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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 Inspection

Department of the Treasury Internal Revenue Service (except black lung benefit trust or private foundation)

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

Α	For the	2012 calen	dar year, or tax year beginning , 2012, and ending		,	
В	Check if a	pplicable	C	D Employ	er Identifi/	cation Number
		ess change	INTERNATIONAL BROTHERHOOD OF ELECTRICAL	35-	07824	23
	\vdash	-	WORKERS LOCAL 1393	E Telepho		
	\vdash	e change	3645 S. EAST STREET	· · · · · · · · · · · · · · · · · · ·		
	Initia	l return	INDIANAPOLIS, IN 46227	317	<u>.791.</u>	1362
	Term	unated	INDIAMI OBIO, IN 1022			
	Arnei	nded return		G Gross r	eceipts \$	2,271,099.
	Appli	ication pending	F Name and address of principal officer	(a) Is this a group retui	n for affilia	ates? Yes X No
	ш	, ,		(b) Are all affiliates inc If 'No,' attach a list	luded?	Yes No
_	Tay av	empt status	501(c)(3) X 501(c) (5	If 'No,' attach a list	(see instri	uctions) — —
'					>	0064
J	Webs		2.1200.1220.001	(c) Group exemption n		0064
K		f organization	X Corporation	n 194 <u>4 Mis</u>	State of lec	gal domicile IN
Pa	nt I	Summar				<u> </u>
	1 B	riefly descri	be the organization's mission or most significant activities BARGAININ	G AGENT SEE	KING_	PROPER
a	Ιī	WORKING	CONDITIONS, PAY LEVELS, AND BENEFITS			
ဋ	-					
2	-					
Governance	2 0	heck this be	ox I if the organization discontinued its operations or disposed of more	e than 25% of its	net ass	ets.
ී	3 N		oting members of the governing body (Part VI, line 1a)		3	22
∘ಶ	4 N		dependent voting members of the governing body (Part VI, line 1b)		4	0
<u>ies</u>	5 T	otal number	r of individuals employed in calendar year 2012 (Part V, line 2a)		5	31
≅	6 T	otal numbe	r of volunteers (estimate if necessary)		6	0
Activities &	7a ⊺	otal unrelat	ed business revenue from Part VIII, column (C), line 12		7a	0.
_	1	let unrelated	d business taxable income from Form 990-T, line 34		7 b	0.
				Prior Year		Current Year
	8 0	Contributions	s and grants (Part VIII, line 1h)			
Revenue			vice revenue (Part VIII, line 2g) 🧸	2,159,	768	2,269,502.
ē			ncome (Part VIII, column (A), knes 3, 4, and 7d)		849.	1,597.
é	11 0	other reveni	ie (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	/3/- 	1,557.
_	12 T	otal revenu	e – add lines 8 through 2 (musicely a Part VIII, column (A), line 12)	2,163,6	517	2,271,099.
			similar amounts paid Part IX, column A), lines 1-3)	2,103,	/ 	2,211,000.
	13 0	arants and s	initial amounts pair poart IX, continuo, intes 1-5)	F42		COC 001
	14 B	senetits paid	d to or for members (Part IX) column (A), line 4). ler compensation, employee benefits (Part IX, column (A), lines 5-10)	543,		606,981.
ø	15 S	Salaries, oth	er compensation, employee benefits (Part IX, column (A), lines 5-10)	1,001,8	345.	1,100,934.
Se	16a P	Professional	fundraising fees (Part IX, cotumn (a), line 11e)			
ĕ	l _b T	otal fundrai	sing expenses (Part 1) couldn't (D), line 25)			
Expenses	1.5	Wher even	ses (Part X, cotumo 4, lines 11a-11d, 11f-24e)	748,0	002	727 401
	17					727,401.
			ses Add lines 13-7 (must equal Part IX, column (A), line 25)	2,293,2		2,435,316.
		Revenue les	s expenses Subtract line 18 from line 12	-129,	<u> 595. </u>	-164,217.
Assets or				Beginning of Curre	nt Year	End of Year
1964	20 T	otal assets	(Part X, line 16).	1,431,0		1,240,869.
₹,	21 ⊺	otal liabiliti	es (Part X, line 26)	283,	397.	257,458.
Not	22 1	let assets o	r fund balances Subtract line 21 from line 20	1,147,	528.l	983,411.
D.	art II		re Block			
				e hest of my knowledge	and helie	of it is true, correct, and
con	er penaitie iplete Dec	laration of prep	lectare that I have examined this return, including accompanying schedules and statements, and to the arer (other man pricer) is based on all information of which preparer has any knowledge	le best of my knowledge	. and bene	i, it is true, correct, and
			/ Almas y. Lalley	5-1	4-15	3
۵.		Signat	ure of officer	Date	, , ,	7
51	gn ere	I. "		DUCTNECC M	CD	
не	ere		MAS J. BAILEY	BUSINESS M	GK	
			or print name and title		I c	PTIN
		Print/Type	preparer's name Preparer's signature Date \$.13.	Check	ച"	
Pa	iid	JEFFR	EY A. MULLEN, CPA JEFFREY A. MULLEN, CPA	self-employ	/ed F	P00007660
	eparei					
	se Only			Firm's ÉIN	► 02-	-0735385
-		, inins auu	ZIONSVILLE, IN 46077-1549	Phone no		938.0309
-	415 - 175)C al.a 1	his return with the preparer shown above? (see instructions)		<u> </u>	X Yes No
IVI2	iv ine iH	co discuss t	nis return with the preparer shown above? (See Instructions)			1471 I C2 140

CANNED JUN 2 5 2013

BAA For Paperwork Reduction Act Notice, see the separate instructions.

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Form 990 (2012)

Førm	Form 990 (2012) INTERNATIONAL BROTHERHOOD OF ELECTRICAL									35-0782423 Pa						
Par				_	ervice Acc	•			_							
					a response to	any questi	on in this Part	111								
1	Briefly d	lescribe	the organiz	ation's m	ission					-						
	BARGA	AINING	G AGENT	SEEKIN	IG PROPER	WORKING	G CONDITI	ONS,	PAY	LEVEL	S, AND	BENE	FIT	'S		
2	Did the d	organizat	tion undertak	ke any sign	iificant program	services du	ring the year w	hich wei	re not I	isted on t	the prior					
	Form 99													Yes	X	No
	If 'Yes,'	describ	e these new	services	on Schedule	C							_		_	
3	Did the	organıza	ation cease	conductin	ıg, or make sıç	inificant ch	anges in how	ıt condu	ucts, ar	ny progra	am services?	,	\Box	Yes	X	No
	If 'Yes,'	describ	e these cha	nges on S	Schedule O								_		_	
4	Describe	e the or	ganization's	program	service accomations and sect	plishments	for each of its	s three	largest	progran	n services, a	s me	asure	d by	expen	ses
	others.	the total) and 501(c)(Lexpenses.	(4) organiz and rever	tations and sect nue, if any, for	ion 4947(a)(each progi	1) trusts are re am service re	equirea t ported	o repor	t the amo	ount of grants	and	alloca	tions t	0	
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4 0	Other pr	rogram	services (D	escribe in	Schedule O)										_	
	(Expens				including	grants of	\$)	(Revenu	ле \$)	
4 6			service expe	enses ►												

			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, for escrow or custodial account liability, 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
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, VII, 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	
ı	b 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? <i>If 'Yes,' complete Schedule D, Part VII</i>	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	
1	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
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	Х	
	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 and XII 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		Х
	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	;	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? <i>If 'Yes,' complete Schedule F, Parts II and IV</i>	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
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		Х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
-	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 ь		

		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	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
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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		
t	a 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, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
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		х
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
	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 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	28c	_	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	olf 'Yes' to line 35a, 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		
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 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
BAA		Form	990 (2012)

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Part V Statements Regarding Other IRS Filings and Tax	•				_
Check if Schedule O contains a response to any question in	his Part V				
				Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not	applicable	1a 31			
b Enter the number of Forms W-2G included in line 1a. Enter -0- if	not applicable	1b 31			
c Did the organization comply with backup withholding rules for reportable (gambling) winnings to prize winners?	e payments to vendors and re	eportable gaming	1 c	$_{\rm x}$	
2a Enter the number of employees reported on Form W-3, Transmitt	al of Wage and Tay State.	t t			
ments, filed for the calendar year ending with or within the year c	overed by this return	2a 31		ľ	
b If at least one is reported on line 2a, did the organization file all r	equired federal employment		2ь	х	
Note. If the sum of lines 1a and 2a is greater than 250, you may be	• •	⊢		t	
3a Did the organization have unrelated business gross income of \$1,			3 a	ľ	Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an		The state of the s	3 b		
4a At any time during the calendar year, did the organization have an inte	rest in, or a signature or other	r authority over, a			
financial account in a foreign country (such as a bank account, se	curities account, or other fir	nancial account)?	4 a		X
b If 'Yes,' enter the name of the foreign country					
See instructions for filing requirements for Form TD F 90-22 1, Re			_		.,
5a Was the organization a party to a prohibited tax shelter transaction	-	- L	5 a		X
b Did any taxable party notify the organization that it was or is a pa	rty to a prohibited tax shelte	er transaction?	5 b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		<u> </u>	5 c		
6 a Does the organization have annual gross receipts that are normal solicit any contributions that were not tax deductible as charitable	ly greater than \$100,000, ar contributions?	nd did the organization	6 a		Х
b If 'Yes,' did the organization include with every solicitation an express	statement that such contribution	ons or gifts were			
not tax deductible? 7 Organizations that may receive deductible contributions under s	eaction 170(c)	-	6Ь		
	• • • • • • • • • • • • • • • • • • • •				
a Did the organization receive a payment in excess of \$75 made pa services provided to the payor?	rtly as a contribution and pa	artly for goods and	7 a		
b If 'Yes,' did the organization notify the donor of the value of the g	oods or services provided?	Ī	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible po	ersonal property for which it w	as required to file	7.		
Form 8282?	1		7 c		
d If 'Yes,' indicate the number of Forms 8282 filed during the year		7d	_	ŀ	
e Did the organization receive any funds, directly or indirectly, to pa	• •	<u> </u>	7 e		
f Did the organization, during the year, pay premiums, directly or in	•	j <u>-</u>	7 f		
g If the organization received a contribution of qualified intellectual proper as required?	rty, did the organization file F	orm 8899	7 g		
h If the organization received a contribution of cars, boats, airplane Form 1098-C?	s, or other vehicles, did the	organization file a	7 h		
8 Sponsoring organizations maintaining donor advised funds and supporting organization, or a donor advised fund maintained by a holdings at any time during the year?	section 509(a)(3) supporting sponsoring organization, has	ng organizations. Did the ave excess business	8		
9 Sponsoring organizations maintaining donor advised funds.					
a Did the organization make any taxable distributions under section			9 a		
b Did the organization make a distribution to a donor, donor advisor	, or related person?		9 b		
10 Section 501(c)(7) organizations. Enter		Ī			
a Initiation fees and capital contributions included on Part VIII, line	12	10a			
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				ł	
a Gross income from members or shareholders	1	11 a			
b Gross income from other sources (Do not net amounts due or pai	d to other sources			İ	
against amounts due or received from them)	Ĺ	11b	_		
12a Section 4947(a)(1) non - exempt charitable trusts. Is the organiza			12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accru	ied 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			13a		
Note. See the instructions for additional information the organizat	•	e O			
b Enter the amount of reserves the organization is required to main which the organization is licensed to issue qualified health plans	tain by the states in	136			
c Enter the amount of reserves on hand		13c			

14a Did the organization receive any payments for indoor tanning services during the tax year?

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

14a

14b

Form 990 (2012) INTERNATIONAL BROTHERHOOD OF ELECTRICAL 35-0782423 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. Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management Yes No 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 1 a 22 of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 1 b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х Δ Did the organization become aware during the year of a significant diversion of the organization's assets? X 5 Did the organization have members or stockholders? X 6 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? Х 7 2 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 7h Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. a The governing body? 8 a Х b Each committee with authority to act on behalf of the governing body? X 8 b 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 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code No Yes 10a Did the organization have local chapters, branches, or affiliates? 10 a Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling 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 12 a X b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12_b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 120 13 Did the organization have a written whistleblower policy? 13 $\overline{\mathbf{X}}$ 14 Did the organization have a written document retention and destruction policy? 14 X 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 15 a Х **b** Other officers of key employees of the organization 15b Х 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 taxable entity during the year? 16 a Х 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? 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed IN Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website Upon request Other (explain in Schedule O) 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

BARBARA HEDGE 3645 S. EAST STREET

Form 990 (2012)	INTERNATIONAL	BROTHERHOOD	OF	ELECTRICAL

35-0782423

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

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

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

- 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 related organization compensated any current officer, director, or trustee

	T -			(C	;)			a any canton omeon, an		
(A) Name and Title	(B) Average hours per week (list	one bo	er an	iless p id a di	erso	more to n is bot or/truste	h an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other compensation
	any hours for related organiza tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W 2/1099 MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) RICHARD BYRER	_ 20									
SECRETARY	0	Х					L.	570.	0.	0.
(2) STEVEN MOORE	20				i					
ASST FIN SEC	0	Х						570.	0.	0.
(3) BRADLEY COLTER	20_									
ASST FIN SEC	0	Х						570.	0.	0.
(4) MARK KELLEY	10_									
EXECUTIVE BOARD	0	Х						570.	0.	0.
(5) JOSEPH ROBINSON	10_									
EXECUTIVE BOARD	0	Х						570.	0.	0.
(6) PAUL HENDRIX	10_									
ASST FIN SEC	0	X						0.	0.	0.
7 JOSEPH FRIEDT	10				ı					
EXECUTIVE BOARD	0	Х						570.	0.	0.
(8) BRENT LEWIS	20		ĺ							
EXECUTIVE BOARD	0	Х						570.	0.	0.
(9) KEVIN CRULL	10_	.								
ASST FIN SEC	0	X		\Box				570.	0.	0.
(10) JUSTIN LIEN	10_									
ASST FIN SEC	0	Х			\Box			0.	0.	0.
(11) GARY HENRY	20_									 -
EXECUTIVE BOARD	0	Х						570.	0.	0.
(12) MARK NORTON	10_									
ASST FIN SEC	0	Х						0.	0.	0.
(13) DONALD REDMAN	0				į					
ASST FIN SEC	0	X						0.	0.	0.
(14) CLARENCE SIEVEKING	0			I	Ī				-	
ASST FIN SEC	0	Х						0.	0.	0.

Page 8

Part VII Section A. Onicers, Directors, Trus	$\overline{}$	<u>ney</u>	Em	_	_	es,	and	a Hignest Com	ipensated Emp	oyee	S (CO	nt)
(A) Name and title	Average hours	box	, unles	heck ss pe	sition more	e than is bot	h an	(D) Reportable	(E) Reportable		(F) Estimated	1
	per week (list any	\vdash		_		or/trus		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W 2/1099-MISC)	am	ount of ot mpensati from the	her
	(list any hours for related organiza	Individual trustee or director	institutional trustee	Officer	Key employee	ploye	i i	(2.103300)	(11 271035411100)	a	ganızatıcı nd relate	d
	1 (1011)	\$ \$	죑		ploye	ě comp				or	ganizatio	ns
	below dotted line)	stee	ustee		ľ	Highest compensated employee						
(15) MICHAEL GRIGGS	10									_		
ASST FIN SEC	0	Х	Н				L	570.	0.			0.
(16) NICK NEAL ASST FIN SEC	$-\frac{10}{0}$	X						570.	0.			0.
(17) DONALD SMALL	10		H					3,0.				- 0.
ASST FIN SEC	0	X						570.	0.			0.
(18) TIMOTHY OVERMAN ASST FIN SEC	$-\frac{10}{0}$	X						570.	0.			0
(19) ROBERT MADDEN	20	^					┢	370.				0.
TREASURER	0			X				570.	0.			0.
VICE PRESIDENT	$-\frac{10}{0}$			Х				570.	0			^
(21) MICHAEL EDWARDS	30		H	^		-		370.	0.			0.
PRESIDENT	0			Х				570.	0.			0.
(22) THOMAS J. BAILEY BUSINESS MGR	$-\frac{40}{0}$			х				05 601	0			•
(23)	"-			Λ				95,681.	0.			0.
										_		
(24)	 								İ			
(25)												
1 b Sub-total	<u> </u>			!		L	>	104,801.	0.			0.
c Total from continuation sheets to Part VII, Section	1 A						•	0.	0.			0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to	n those li	stad	ahov	(A) V	who	recen	ved	104,801.	0.	oncatio		0.
from the organization • 0	0 111036 11	sicu	abov	C) ¥	V 110	iecei	veu	more than \$100,00	o or reportable comp	cusauc)	
			-								Yes	No
3 Did the organization list any former officer, directo on line 1a? If 'Yes,' complete Schedule J for such	r or trus <i>ındıvıdu</i>	tee, <i>al</i>	key (emp	ploy	ee, c	or hi	ghest compensate	ed employee	3		x
4 For any individual listed on line 1a, is the sum of r the organization and related organizations greater such individual	eportabl than \$1	e coi 50,00	mpei)0? <i>[</i>	nsa If 'Y	tion ′es′	and com	oth <i>plet</i>	er compensation t e Schedule J for	rom	4		х
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,'	compen	satio	n fro	om a ule .	any <i>J fo</i>	unre r suc	late	d organization or	ındıvıdual	5		X
Section B. Independent Contractors	·····				_				·			
1 Complete this table for your five highest compensation from the organization. Report compensation.	ated indeation for t	pend the ca	dent alend	cor dar y	ntrac /ear	endı	tha ng w	t received more the vith or within the or	ian \$100,000 of ganization's tax year			
(A) Name and business addre	ss							(B) Description o	f services	Comp	C) ensatio	n
FILLENWARTH DENNERLINE GROTH & TOWE, LLP 429			_		EET	, SU	JIT	LAW FIRM			161,9	12.
LEWIS & KAPPES, PC 1 AMERICAN SQUARE INDIANA	APOLIS,	IN	462	282				LAW FIRM		-	179,3	327.
												
2 Total number of independent contractors (including but \$100,000 in compensation from the organization ▶		ted to	thos	se li	sted	l abo	ve) י	who received more	than			

		Check if Schedule O			- > 1	,	(B)	(C)	(D)
						(A) Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
불입	1 a	Federated campaigns		1 a			Teveride		512, 513, 0/ 514
S S		Membership dues		1ь					
AS.	С	Fundraising events		1 c					
유	d	Related organizations		1 d					
SS SS	е	Government grants (contributi	ons)	1 e					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f	All other contributions, gifts, q similar amounts not included	grants, and above	1 f					
용	g	Noncash contributions include	ed in Ins 1a-	1f \$_					
س	h	Total. Add lines 1a-1f			•				
PROGRAM SERVICE REVENUE	_			F	Business Code				
@	2 a		<u>ASSESSM</u>	ENTS		2,269,502.			2,269,502.
길	b			-					,
뗥	c d	. -			•				
₹	e								
පු	f	All other program service	ce revenu	-					
8		Total. Add lines 2a-2f		L	-	2,269,502.		.=.	
	3	Investment income (incother similar amounts)	luding div	/idends	, interest and	1,597.			1,597.
	4 Income from investment of tax-exempt bo				bond proceeds 🕨				
	5	Royalties							
			(i) R	eal	(II) Personal				
		Gross rents			ļ				
		Less rental expenses							
		Rental income or (loss) Net rental income or (lo							
		(A) Securities			(ii) Other				·
	7 a	Gross amount from sales of assets other than inventory	() 0000		(ii) duci				
		Less cost or other basis and sales expenses							
		Gain or (loss)							
Ì	d	Net gain or (loss)			<u> </u>				
띨	8 a	Gross income from fund (not including \$	draising e	vents					
OTHER REVENUE		of contributions reporte	d on line	1c)					
띪		See Part IV, line 18		a					
띪	b	Less direct expenses		b					
<u></u>		Net income or (loss) fro	om fundra	ising e	vents •				
	9 a	Gross income from gam See Part IV, line 19	ning activ	ities a					
		Less direct expenses		b	L				
	С	Net income or (loss) fro	om gamın	g actıvı	ties				
	10a	Gross sales of inventor	y, less re	turns					
				а					
		Less cost of goods sole		b					
	С	Net income or (loss) fro		of inver		<u>.</u> .			
}	11 -	Miscellaneous Reveni	<u></u>		Business Code				
İ	11 a				<u> </u>				
	b		-		.				
	q C	All other revenue			· · · · · · · · · · · · · · · · · · ·				
		Total. Add lines 11a-11	d	L	•			 -	
		Total revenue. See inst			•	2,271,099.	0.	0.	2,271,099.
	-					, _, _, _, _, _, _, _, _, _, _, _	U . I	0.	

Sect	ion 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. All oti	her organizations must co	omplete column (A)	
	Check if Schedule O contains a	response to any question	on in this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the 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	Benefits paid to or for members	606,981.			
5	Compensation of current officers, directors, trustees, and key employees	104,801.			
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	717,488.			
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	215, 203.			
9	Other employee benefits	220,2001			
10	Payroll taxes	63,442.			
	Fees for services (non-employees)	03,442.			
	' ' '				
	Management	005 000			
	Legal	225,020.			
	Accounting	12,000.			
	Lobbying				
	Professional fundraising services See Part IV, line 17				
	Investment management fees				
_	Other (If line 11g amt exceeds 10% of line 25, col- umn (A) amt, list line 11g expenses on Sch 0) Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	38,285.			
20	Interest	2,055.			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	78,120.			
	Insurance	115,826.			
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)				
â	GRIEVANCE AND ARBITRATION	55,595.			
t	OFFICE AND BUILDING EXPENSES	50,229.			
(AUTOMOBILE EXPENSE	46,185.			
(ORGANIZING, FORM & NEGOTIATION	19,301.			
•	All other expenses	84,785.			
25	Total functional expenses. Add lines 1 through 24e	2,435,316.			
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)				

		Check if Schedule O contains a response to any question in this Part X	· · · · · · · · · · · · · · · · · · ·		
	•		(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	607,706.	1	497,976.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	-	3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other 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) Complete Part II of Schedule L.		6	
A	7	Notes and loans receivable, net		7	
S	8	Inventories for sale or use	2,092.	8	-,
A S E T S	9	Prepaid expenses and deferred charges	7,651.	9	7,437.
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 1,112,186.	1,70000		
	b	Less accumulated depreciation 10b 376,770.	813,536.	10 c	735,416.
	11	Investments – publicly traded securities	40.	11	40.
	12	Investments – other securities See Part IV, line 11		12	
	13	Investments – program-related See Part IV, line 11		13	-
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,431,025.	16	1,240,869.
	17	Accounts payable and accrued expenses	100,303.	17	108,054.
	18	Grants payable		18	
Ļ	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
À	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
LIABILITIES	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
إإ	23	Secured mortgages and notes payable to unrelated third parties	118,528.	23	87,038.
ร	24	Unsecured notes and loans payable to unrelated third parties	110,020.	24	07,030.
	25	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	64,566.	25	62,366.
	26	Total liabilities. Add lines 17 through 25	283,397.	26	257,458.
N E T		Organizations that follow SFAS 117 (ASC 958), check here ► and complete lines 27 through 29, and lines 33 and 34.			_
ŝ	27	Unrestricted net assets		27	
ASSETS	28	Temporarily restricted net assets	_	28	
	29	Permanently restricted net assets		29	
R		Organizations that do not follow SFAS 117 (ASC 958), check here ► X	-··		
		and complete lines 30 through 34.			
FORD BALAZOWN	30	Capital stock or trust principal, or current funds	1,147,628.	30	983,411.
В	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ë	32	Retained earnings, endowment, accumulated income, or other funds		32	
Č	33	Total net assets or fund balances	1,147,628.	33	983,411.
Š	34	Total liabilities and net assets/fund balances	1,431,025.	34	1,240,869.
BA	4				Form 990 (2012)

	-07824	23	Pa	age 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	2,2	71,0	099.
2 Total expenses (must equal Part IX, column (A), line 25)	2	2,4	35,	316.
3 Revenue less expenses. Subtract line 2 from line 1	3	-1	64,2	217.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			528.
5 Net unrealized gains (losses) on investments	5			_
6 Donated services and use of facilities	6			
7 Investment expenses	7			
8 Prior period adjustments	8			
9 Other changes in net assets or fund balances (explain in Schedule O).	9			0.
Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	9	83,4	 411.
Part XII Financial Statements and Reporting	-1			
Check if Schedule O contains a response to any question in this Part XII				
			Yes	No
1 Accounting method used to prepare the Form 990 Cash X Accrual Other		_		
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?		2 a		X
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both	ved on a			
Separate basis Consolidated basis Both consolidated and separate basis				
b Were the organization's financial statements audited by an independent accountant?		2 b	Х	
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa	rate			
basis, consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis		I		
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud review, or compilation of its financial statements and selection of an independent accountant?	ıt,	2 c	Х	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
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		х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required au or audits, explain why in Schedule O and describe any steps taken to undergo such audits	udit	3 b		:
BAA		Form	990	(2012)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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
Employer identification number

	FERNATIONAL BROTHERHOOD OF ELE RKERS LOCAL 1393	CCTRICAL	35-0782423					
Pai		lar Funds or Accounts. Complete if						
r ai	the organization answered 'Yes'	to Form 990. Part IV. line 6.	di i unus di Accounts. Complete n					
		(a) Donor advised funds	(b) Funds and other accounts					
1	Total number at end of year	(a) Donor advised idilds	(b) Funds and other accounts					
_	Aggregate contributions to (during year)							
2	(),							
3	Aggregate grants from (during year)							
4	Aggregate value at end of year							
5	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? Yes No							
6	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 purpose conferring impermissible private benefit? Yes No							
Б-	<u>-</u>	lote if the organization enginers						
Pai 1	Purpose(s) of conservation easements held b		d 'Yes' to Form 990, Part IV, line 7.					
'	Preservation of land for public use (e.g.,	· · · · · · · · · · · · · · · · · · ·						
	Protection of natural habitat	′ <u>⊢</u>	vation of an historically important land area					
	Preservation of open space	Fresei	vation of a certified historic structure					
2								
2	Complete lines 2a through 2d if the organization last day of the tax year	neid a qualified conservation contribution if	the form of a conservation easement on the					
	,,,		Held at the End of the Tax Year					
	Total number of conservation easements		2 a					
ı	Total acreage restricted by conservation ease	ments	2 b					
	Number of conservation easements on a certi		2c					
	Number of conservation easements included i	` ,						
`	structure listed in the National Register	in (c) acquired after 6/1/706, and not on	2 d					
3	Number of conservation easements modified, trait tax year ►	nsferred, released, extinguished, or termina	ated by the organization during the					
4	Number of states where property subject to conse	ervation easement is located >						
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?							
6	Staff and volunteer hours devoted to monitoring,	inspecting, and enforcing conservation eas	ements during the year					
7	Amount of expenses incurred in monitoring, insper ▶\$	ecting, and enforcing conservation easeme	nts during the year					
8	Does each conservation easement reported or and section 170(h)(4)(B)(II)?	n line 2(d) above satisfy the requiremen	ts of section 170(h)(4)(B)(i)					
9	In Part XIII, 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		•					
Par	Complete if the organization ans	wered 'Yes' to Form 990, Part I	res, or Other Similar Assets. /, line 8.					
1 a	If the organization elected, as permitted unde art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its final	eld for public exhibition, education, or resea	its revenue statement and balance sheet works of arch in furtherance of public service, provide, ems					
1	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		> \$					
2	If the organization received or held works of art, I amounts required to be reported under SFAS	nistorical treasures, or other similar assets 116 (ASC 958) relating to these items	for financial gain, provide the following					
ā	Revenues included in Form 990, Part VIII, line		►\$					
	Assets included in Form 990. Part Y		►¢					

Part III Organizations Mainta	ining Collection	ornerhood of	ELECTRICAL	35-078	2423	antin.	Page 2		
 							iea)		
3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)									
a Public exhibition		—	or exchange programs						
b Scholarly research		e U Other		<u> </u>					
c Preservation for future gener									
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.									
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes									
Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.									
1 a Is the organization an agent, true on Form 990, Part X?	stee, custodian, or	other intermediary	for contributions or ot	her assets not included	Yes	. [□ No		
b If 'Yes,' explain the arrangement	in Part XIII and co	emplete the following	ng table		<u> </u>		_ 		
a Rasinaina halanaa					Amoun	t			
c Beginning balance				1 c					
d Additions during the year									
e Distributions during the year				1 e					
f Ending balance2a Did the organization include an a	1 f	 							
b If 'Yes,' explain the arrangement				d in Dort VIII	∐ Yes	· }	⊣ No		
bili res, explain the arrangement	III Fait XIII Grece	chere ii the explai	illon has been provide	u in Part XIII		L			
Part V Endowment Funds. C	omplete if the	organization an	swared 'Ves' to Fo	rm 990 Part IV Jur	20.10				
Ture V Endowment I unus c	(a) Current	(b) Prior yea		(d) Three years		Four yea	rs		
1 a Beginning of year balance		() you		(4) ************************************	+ (3)				
b Contributions					+				
c Net investment earnings, gains, and losses	,			-					
d Grants or scholarships					+				
e Other expenditures for facilities				-	+	-			
and programs f Administrative expenses	·				ļ	_			
g End of year balance					 				
2 Provide the estimated percentag	L e of the current ve:	ar end balance (lin	e 1a, column (a)) held	30					
a Board designated or quasi-endowm	_	end balance (iii)	e rg, column (a)) nelu	as					
b Permanent endowment ►	-%	 •							
c Temporarily restricted endowmer		<u>ૄ</u>							
The percentages in lines 2a, 2b,		al 100%							
	•								
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by Yes No									
(i) unrelated organizations					3a(i)				
(ii) related organizations		3a(ii)							
b If 'Yes' to 3a(II), are the related organizations listed as required on Schedule R?									
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds									
Part VI Land, Buildings, and	Equipment. Se	e Form 990. Pa	art X. line 10.						
Description of property		ost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d)	Book va	alue		
1 a Land			63,240.			63	,240.		
b Buildings			698,682.	117,701.			,981.		
c Leasehold improvements			61,305.	61,305.			0.		
d Equipment			224,341.	136,782.		87	,559.		
e Other	<u> </u>		64,618.	60,982.			,636.		
Total. Add lines 1a through 1e (Colum	nn (d) must equal F	orm 990, Part X, o					,416.		
BAA Schedule D (Form 990) 2012									

	D (Form 990) 2012 INTERNATIONAL BRO							35-07	82423	Page 3
Part VII				line	12.					
	(a) Description of security or category (including name of security)	(t) Book value			(c) N e	1ethod o nd-of-ve	f valuatior ar market	n Cost or value	
(1) Financ	cial derivatives				_	.				
	y-held equity interests.									_
(3) Other										
(A)					_					
(B)										
(C)		<u>.</u>								
(D)										
(E) (F)										
(F) (G)								-		
(()										
(l)		-						_	_	_
	mn (b) must equal Form 990, Part X, column (B) line 12)	-								_ .
	Investments — Program Related. See		1 990 Part X	line	13	N/A				
1 41(111	(a) Description of investment type) Book value	11110	, 10.	(c) N	1ethod o	f valuation	Cost or	
		<u> </u>				<u>`´e</u>	nd-of-ye	ar market	value	
(1)		ļ								
(2)	· · · · · · · · · · · · · · · · · · ·	-								
(3) (4)			_						·-	
(5)		+								
(6)									_	
(7)										
(8)		+								
(9)									.	
(10)	· · · · · · · · · · · · · · · · · · ·									
Total (Colum	mn (b) must equal Form 990, Part X, column (B) line 13)	•	_							_
Part IX	Other Assets. See Form 990, Part X,							_		_
	(a) De	escripti	on						(b) Book	value
(1)							_			
(2)										
(4)										
(5)			 -							
(6)	·									
(7)	 -									
(8)									-	
(9)										
(10)										
Total. (Co	olumn (b) must equal Form 990, Part X, column ((B), line	e 15)		-			>		
Part X	Other Liabilities. See Form 990, Part	X, lın	e 25.							
	(a) Description of liability		(b) Book value							
	eral income taxes	_								
	RUED SALARIES, WAGES AND BENEF	'IT	48,27							
	TO ESCROW FUND		14,09	<u>0.</u>						
(4)				_						
(5)			 .	\dashv						
(6)				\dashv						
(8)				\dashv						
(9)				ᅱ						
(10)		-+-		\dashv						
(11)			_	\dashv						

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

2. FIN 48 (ASC 740) Footnote In Part XIII, 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) Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2012 INTERNATIONAL BROTHERHOOD OF E		<u>35-078242</u>	3 Page 4
Part XI Reconciliation of Revenue per Audited Financial State	ements With Revenue p	er Return	
1 Total revenue, gains, and other support per audited financial statements		1	2,271,099.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains on investments	2 a		
b Donated services and use of facilities	2 b		
c Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII.)	2 d		
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1		3	2,271,099.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
b Other (Describe in Part XIII)	4 b		
c Add lines 4a and 4b.		4 c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line		5	2,271,099.
Part XII Reconciliation of Expenses per Audited Financial State	tements With Expenses		
1 Total expenses and losses per audited financial statements		1	2,435,316.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities			
	2a		
b Prior year adjustments c Other losses	2 b	—— I	
d Other (Describe in Part XIII)	2 c 2 d		
e Add lines 2a through 2d	20		
3 Subtract line 2e from line 1		2 e	2 425 216
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1		2,435,316.
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
b Other (Describe in Part XIII)	4 b		
c Add lines 4a and 4b.		4c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ne 18)	5	2,435,316.
Part XIII Supplemental Information			
Complete this part to provide the descriptions required for Part II, lines 3, 5, and line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Als	19, Part III, lines 1a and 4, P so complete this part to provide	art IV, lines 1b a le any additional	nd 2b, Part V, Information
	·		-
			
	· 		
	· 		
	· 		
	· 		
BAA		Schedule D	(Form 990) 2012

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LOCAL 1393	Employer identification number 35-0782423
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
SEVERAL MEMBERS OF THE AUDIT COMMITTEE AND BOOKKEEPER REVIEW T	THE 990 PREPARED BY THE
INDEPENDENT_CPA_FIRM.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY A	AVAILABLE
THE_LOCAL_UNION_FILES_IT_FORM_LM-2_LABOR_ORGANIZATION_ANNUAL_F	REPORT_VIA_THE
DEPARTMENT_OF_LABOR_WEBSITE, WHICH_IS_AVAILABLE_TO_THE_PUBLIC	VIA THE DOL.
	
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Form **8868**

(Rev January 2013)

Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box X If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part !! (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extention on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or INTERNATIONAL BROTHERHOOD OF ELECTRICAL print WORKERS LOCAL 1393 35-0782423 Number, street, and room or suite number. If a P.O. box, see instructions Social security number (SSN) File by the due date for 3645 S. EAST STREET filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions INDIANAPOLIS, IN 46227 Enter the Return code for the return that this application is for (file a separate application for each return) 01 Application Is For Application Is For Return Return Code Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BI 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 09 Form 990-PF 04 Form 5227 10 Form 990-T (section 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 12 The books are in the care of BARBARA HEDGE Telephone No ► 317.791.1362 FAX No ► If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, ► ☐ If it is for part of the group, check this box check this box ▶ and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 8/15 , 20 13 , to file the exempt organization return for the organization named above The extension is for the organization's return for X calendar year 20 12 or tax year beginning ____, 20 ___, and ending 2 If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3als 0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax

c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using

payments made Include any prior year overpayment allowed as a credit

EFTPS (Electronic Federal Tax Payment System) See instructions

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