION OF ARIZONA 86-0267536 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? No Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other No purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered 'Yes' to Form 990. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a a Total number of conservation easements 2Ь **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year **►**\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes No 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, 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 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

		ECTRICAL CONT		86-026			Page 2
Part III Organizations Mainta	ining Collec	tions of Art, Hist	torical Treasures, o	or Other Similar As	sets (co	<u>ontin</u>	iued)
3 Using the organization's acquisition (check all that apply):	on, accession, a	nd other records, ch	eck any of the following	that are a significant us	e of its co	llectic	n
a Public exhibition		d Loan	or exchange programs				
b Scholarly research		e 💹 Other		. 			
c Preservation for future gener							
4 Provide a description of the organ Part XIV					: IN		
5 During the year, did the organiza assets to be sold to raise funds r	tion solicit or rec ather than to be	eive donations of art maintained as part o	t, historical treasures, oi of the organization's coll	r other similar ection ⁹ .	Yes	Γ	No
Part IV Escrow and Custodia line 9, or reported an	I Arrangeme	nts. Complete if	the organization a	nswered 'Yes' to Fo	orm 990	, Pa	rt IV,
1a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian, d	or other intermediary	for contributions or other	er assets not	Yes		No
b If 'Yes,' explain the arrangement	ın Part XIV and	complete the following	ng table:				
				<u> </u>	Amount		
c Beginning balance				1 c			
d Additions during the year				1 d			
e Distributions during the year				1 e			
f Ending balance				1f			7
2a Did the organization include an a		990, Part X, line 217			Yes	L	No
b If 'Yes,' explain the arrangement Part V Endowment Funds. Co		organization ar	swared 'Yes' to Fo	rm 990 Part IV Ju	10 10		
Fait V Elidownient Funds. Co	(a) Current yea				(e) Fou	ir vears	hack
1a Beginning of year balance	(a) Current yea	(1) (1) (1) (1)	(c) Two Jeans Buch	(d) Thice Jeans Buck	(0)100	i yours	- Buok
b Contributions					<u> </u>	*********	~~~~~

c Net investment earnings, gains, and losses					ļ		
d Grants or scholarships					 		
e Other expenditures for facilities and programs						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	~~~~~~~
f Administrative expenses						بتعبيبين	
g End of year balance					<u> </u>		
2 Provide the estimated percentage	-		e 1g, column (a)) held a	IS			
a Board designated or quasi-endow	vment ►	%					
b Permanent endowment ►	6	0.					
c Temporarily restricted endowmen		% 					
The percentages in lines 2a, 2b,							
3a Are there endowment funds not in organization by	n the possessior	of the organization t	that are held and admın	istered for the		es	No
(i) unrelated organizations					3a(i)		
(ii) related organizations					3a(ii)	\rightarrow	
b if 'Yes' to 3a(II), are the related o	•				3b		
4 Describe in Part XIV the intended							
Part VI Land, Buildings, and			· · · · · · · · · · · · · · · · · · ·	(c) Accumulated	(d) Boo	ok vol	<u></u>
Description of property	(a	Cost or other basis (investment)	(b) Cost or other basis (other)	depreciation	(u) B00	JK V21	u t
1a Land							
b Buildings							
c Leasehold improvements							
d Equipment			47,985.	13,255.			730.
e Other .			31,849.	29,521.			328.
Total. Add lines 1a through 1e. (Column	n (d) must equal	Form 990, Part X, co	olumn (B), line 10(c))				058.
BAA				Sched	lule D (For	m 990	J) 2011

BAA

Schedule D (Form 990) 2011 INDEPENDENT ELECTRICAL CONTRACTO	RS	86-0267536	Page 4
Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Fi		N/A	
1 Total revenue (Form 990, Part VIII, column (A), line 12)			
2 Total expenses (Form 990, Part IX, column (A), line 25)			
3 Excess or (deficit) for the year. Subtract line 2 from line 1			
4 Net unrealized gains (losses) on investments			
5 Donated services and use of facilities			
6 Investment expenses			
7 Prior period adjustments			
8 Other (Describe in Part XIV)			
9 Total adjustments (net). Add lines 4 through 8			
10 Excess or (deficit) for the year per audited financial statements. Combine lines	s 3 and 9		
Part XII Reconciliation of Revenue per Audited Financial Staten		er Return N/A	
1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.			
a Net unrealized gains on investments	2a		
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		
	2d	 	
d Other (Describe in Part XIV)	Zuj		
e Add lines 2a through 2d		3	
3 Subtract line 2e from line 1	1 1	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	4.0		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIV.)	4b	4-	
c Add lines 4a and 4b	,	4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12			_
Part XIII Reconciliation of Expenses per Audited Financial Statemen	nts with Expenses per h		
1 Total expenses and losses per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25.	1 0 1		
a Donated services and use of facilities	2a	<u> </u>	
b Prior year adjustments	2b	— []	
c Other losses	2c		
d Other (Describe in Part XIV.)	2d		
e Add lines 2a through 2d			<u></u>
3 Subtract line 2e from line 1	1 1	3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIV.)	4b		
c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	g)	4c 5	 .
Part XIV Supplemental Information	<u> </u>	1 3 1	
	David Union 10 and 4 David	N/ liman Th and Oh	
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, I Part 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 comole	v, lines ip and 2b, ete this part to provid	e
any additional information			

TEEA3304L 05/25/11

BAA

Schedule **D** (Form 990) 2011

Schedule D (Form 990) 2011 INDEPENDENT ELECTRICAL CONTRACTORS	86-026/536	Page 5
Part XIV Supplemental Information (continued)		
		_

TEEA3305L 05/25/11

Schedule D (Form 990) 2011

BAA

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545 0047

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

Name of the organization INDEPENDENT ELECTRICAL CONTRACTORS Employer identification number 86-0267536 ASSOCIATION OF ARIZONA Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants а Solicitation of government grants Internet and email solicitations f b g X Special fundraising events С Phone solicitations d In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? X No Yes **b** If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (vi) Amount paid to (or retained by) organization (i) Name and address of individual (ii) Activity (iii) Did fundraiser (iv) Gross receipts (v) Amount paid to (or retained by) fundraiser listed in column (i) or entity (fundraiser) have custody or control of contributions? from activity Yes No 1 2 3 4 5 6 7 8 9 10 0. Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

		e G (Form 990 or 990-EZ) 2011 INDEPE				.67536 Page 2
Pa	rt II	Fundraising Events. Complete if the more than \$15,000 of fundraising List events with gross receipts gr	g event contribution	ns and gross incom	m 990, Part IV, line ie on Form 990-Ez	e 18, or reported I, lines 1 and 6b.
R			(a) Event #1 GOLF TOURNAMEN	(b) Event #2	(c) Other events	(d) Total events (add column (a) through column (c))
REVENUE			(event type)	(even type)	(total number)	45, 220
N U E	1	Gross receipts	45,339.			45,339.
	2	Less: Charitable contributions				
	3	Gross income (line 1 minus line 2)	45,339.			45,339.
	4	Cash prizes				
D	5	Noncash prizes	7,590.			7,590.
I R E C T	6	Rent/facility costs	11,824.			11,824.
	7	Food and beverages				
XP	8	Entertainment				
EXPENSES	9	Other direct expenses				
S	10 11	Direct expense summary Add lines 4 thro Net income summary Combine line 3, co	-		•	19,414. 25,925.
Pa		Gaming. Complete if the organization on Form 990-EZ, line 6a	ation answered 'Ye	es' to Form 990, Pa	art IV, line 19, or re	
REVENUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
U E 	_1	Gross revenue				
F		Cash prizes				
D I RENSE	3	Non-cash prizes				
C S T E S	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes%	Yes% No	Yes %	
	7	Direct expense summary Add lines 2 thro	ough 5 in column (d)		•	
	8	Net gaming income summary. Combine lii	nes 1, column (d) and l	ne 7	<u> </u>	
	ı Is tl	er the state(s) in which the organization open the organization licensed to operate gaming No,' explain	activities in each of the	se states?		Yes No
		re any of the organization's gaming licenses	revoked, suspended o	r terminated during the		Yes No
BAA			TEEA3702L 0	1/24/12	Schedule G (Fo	rm 990 or 990-EZ) 2011

Sche	dule G (Form 990 or 990-EZ) 2011 INDEPENDENT ELECTRICAL CONTRACTORS	36-0267536	Page 3
11	Does the organization operate gaming activities with nonmembers?	Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity for administer charitable gaming?	med to Yes	No
13	Indicate the percentage of gaming activity operated in.	1 1	
	The organization's facility	13a	%
b	An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and	l records	
	Name •		
	Address ►	· 	
15 a	Does the organization have a contact with a third party from whom the organization receives gaming revenue	? Yes	No
	of Yes,' enter the amount of gaming revenue received by the organization ► \$ and t		LJ
	of gaming revenue retained by the third party > \$		
С	If 'Yes,' enter name and address of the third party		
	Name ►		
	Address ►		1
16	Gaming manager information.		
	Name •		
	Gaming manager compensation ► \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
	is the organization required under state law to make charitable distributions from the gaming proceeds to reta state gaming license?	Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or s	pent in the	
Dar	organization's own exempt activities during the tax year > \$	ad by Part I line	2h
<u>r ar</u>	Supplemental Information. Complete this part to provide the explanations require columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applithis part to provide any additional information (see instructions).	icable. Also com	plete
			

TEEA3703L 05/20/11

Schedule G (Form 990 or 990-EZ) 2011

BAA

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization INDEPENDENT ELECTRICAL CONTRACTORS Employer identification number ASSOCIATION OF ARIZONA 86-0267536 FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS IECA PROVIDES A COMPREHENSIVE SPECTRUM OF SERVICES. OPPORTUNITIES: OUR MEMBERSHIP DIRECTORY IS FURNISHED ON A REGULAR BASIS TO OWNERS AND BUILDERS UPON REQUEST. THESE PROFESSIONALS ARE WELL AWARE OF THE SAVINGS AND PRODUCTIVITY ASSOCIATED WITH THE USE OF IECA MEMBER CONTRACTORS. LEGAL ASSISTANCE: QUALIFIED LABOR RELATIONS COUNSEL IS RETAINED BY IECA. MEMBERS' "OVER THE PHONE" LEGAL QUESTIONS ARE ANSWERED FREE OF CHARGE. APPRENTICESHIP & TRAINING: OUR PROGRAM PRODUCES HIGH QUALITY ELECTRICIANS WHO ARE ACCREDITED AND PREPARED TO ENTER THE WORK FORCE. THE PROGRAM IS IN ACCORDANCE WITH THE REQUIREMENTS ESTABLISHED BY THE U.S. DEPARTMENT OF LABOR, RECOGNIZED BY THE U.S. DEPARTMENT OF VETERAN AFFAIRS, AND APPROVED FOR COLLEGE CREDITS AT GATEWAY COMMUNITY COLLEGE. THE CURRICULUM IS UPDATED REGULARLY TO ENSURE THE LATEST TECHNOLOGIES. WE ARE SUCCESSFUL IN FILLING THE NEEDS OF MEMBERS THROUGH THESE PROGRAMS. PEP TRAINING IS ALSO AVAILABLE FOR JOURNEYMAN UPDATES. <u>SPECIAL MEMBER_PROGRAMS: MANY_PROGRAMS_ARE_AVAILABLE_INCLUDING_LIABILITY_INSURANCE,</u> WORKERS COMPENSATION INSURANCE, AND HEALTH INSURANCE SEMINARS: SEMINARS AND WORKSHOPS ARE PRESENTED ON SPECIFIC INDUSTRY ISSUES AND REGULATIONS. FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDER THE ORGANIZATION HAS APPROXIMATELY SIXTY MEMBERS COMPRISED OF ARIZONA ELECTRICAL CONTRACTORS.

of the organization INDEPENDENT ELECTRICAL CONTRACTORS ASSOCIATION OF ARIZONA	Employer identification number 86-0267536
FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS E	LECT GOVERNING BODY
MEMBERSHIP VOTES TO ELECT THE GOVERNING BOARD OF DIREC	TORS. EACH MEMBER HAS ONE
VOTE.	
FORM 990, PART VI, LINE 7B - DECISIONS OF GOVERNING BODY APPR	ROVAL BY MEMBERS OR SHAREHOLDER
THE BOARD OF DIRECTORS ARE ELECTED ANNUALLY FROM THE M	EMBERSHIP AT LARGE.
ADDITIONALLY, THE GOVERNING BOARD MAY FROM TIME TO TIME	E REFER A MATTER TO THE
MEMBERSHIP.	
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
THE FORM 990 IS REVIEWED BY THE BOARD OF DIRECTORS BEF	ORE IT IS FILED.
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND E	ENFORCEMENT OF CONFLICTS
EACH MEMBER OF THE BOARD IS RESPONSIBLE TO THE MEMBERS.	HIP FOR SUCH CONFLICTS. THE
ACTIONS OF THE EXECUTIVE DIRECTOR (A PAID EMPLOYEE) AR	E REVIEWED BY THE BOARD IN
CONNECTION WITH THE BUDGETING PROCESS. THE BUDGET IS R	EVIEWED AND APPROVED BY THE
ENTIRE BOARD. THIS ENABLES THE ACTIVITIES OF THE ORGAN	IZATION TO REMAIN TRANSPARENT
AND CAUSES CONFLICTS OF INTEREST TO BE READILY APPAREN	Т.
FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL	PROCESS FOR CEO, EXEC. DIR., OR TO
THE ORGANIZATION HAS ONLY ONE EMPLOYEE. COMPENSATION OF	F THE EXECUTIVE DIRECTOR IS
DETERMINED IN CONNECTION WITH THE BUDGET PROCESS AND IS	S APPROVED BY THE BOARD OF
DIRECTORS.	
FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL	PROCESS FOR OFFICERS & KEY EMPLO
THE ORGANIZATION HAS ONLY ONE EMPLOYEE. COMPENSATION OF	F THE EXECUTIVE DIRECTOR IS
DETERMINED IN CONNECTION WITH THE BUDGET PROCESS AND IS	S APPROVED BY THE BOARD OF
DIRECTORS.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PU	JBLICLY AVAILABLE
GOVERNING DOCUMENTS ARE AVAILABLE TO MEMBERS OF THE ORG	GANIZATION UPON REOUEST.