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332001 10-29-13

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at www.irs.gov/form990

A	For the	e 2013 calendar year, or tax year beginning	and	i enaing			
В	Check if applicabl	C Name of organization			D Employe	r identifica	tion number
	Addre	e   IBEW LOCAL /6					
	Name chang	e Doing Business As			]	91-02	68091
	lnitial return	Number and street (or P.O. box if mail is not delivered to street addre	ess)	Room/suite	E Telephon	e number	
	Termi	3049 S 36TH STREET		101		(253)	475-1192
	Amen	City or town, state or province, country, and ZIP or foreign post	tal code		G Gross receip	ts \$	2,807,750.
	Application				H(a) Is this a	aroup retu	ım
	pendi		ES		1	ordinates?	Yes X No
		3049 S 36TH STREET, SUITE 101, T	ACOMA,	WA 9	. I		
T .	Tax-ex	empt status	4947(a)(1)		4 ' '		t (see instructions)
		te: WWW.IBEW76.ORG			H(c) Group		
			her 🕨	L Year			State of legal domicile: WA
_	art I	Summary				7 (1)	
_		Briefly describe the organization's mission or most significant activities	es TO P	ROMOTE	THE MA	TERIA	L AND
Activities & Governance	'	INTELLECTUAL WELFARE OF ITS MEMBER					
na.	2	Check this box If the organization discontinued its operation		seed of more	a than 25% of	ite not seed	
Ķ		Number of voting members of the governing body (Part VI, line 1a)	Jus or dispo	osed of filore	5 triair 2570 Of	3	11
යි	1	Number of independent voting members of the governing body (Part VI, line Pa)		ECEIV	ren 1	4	0
ళ				S 6 2 1 4		5	32
Ë	9	Total number of individuals employed in calendar year 2013 (Part V, I Total number of volunteers (estimate if necessary)	(S)	4V @ 0 .	g	6	0
ξį	6	Total number of volunteers (estimate if necessary)	8 M	7Y 3 8 1	2014   옷]	7a	0.
¥		Total unrelated business revenue from Part VIII, column (C), line 12	1 1-		SS	7a 7b	<u></u>
_	D	Net unrelated business taxable income from Form 990-T, line 34	Of		U Prior Yea		Current Year
	١.	Contributions and grants (Dort VIII line 1h)	100		Officer rea	0.	50,141.
ī	8	Contributions and grants (Part VIII, line 1h)		-	2,434,		2,541,993.
Revenue	9	Program service revenue (Part VIII, line 2g)				114.	2,042.
æ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	`	-		165.	85,733.
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	•	-	2,486,		2,679,909.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (	A), line 12)		2,400,	0.	<u> </u>
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		<b>⊢</b>	- 1	270.	491.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		-		848.	940,172.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A)	, lines 5-10)	·	, ,,,	0.	0.
ë	16a	Professional fundraising fees (Part IX, column (A), line 11e)		_	<del></del>		
X	_b	Total fundraising expenses (Part IX, column (D), line 25)		<u> </u>	2 105	740	1 250 050
_	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		<u> </u>	2,105, 3,066,		1,358,058.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line	25)	<u> </u>			2,298,721.
- Jo		Revenue less expenses. Subtract line 18 from line 12			-580,		381,188.
tso				B6	eginning of Curr		End of Year
SSe	20	Total assets (Part X, line 16)		<u> </u>	1,515,		1,871,198.
Net Assets	21	Total liabilities (Part X, line 26)		_		855	73,741.
<u> </u>	22	Net assets or fund balances Subtract line 21 from line 20			1,416,	209.	1,797,457.
	art II	Signature Block				1 .1 .4 . 1	
		alties of perjury, I declare that I have examined this return, including accompan				•	nowledge and belief, it is
true	e, corre	ct, and complete. Degravation of preparer (other than officer) is based on all info	ormation of w	nich prepare	r nas any knowle	age.	<del></del>
		Signature of officer			Date:	12011	4
Sig	ın		manar/n	****	Date	•	
He	re	DENNIS CALLIES, FINANCIAL SECRE	TARY/E	OSINES	SS MGR	<del></del>	
		Print/Type preparer's name Preparer's sidnature	<u>ب ، .</u>		Date	Check	PTIN
Pai	d	LORI L. SCOTT	<b>DUM</b>		5/20/14	ıf self-employed	P01452038
	parer	Firm's name LINDQUIST LLP	<del></del>				52-2385296
	Only	Firm's address 5000 EXECUTIVE PARKWAY, S	UITE 4	00			
	,	SAN RAMON, CA 94583			Phor	ne no 925	-277-9100
Ma	v the I	RS discuss this return with the preparer shown above? (see instruction			1 1101		X Yes No
	,	alougue and rotoria train and proparer orietti abotto: tocc ilialiuctic	J., J.				

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



Form **990** (2013)

	1990 (2013) IBEW LOCAL 76 91-026809	)1 Page <b>2</b>
Par	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission	
	SERVING THE SOUTHWEST WASHINGTON AREA, THE UNION IS COMMITTED TO	
	WORKING ON BEHALF OF THEIR MEMBERS WITH THE MAIN GOAL OF MAKING	THE
	QUALITY OF LIFE BETTER FOR THEM AND THEIR FAMILIES THROUGH THE	
	COLLECTIVE BARGAINING PROCESS.	
	<del></del>	
2	Did the organization undertake any significant program services during the year which were not listed on	<b>v</b>
	•	Yes X No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by exp	enses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total exper	ses, and
	revenue, if any, for each program service reported	
4a	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$	)
	PROMOTED THE WELFARE AND WORKING CONDITIONS FOR MEMBERS.	′
	g	
		<u></u>
4b	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$	
70	/ Code / Cxperises \$ including grains or \$ / Theverise \$	
	,	
		-
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	
-		orm <b>990</b> (2013)

Form 990 (2013) IBEW LOCAL 76
Part IV Checklist of Required Schedules

			Yes	No
1	s the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			77
	If "Yes," complete Schedule A	1	- <del>V</del>	_X_
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		х	
	public office? If "Yes," complete Schedule C, Part I	3_		
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	-		
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	į	X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			3.7
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u>X</u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	114		
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	_ X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI and XII	12a	X	
D	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
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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 other assistance to or for any			
	foreign organization? 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 other assistance to			
	or for foreign individuals? 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,			<sub>v</sub>
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		x
10	1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		<del>  ^</del>
19	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20Ь		T
			990	(2013)

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Part IV Checklist of Required Schedules (continued)

	•		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			<b>.</b> ,
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,			<sub>V</sub>
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
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			х
	Schedule J	23		<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			x
L	Schedule K. If "No", go to line 25a	24a 24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240	_	├─
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
A	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<del>                                     </del>
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	240		
200	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		$\vdash$
	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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			$\overline{}$
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,	1		
	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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	-	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			J.
	contributions? If "Yes," complete Schedule M	30_		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			x
	If "Yes," complete Schedule N, Part I	31	<b> </b> -	<del>  ^</del>
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		x
22		32		<del>  ^</del>
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		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	٣		<del></del>
<b>J</b>	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<del></del>	Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		<u> </u>	<del>                                     </del>
~	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	1	1
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	L	X
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	X	
		Form	990	(2013)

Form	990 (2013) IBEW LOCAL 76 91-0268	091	P	age 5
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter 0 if not applicable 1b 0		İ	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 32			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	1
	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		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
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, secunties account, or other financial account)?	4a		Х
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		X
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a	Х	<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			1
	were not tax deductible?	6b	X	
7	Organizations that may receive deductible contributions under section 170(c).			1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			1
	to file Form 8282?	7с		<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year			1
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		├
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 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		$\vdash$
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
9	Sponsoring organizations maintaining donor advised funds.	8		
-		9a		
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	
10	Section 501(c)(7) organizations. Enter	35		<del></del> -
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			1
11	Section 501(c)(12) organizations. Enter:			1
а	Gross income from members or shareholders			1
	Gross income from other sources (Do not net amounts due or paid to other sources against			1
	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		1
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		L_	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			1
	organization is licensed to issue qualified health plans			1
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	990	(2013)

332005 10-29-13

IBEW LOCAL 76 91-0268091 Form 990 (2013) 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 or note to any line in this Part VI Section A. Governing Body and Management No 1a 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 of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule 0. 0 b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision X 3 of officers, directors, or trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its governing documents 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 X 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х 7b persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a a The governing body? X b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No X 10a Did the organization have local chapters, branches, or affiliates? 10a 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? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 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 to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 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? X The organization's CEO, Executive Director, or top management official 15a  $\overline{\mathbf{x}}$ b Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X 16a 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 take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed ► NONE
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available
	for public inspection. Indicate how you made these available. Check all that apply
	Own website Another's website X Upon request Other (explain in Schedule O)
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial

statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the organization

DENNIS CALLIES -(253) 475-1192 98409

WA 3049 S 36TH STREET, SUITE 101, TACOMA,

Form **990** (2013)

### IBEW LOCAL 76 Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

Check if Schedule O contains a response or note to any line in this Part VII

**Employees, and Independent Contractors** 

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- 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

Lheck this box if neither the organization nor any related organization compensated any current officer, director, or trustee

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 heither the organization h	or arry related	orga	II IIZc	ILIOI	COI	uhe	1501	ted arry current officer, t	inector, or trustee	
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	(do		Pos		than	one	Reportable	Reportable	Estimated
	hours per	box.	, unle	ss pe	rson	ıs bot	h an	compensation	compensation	amount of
	week	offic	cer an	dad	irecto	or/trus	tee)	from	from related	other
	(list any	ctor						the	organizations	compensation
	hours for	Į.	١			2		organization	(W-2/1099-MISC)	from the
	related	stee o	ustee			eusz		(W-2/1099-MISC)		organization
	organizations	ţ	naltr		loyee	١ <u>ق</u> ۵				and related
	below	Individual trustee or director	nstitutional trustee	툦	Key employee	est of	Former			organizations
	line)	Ē	Inst	Officer	Key	Highest compensated employee	ᅙ		* H	
(1) KENNETH JENNINGS	0.50									
VICE PRESIDENT		X		Х				710.	0.	170.
(2) MIKE CHURCH	1.00									
PRESIDENT		X		Х				3,281.	0.	0.
(3) DAVE FURSTENWERTH	0.50									
EXECUTIVE BOARD MEMBER - PAST		Х		Х				280.	0.	42.
(4) DONALD MCCLELLAN	1.00									
TREASURER		X		Х				3,432.	0.	0.
(5) DALE WATERMAN	0.50									
EXECUTIVE BOARD MEMBER - PAST		Х		Х				691.	0.	42.
(6) ADRIAN BARNER	0.50									
EXECUTIVE BOARD MEMBER - PAST		Х		Х				205.	0.	0.
(7) TONY BIERWARD	0.50					Ī				
EXECUTIVE BOARD MEMBER - PAST		Х		Х	Ì			205.	0.	0.
(8) BRAD LINK	0.50									
EXECUTIVE BOARD MEMBER		Х		Х			]	410.	0.	0.
(9) CHARLES SCHROEDER	0.50				П					
EXECUTIVE BOARD MEMBER		Х		Х				410.	0.	0.
(10) JENNIFER FOSTER	0.50									
RECORDING SECRETARY		X		X				4,237.	0.	1,614.
(11) ROGER TOBIN	0.50									
EXECUTIVE BOARD MEMBER		X	ı	X				2,460.	0.	1,075.
(12) MEA FELTON	0.50					Ì			,	
EXECUTIVE BOARD MEMBER		Х		X	1			1,366.	0.	465.
(13) GREGORY ELDER	40.00							,		
RECORDING SECRETARY - PAST	-	Х		Х				48,745.	0.	26,794.
(14) CHRIS FONTANA	0.50									
EXECUTIVE BOARD MEMBER		X		X				205.	0.	0.
(15) TERRY HAGIN	0.50									
EXECUTIVE BOARD MEMBER		X		X				205.	0.	0.
(16) JEFF OLSON	0.50									
EXECUTIVE BOARD MEMBER		X		X				542.	0.	42.
(17) DENNIS CALLIES	40.00			Г	Ī		Ī			
BUSINESS MANAGER/FINANCIAL SECRETARY		1		X				101,950.	0.	46,779.
332007 10-29-13					_			-	-	Form <b>990</b> (2013)

332007 10-29-13

Form **990** (2013)

Par	Section A. Officers, Directors, Trus	tees, Key Em	ploy	<u>rees</u>	, and	<u>d Hi</u>	ghe	st C	compensated Employe	es (continuea)				
	(A)	(B)			(0	2)			(D)	(E)			(F)	
	Name and title	Average	(40		Pos			one	Reportable	Reportable		Estimated		
		hours per				ıs bot	h an	compensation compensation			amount of			
		week					from related			other				
		(list any hours for	recto			l			the	organizations			pensa	
		related	or d	98		1	sated		organization (W-2/1099-MISC)	(W-2/1099-MIS	SC)		om the	
		organizations	ruste	trust		್ಟ	nedu		(44-27 1099-141130)			_	anızatı d relate	
		below	dualt	liona		lg o	stcor	<u></u>					anızatı	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Pg.				3-		
			┪	ऻ	_	┢		_						
			1											
				T				_						
			1											
			1											
	<del>.</del>													
			1			•								
			1											
-														
			1											
	<u>-</u>	1												
		L												
1b	Sub-total							ightharpoons	169,334.		0.	7	7,0	<u>23.</u>
С	Total from continuation sheets to Part V	II, Section A						ightharpoons	0.		0.			0.
d	Total (add lines 1b and 1c)							ightharpoonup	169,334.		0.	7	7,0	23.
2	Total number of individuals (including but r	ot limited to th	nose	liste	ed al	bov	e) wl	ho r	eceived more than \$100	0,000 of reportab	le			
	compensation from the organization								<del></del>					
													Yes	No
3	Did the organization list any former officer,	•		e, ke	ey er	nplo	oyee	, or	highest compensated e	mployee on			·	
	line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4	For any individual listed on line 1a, is the si	•							•	the organization			-	
	and related organizations greater than \$15	0,000? If "Yes,	" cc	mpl	ete S	Sch	edul	e J	for such individual			4		X
5	Did any person listed on line 1a receive or							relat	ted organization or indiv	idual for services	3			
_	rendered to the organization? If "Yes," com	plete Schedu	e J	for s	uch	pers	son					5		X
	tion B. Independent Contractors													
1	Complete this table for your five highest co	•									npens	ation	rom	
	the organization Report compensation for	the calendar y	ear	end	ing v	vith	or w	/ithii		year.				
	(A) Name and business	addross	NT/	ONI	D				( <b>B)</b> Description of s	convices	_		C) nsatio	n
		addicas	TA	OM	<u> </u>				Description of			Jonnpo	- ioutio	-
									· · · · · · · · · · · · · · · · · · ·					
								-						
								$\dashv$						
								$\dashv$						
									1					
	Total number of independent contractors (	including but r	20t l	ımıta	nd +0	tho	see li	eter	t above) who received :	nore than			•	•
2	\$100,000 of compensation from the organ	-	iot II	mile	ים נט		) Se 11	315(	above, who received i	nore triall				
	w 100,000 of compensation from the organ	Lation					<del>-</del>						000 /	

332008 10-29-13

IBEW LOCAL 76 91-0268091 Form 990 (2013) Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under sections 512 - 514 (C) Unrelated Related or Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b b Membership dues 1c c Fundraising events 50,141, d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 50,141 h Total. Add lines 1a-1f Business Code 900099 247,955.1 247,955 2 a JOBS DUES AND FEES Program Service Revenue 900099 678,562. 678,562 WORKING DUES 433,268 INTERNATIONAL DUES 900099 433,268. BASIC DUES 900099 170,297. 170,297. 900099 11,911. 11,911. OTHER DUES f All other program service revenue 2,541,993. Total. Add lines 2a-2f Investment income (including dividends, interest, and 2,042. 2,042 other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (II) Personal (ı) Real 105,113. 6 a Gross rents 116,316. b Less rental expenses 11,203. c Rental income or (loss) -11,203-11,203. ▶ d Net rental income or (loss) 7 a Gross amount from sales of (i) Secunties (II) Other assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See 12,895 Part IV, line 18 11,525. b Less direct expenses 1,370 1,370. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 900099 81,561 81,561 PENSION CONTRIB REFUND MISCELLANEOUS INCOME 900099 14.005. 14.005. C d All other revenue 95,566. Total. Add lines 11a-11d

679,909.2,637,559.

0.

332009 10-29-13 Total revenue. See instructions.

>

# Form 990 (2013) IBEW LOCAL 76 Part IX Statement of Functional Expenses

	Section 501(c)(3) and 501(c)(4) organizations must complete a	Il columns All other organizations must complete column (A	).
--	---	--	----

	Check if Schedule O contains a respon	se or note to any line in			
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII	Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16	400			
4	Benefits paid to or for members	491.	-		
5	Compensation of current officers, directors,	246 257			
_	trustees, and key employees	246,357.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	406,551.			<u> </u>
8	Pension plan accruals and contributions (include	200,0021			
•	section 401(k) and 403(b) employer contributions)	147,848.			
9	Other employee benefits	85,646.			
10	Payroll taxes	53,770.			
11	Fees for services (non-employees)				
а	Management				
b	Legal	13,082.			
С	Accounting	34,725.			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses	96,385.	<del></del>		
14	Information technology				
15	Royalties				
16	Occupancy	8,398.			
17	Travel	33,539.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	2 005			
19	Conferences, conventions, and meetings	3,997.		-	
20	Interest	477,318.			
21	Payments to affiliates	44,769.			
22 23	Depreciation, depletion, and amortization Insurance	9,635.		·	
23 24	Other expenses. Itemize expenses not covered	3,0330			
	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 0.)  JOBS PROGRAM CONTRACT P	585,776.			
a	LEGISLATIVE ACTIVITY EX	27,441.			<del> </del>
b	CONTRIBUTIONS, GIFTS &	12,900.		<del></del>	<del> </del>
d	SPECIAL EVENTS EXPENSE	10,093.			
_	All other expenses			<u> </u>	
25	Total functional expenses. Add lines 1 through 24e	2,298,721.			· · ·
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)		,	<u> </u>	5

332010 10-29-13

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Form 990 (2013)
Part X Balance Sheet

Га	rt A	Daiance Sheet					
		Check if Schedule O contains a response or not	te to any lin	e in this Part X			
	•				(A) Beginning of year		<b>(B)</b> End of year
	1	Cash · non-interest-bearing			341,375.	1	797,903.
	2	Savings and temporary cash investments			884,116.	2	827,404.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and fo	ormer office	ers, directors,			
		trustees, key employees, and highest compensation	ated emplo	yees. Complete			
		Part II of Schedule L		į		5	
	6	Loans and other receivables from other disquali	ified person	ns (as defined under			
		section 4958(f)(1)), persons described in section	n 4958(c)(3)	(B), and contributing			
		employers and sponsoring organizations of sect	tion 501(c)(	9) voluntary			
ţ		employees' beneficiary organizations (see instr).	. Complete	Part II of Sch L		6	
Assets	7	Notes and loans receivable, net				7	
ä	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other					
		basis Complete Part VI of Schedule D	10a	873,791.			
	b	Less accumulated depreciation	10b	627,900.	289,633.	10c	245,891.
	11	Investments - publicly traded securities			·	11	
	12	Investments - other secunties. 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 equ	al line 34)		1,515,124.	16	1,871,198. 9,190.
	17	Accounts payable and accrued expenses			9,431.	17	9,190.
	18	Grants payable			18		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV of S	Schedule D		21	
es	22	Loans and other payables to current and former	r officers, d	lirectors, trustees,			
Ħ		key employees, highest compensated employee	es, and disc	qualified persons			
Liabilities		Complete Part II of Schedule L		<u> </u>	00 404	22	CA 551
_	23	Secured mortgages and notes payable to unrela	ated third p	parties	89,424.	23	64,551.
	24	Unsecured notes and loans payable to unrelate	•	-		24	
	25	Other liabilities (including federal income tax, pa	•				
		parties, and other liabilities not included on lines	s 17-24). Co	omplete Part X of			
		Schedule D		-	98,855.	25	73,741.
	26	Total liabilities. Add lines 17 through 25		<u> </u>	30,000.	26	13,141.
		Organizations that follow SFAS 117 (ASC 958	-	ere ▶ X and			
Ses		complete lines 27 through 29, and lines 33 and lines 33 and lines 33 and lines 35 a	na 34.	j	1,416,269.		1,797,457.
<u>la</u>	27	Unrestricted net assets		<u> </u>	1,410,207.	27	1,131,431.
Ba	28	Temporanly restricted net assets		<u> </u>		28	
Ę	29	Permanently restricted net assets	.CO 050) -			29	-
Ē		Organizations that do not follow SFAS 117 (A	(SC 958), C	neck nere			
Net Assets or Fund Balances	20	and complete lines 30 through 34.			:	20	
set	30	Capital stock or trust principal, or current funds		und -		30	
t As	31	Paid-in or capital surplus, or land, building, or ed				31	··
Š	32	Retained earnings, endowment, accumulated in	icome, or o	inter lutius	1,416,269.	33	1,797,457.
	33	Total net assets or fund balances		}	1,515,124.	34	1,871,198.
	34	Total liabilities and net assets/fund balances			1,313,124.	34	Form <b>990</b> (2013)

Form **990** (2013)

	r e e e e e e e e e e e e e e e e e e e						
	990 (2013) IBEW LOCAL 76	91-026	8091	Pag	ge <b>12</b>		
Pa	T XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,67	9,9	<u>09.</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,29				
3	Revenue less expenses Subtract line 2 from line 1	3			88.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,41	6,2	<u>69.</u>		
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.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,						
	column (B))	10	1,79	,797,457.			
Pa	rt XII Financial Statements and Reporting	-					
	Check if Schedule O contains a response or note to any line in this Part XII				X		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash Accrual X Other MODIFIE	D CASH			,		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis				١,		
b	Were the organization's financial statements audited by an independent accountant?		2b	X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,					
	consolidated basis, or both:		1 1		)		
	X Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,					
	review, or compilation of its financial statements and selection of an independent accountant?						
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt					
	Act and OMB Circular A-133?		3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b				

Form **990** (2013)

### SCHEDULE C

•

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Political Campaign and Lobbying Activities**

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

Complete if the organization is described below.
 Attach to Form 990 or Form 990-EZ.
 See separate instructions.
 Information about Schedule C (Form 990 or 990-EZ) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

Open to Public Inspection

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

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

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

<ul> <li>Section 501(c)(4), (5), or (6) organiza</li> </ul>	ations: Complete Part III			
Name of organization			Emple	oyer identification number
IBEW LO				91-0268091
Part I-A Complete if the or	ganization is exempt under	section 501(c) o	or is a section 527 or	rganization.
<ol> <li>Provide a description of the organi</li> <li>Political expenditures</li> <li>Volunteer hours</li> </ol>	zation's direct and indirect political	campaign activities in	Part IV. ►\$	6,700
Part I-B Complete if the or	ganization is exempt under	section 501(c)(3	3).	
1 Enter the amount of any excise tax			<b>→</b> \$	
2 Enter the amount of any excise tax	incurred by organization managers	under section 4955	▶\$	
3 If the organization incurred a section	on 4955 tax, did it file Form 4720 fo	r this year?		Yes No
4a Was a correction made?				Yes No
<b>b</b> If "Yes," describe in Part IV.		.1 ****		Ver
Part I-C Complete if the or	ganization is exempt under	r section 501(c),	`	c)(3).
<ol> <li>Enter the amount directly expende</li> </ol>	ed by the filing organization for secti	on 527 exempt function	on activities > \$	
2 Enter the amount of the filing orga	nization's funds contributed to othe	r organizations for sec	ction 527	<i>c</i> 700
exempt function activities			▶\$	6,700
3 Total exempt function expenditure	s Add lines 1 and 2 Enter here and	on Form 1120-POL,	<b>&gt;</b> *	6,700
line 17b  4 Did the filing organization file Form	4400 BOL familiar comp		\$	Yes X No
contributions received that were p	mployer identification number (EIN) ation listed, enter the amount paid f romptly and directly delivered to a s f additional space is needed, provid	rom the filing organiza separate political organ	ition's funds. Also enter th nization, such as a separa	e amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0-
IBEW PAC EDUCATIONAL	900 7TH ST NW			
FUND	WASHINGTON, DC 20	52-2257109	6,000.	0
COMMITTEE TO ELECT	PO BOX 2121			
VICTORIA WOODARD	TACOMA, WA 98402	26-4837945	100.	0
NATHAN FOR SENATE	PO BOX 75 GIG HARBOR, WA 98335	46-1645671	150.	0
YES ON 1-522		45 400000		
COMMITTEE	SEATTLE, WA 98101	46-1999829	250.	00
CITIZENS TO ELECT	PO BOX 112020	01 0725404	200	
STEVE CONWAY	TACOMA, WA 98411	01-0735404	200.	0

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

SEE PART IV FOR CONTINUATION

Schedule C (Form 990 or 990-EZ) 2013

332041 11-08-13

LHA

Schedule C (Form 990 or 990-EZ) 2013 IBEW	LOCAL	76		91-	0268091 Page 2
Part II-A   Complete if the organizati	on is exe	mpt under sectio	n 501(c)(3) and file	ed Form 5768	
(election under section 50	1(h)).				
A Check If the filing organization belor	ngs to an affi	liated group (and list in	Part IV each affiliated	group member's na	me, address, EIN.
expenses, and share of exce				•	-,,,
B Check ▶ ☐ If the filing organization chec		•	ovisions apply		
			Ţ	(a) Filing	(b) Affiliated group
Limits on Lob				organization's	totals
(The term "expenditures" r	neans amou	ints paid or incurred.	)	totals	
1a Total lobbying expenditures to influence pul	blic opinion (	grass roots lobbying)			
<b>b</b> Total lobbying expenditures to influence a le	egislative boo	dy (direct lobbying)			
c Total lobbying expenditures (add lines 1a ar	nd 1b)	, , ,	Ţ		
d Other exempt purpose expenditures	,		Ī		
e Total exempt purpose expenditures (add lin	es 1c and 1c	d)	Ì		
f Lobbying nontaxable amount Enter the amount		•	h columns		
If the amount on line 1e, column (a) or (b) is:		bying nontaxable am		<del></del>	
Not over \$500,000	T	the amount on line 1e			
Over \$500,000 but not over \$1,000,000	<del></del>	00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,500,000		00 plus 10% of the exc	<del></del>		
Over \$1,500,000 but not over \$17,000,000	1	00 plus 5% of the exce			
Over \$17,000,000	\$1,000,	<del>-</del>	4 1,000,000		
	<u> </u>				
g Grassroots nontaxable amount (enter 25%	of line 1f)				
h Subtract line 1g from line 1a. If zero or less,	•		Ţ		
i Subtract line 1f from line 1c If zero or less,			Ī		
j If there is an amount other than zero on eith		line 1i, did the organiz	ation file Form 4720		<u> </u>
reporting section 4911 tax for this year?		•			Yes No
	4-Year Ave	eraging Period Under	Section 501(h)	<del></del>	
(Some organizations th					
columns be	elow. See th	e instructions for line	es 2a through 2f on pa	ge 4.)	
Lob	bying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year					
(or fiscal year beginning in)	2010	<b>(b)</b> 2011	(c) 2012	( <b>d</b> ) 2013	(e) Total
2a Lobbying nontaxable amount					<del> </del>
b Lobbying ceiling amount					
(150% of line 2a, column(e))		ļ			
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount			<del>  </del>		+
(150% of line 2d, column (e))					
(1.5575 51 1115 26) 50161111 (0))			<del>                                     </del>		<del>                                     </del>
f Grassroots lobbying expenditures			_		

Schedule C (Form 990 or 990-EZ) 2013

>

## Schedule C (Form 990 or 990-EZ) 2013 IBEW LOCAL 76 91-0268091 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i be	elow, provide in Part IV a detailed description	(;	a)	(t	)
of the lobbying activity		Yes	No	Amo	ount
local legislation, including any attempt to in or referendum, through the use of a Volunteers?	Ittempt to influence foreign, national, state or fluence public opinion on a legislative matter sation in expenses reported on lines 1c through 1i)?				
c Media advertisements?					
d Mailings to members, legislators, or the put	olic?				
e Publications, or published or broadcast sta	tements?				
f Grants to other organizations for lobbying p	purposes?				
g Direct contact with legislators, their staffs,	government officials, or a legislative body?				
<ul><li>h Rallies, demonstrations, seminars, convent</li><li>i Other activities?</li></ul>	ions, speeches, lectures, or any similar means?				
j Total Add lines 1c through 1i					
2a Did the activities in line 1 cause the organiz	ation to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurr					
-	ed by organization managers under section 4912				
d If the filing organization incurred a section 4	1912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organizat 501(c)(6).	ion is exempt under section 501(c)(4), section	on 501(c)	(5), or se	ection	
				Yes	No
1 Were substantially all (90% or more) dues r	eceived nondeductible by members?		1	-	
2 Did the organization make only in-house lob	obying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carry over lob	bying and political expenditures from the prior year?		3		
	ion is exempt under section 501(c)(4), section 501(c)(4), section 50TH Part III-A, lines 1 and 2, are answered				ne 3, is
Dues, assessments and similar amounts fro	om members		1		
2 Section 162(e) nondeductible lobbying and	political expenditures (do not include amounts of political	cal			
expenses for which the section 527(f) tax	was paid).				
a Current year			2a		
<b>b</b> Carryover from last year			2b		
<b>c</b> Total			2c		
3 Aggregate amount reported in section 603	3(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 If notices were sent and the amount on line	2c exceeds the amount on line 3, what portion of the exc	cess			
	the reasonable estimate of nondeductible lobbying and p	oolitical			
expenditure next year?			4		
5 Taxable amount of lobbying and political ex Part IV Supplemental Information	1		5		
	1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group	o list), Part I	I-A, line 2, a	ınd Part II-E	3, line 1
EXPLANATION: THE LOCAL M	ADE POLITICAL EXPENDITURES FO	R POL	ITICAL		
CAMPAIGN ACTIVITIES.	<del></del>	•			
	R INCOMPLETE NAME/ADDRESS INF	ORMAT:	ION:		
YES ON 1-522 COMMITTEE	<del></del>				

332043 11-08-13

<u>Sched</u> ı	le C (Form 990	or 990-EZ) 20	13 IBEV	N LOCAL 7 1 (continued)	6	<del></del>		91-0268091	Page 4
Part	IV   Supple	mental Info	rmatior	(continued)					
603·	стемарт	STREET	#819	SEATTLE,	WΔ	98101			
003	DILIMILL	DIREBET	"015	DENTI LEE,	****	30101			
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									· · · · ·

### SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990) ·

Supplemental Financial Statements

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

► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.urs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

IBEW LOCAL 76

Employer identification number 91-0268091

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts.Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		· · · · · · · · · · · · · · · · · · ·
2	Aggregate contributions to (during year)		-
3	Aggregate grants from (during year)		
4	Aggregate value at end of year	_	
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed 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 a		e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	e conferring
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990,	Part IV, line 7
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)	
	Preservation of land for public use (e.g., recreation or	education) Preservation of an hi	storically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied 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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struc-	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	<del></del>
	violations, and enforcement of the conservation easements	t holds?	└── Yes └── No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abor-	ve satisfy the requirements of section 17	
	and section 170(h)(4)(B)(ii)?		└ Yes
9	In Part XIII, describe how the organization reports conservat	•	
	include, if applicable, the text of the footnote to the organization	ition's financial statements that describes	s the organization's accounting for
<b></b>	conservation easements	4 Aut Historical Tuescours and	Ah an Cimallan Appata
Pai	Till Organizations Maintaining Collections o		other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ex		ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr		
þ	If the organization elected, as permitted under SFAS 116 (AS	•	
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pi	ublic 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, historical tre		al gain, provide
	the following amounts required to be reported under SFAS 1	116 (ASC 958) relating to these items:	<b>.</b>
a	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		<b>▶</b> \$

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

Schedule D (Form 990) 2013

	dule D (Form 990) 2013 IBEW LO								68091	
Par	t III Organizations Maintaining C	collections of A	rt, Hist	torical Tr	easures, o	or Other	Simila	ar Asse	<b>ts</b> (continue	d)
3	Using the organization's acquisition, accessi	on, and other record	is, checl	any of the	following tha	t are a sig	nificant i	use of its	collection it	ems
	(check all that apply)									
а	Public exhibition	c	╸╚	Loan or excl	hange progra	ams				
b	Scholarly research	e	. 🗀	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ney further tl	he organızatı	on's exem	pt purpo	se in Par	t XIII	
5	During the year, did the organization solicit o	r receive donations	of art, hi	storical trea	sures, or oth	er sımılar a	assets			
	to be sold to raise funds rather than to be ma	aintained as part of	the orga	nization's co	ollection?				Yes	No_
Par	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered '	"Yes" to F	orm 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Par	rt X, line 21			<u>-</u> .					
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	s or other as	sets not i	ncluded	_	_ ,	
	on Form 990, Part X?								J Yes □	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	able						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	217					<u> </u>	JYes ļ	No
	If "Yes," explain the arrangement in Part XIII									
Par	t V Endowment Funds. Complete	f the organization ar	swered	"Yes" to Fo	rm 990, Part				•	
		(a) Current year	(b) P	rior year	(c) Two year	rs back (c	<b>J)</b> Three y	ears back	(e) Four ye	ars back
1a	Beginning of year balance									
b	Contributions									
C	Net investment earnings, gains, and losses									
d	Grants or scholarships		ļ	<del></del>						
е	Other expenditures for facilities		1							
	and programs									
f	Administrative expenses		ļ <u>.</u>							
g	End of year balance									
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a	a)) held as					
а	Board designated or quasi-endowment		_%							
Ь	Permanent endowment >	%								
С	Temporanly restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c should	· ·								
3a	Are there endowment funds not in the posse	ession of the organiz	ation the	at are held a	ınd admınıste	ered for the	e organiz	zation	_	
	by								Ye	s No
	(i) unrelated organizations								3a(i)	+
	(ii) related organizations								3a(ii)	+
b	If "Yes" to 3a(II), are the related organizations	•							3b	
4	Describe in Part XIII the intended uses of the		owment	funds						
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answere	1								
	Description of property	(a) Cost or o			or other		cumulate		(d) Book v	alue
		basis (investi	ment)		(other)	аері	reciation		0.5	000
	Land				5,000.		27 7	62		000.
	Buildings				5,000.		$\frac{32,0}{60,1}$			938.
	Leasehold improvements				5,758.		$\frac{60,1}{94,9}$		93,	584.
	Equipment	<u> </u>	-		5,292. 2,741.		94,8 40,7		11	955.
	Other		V cst				±0,/	<del></del>		891.
ı ota!	. Add lines 1a through 1e (Column (d) must e	quai Form 990, Pan	. A, COIUI	ии (в), ипе т	(U(C) )				447	. U J I •

Schedule D (Form 990) 2013

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(a) Description of security or category (including name of security)	(b) Book value			I-of-year market value
	(b) Book value	(c) Welliod of V	Valuation Cost of end	
(1) Financial derivatives				<del>_</del>
(2) Closely-held equity interests				
(3) Other				
	1		<u> </u>	<del></del>
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)			•	· ·
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related.		·		
Complete if the organization answered "Yes"	to Form 000 Port IV	line 11c See Form 990	Part V line 13	
(a) Description of investment	(b) Book value			d-of-year market value
	(B) Book value	(O) Modrod of t	raidation cost of one	201 your market raids
(1)		<del></del>		
(2)	ļ	····		<del></del>
(3)				
(4)				·
(5)				
(6)				
(7)				
(8)				-
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes"	to Form 990, Part IV	, line 11d See Form 990,	Part X, line 15	
	Description			(b) Book value
(1)			•	
(2)				
(3)				
(4)				
(5)				
(6)	· · · · · · · · · · · · · · · · · · ·			
(7)			-	
(8)	<del></del>	_		
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) lin	ne 15)		▶	
Part X Other Liabilities.				
Complete if the organization answered "Yes"	to Form 990, Part IV		n 990, Part X, line 25	•
1. (a) Description of liability		(b) Book value	_	
(1) Federal income taxes				
(2)				
(3)				
(4)		<del></del>		
(5)				
(6)			7	
(7)			1	
(8)			1	
(9)			1	
	ne 25 )		1	
Total. (Column (b) must equal Form 990, Part X, col (B) Irr		ate to the assessment of	francial statement	that range at the
2. Liability for uncertain tax positions. In Part XIII, provid				
organization's liability for uncertain tax positions unde	F FIN 48 (ASC 740)	neck nere if the text of the		<u> </u>
			Sch	edule D (Form 990) 2013

332053 09-25-13

Schedule D (Form 990) 2013

116,316.

RENTAL EXPENSES

Schedule D (Form 990) 2013 IBEW LOCAL 76	91-0268091 Page 5
Part XIII   Supplemental Information (continued)	
FUNDRAISING EXPENSE	11,525.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	127,841.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
RENTAL EXPENSES	116,316.
FUNDRAISING EXPENSE	11,525.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	127,841.
	<del></del>
	<del>.</del>
·	

### 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.

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

Inspection

Name of the organization

IBEW LOCAL 76

**Employer identification number** 91-0268091

FORM 990, PART VI, SECTION A, LINE 6: EXPLANATION: THE ORGANIZATION HAS THREE DIFFERENT TYPES OF MEMBERS - A, BA AND AP. ONLY (A) AND (BA) MEMBERS POSSESS FULL VOTING RIGHTS TO ELECT THE MEMBERS OF THE GOVERNING BODY, TO APPROVE SIGNIFICANT DECISIONS OF THE GOVERNING BODY AND TO RECEIVE A SHARE OF THE ORGANIZATION'S PROFITS OR EXCESS DUES UPON THE ORGANIZATION'S DISSOLUTION. AN (A) MEMBER IS A MEMBER WITH INTERNATIONAL UNION PENSION/DEATH BENEFITS; A (BA) MEMBER IS A MEMBER WITHOUT IO PENSION/DEATH BENEFITS: AND AN (AP) MEMBER IS A PARTICIPANT WHO HAS SUBMITTED AN APPLICATION TO BECOME A MEMBER.

FORM 990, PART VI, SECTION A, LINE 7A:

EXPLANATION: (A) AND (BA) MEMBERS ARE ELIGIBLE TO VOTE IN THE ELECTION OF GOVERNING BODY MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7B:

EXPLANATION: (A) AND (BA) MEMBERS ARE ELIGIBLE TO APPROVE DECISIONS OF THE GOVERNING BODY AS SET FORTH IN THE BY-LAWS.

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: THE FORM 990 WAS REVIEWED BY THE EXECUTIVE BOARD WHEN IT WAS COMPLETED AND FILED.

FORM 990, PART VI, SECTION B, LINE 15:

EXPLANATION: COMPENSATION FOR MANAGEMENT IS IN ACCORDANCE WITH THE BYLAWS OF THE ORGANIZATION.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 332211 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Part

Related Organizations and Unrelated Partnerships

▶Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

2013	Open to Public Inspection .

OMB No 1545-0047

Employer identification number 91-0268091

▶Information about Schedule R (Form 990) and its instructions is at www irs gov/form990.

Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33

IBEW LOCAL 76

Direct controlling entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year ε End-of-year assets (e Total income Ē Legal domicile (state or foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity Part II

	( <b>q</b> )	(3)	( <del>b</del> )	(e)	9	(a)	
		(2)			:	Section 5	2(b)(13)
Primary activity		Legal domicile (state or	Exempt Code		Direct controlling	controlled	led
		foreign country)	section	status (if section	entity	entity?	/ع
				501(c)(3))		Yes	No
TO PROVIDE HEALTH AND							
WELFARE BENEFITS TO							
ELIGIBLE PARTICIPANTS		WASHINGTON	502(C)(9)				×
<del>,</del>							
				_			
Γ				-			

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

332161 09-12-13 LHA

Schedule R (Form 990) 2013

Page 2

91-0268091

Schedule R (Form 990) 2013 IBEW LOCAL 76

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year

		;		-	-				-		:	
(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or	(d) Direct controlling entity	(e) Predominant income (related, unrelated,		(r) Share of total income	(g) Share of end-of-year	(n) f Disproportionate ar allocations?		(I) Code V-UBI mount in box	General o	General or Percentage managing ownership
		foreign country)		excluded from tax under sections 512-514)	m tax under 512-514)		assets	Yes		20 of Schedule K-1 (Form 1065)	) Yes No	
									_			
						- <del>-</del>						
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						_						
												1
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						_						
				_		_						
						_						
						_						
											-	
Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related	Janizations Taxable a	is a Corp	oration or Trust Col	mplete if the	organization	answered "Yes	" on Form 99	0, Part IV, IIr	ne 34 bec	ause it had o	one or mo	re related
			, de 1		1	3	-	9		1	(4)	[
(a)					<del>(</del> )			Ε	_		Ē	
Name, address, and EIN	<b>z</b> ,	Prim	Primary activity	Legal domicile (state or	Direct controlling	ling Type of entity		Share of total	Sha	Share of Pe	Percentage ownership	512(b)(13) controlled
					(man)				asi			er ;
						+						Tes No
												•
						+						
										_		
			_									
			-									
			-									
332162 09-12-13				29						Schedul	le R (For	Schedule R (Form 990) 2013

# Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	-			Yes	ş V
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-1V >	s with one or more re	elated organizations listed	In Parts II-IV		<b>;</b>
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a	4
<b>b</b> Gift, grant, or capital contribution to related organization(s)				1p	×
c Gift, grant, or capital contribution from related organization(s)				10	×
d Loans or loan quarantees to or for related organization(s)				1d	×
				16	×
				2	
f Dividends from related organization(s)				<b>=</b>	×
				7	×
				n #	×
II ruciase of assets figure each of garden (s)				E 4	: ×
<ul> <li>Exchange of assets with related organization(s)</li> </ul>				= :	4 >
<ul> <li>j Lease of facilities, equipment, or other assets to related organization(s)</li> </ul>				-	4
k Lease of facilities, equipment, or other assets from related organization(s)				*	×
1 Performance of services or membership or fundraising solicitations for related organization(s)	ınızatıon(s)			=	×
m Performance of services or membership or fundraising solicitations by related organization(s)	ınızatıon(s)			<b>1</b> m	×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	on(s)			t t	×
o Sharing of paid employees with related organization(s)				10	×
Reimburcement paid to related organization(s) for expenses					×
Rembursement paid by related organization(s) for expenses				- 5	×
r Other transfer of cash or property to related organization(s)				<b>+</b>	×Þ
s Other transfer of cash or property from related organization(s)				l SL	4
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete the	is line, including covered	relationships and transaction thresholds		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	Involved	
(1)					
(2)					
(4)					İ
(5)					
332163 09-12-13	30		Schedul	Schedule R (Form 990) 2013	) 2013

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(k) rcentage vnership		•			Schodule D (Form 000) 2013
General or Pe managing partner? Ov	 				
Gen Gen 7-1					ا ا
Code V-UBI General or Percentage amount in box 20 parner? of Schedule K-1 Form 1065) Yes No					bada
Disproportionate allocations?					
(g) Share of end-of-year assets					
(f) Share of total Income					
(e) Are all partners sec 501(c)(3) orgs ? Yes No	 				
me part d, 56 514) Ye					
Predominant income partiers sec (related, unrelated, 50/1c(3) excluded from tax under section 512-514) yes No					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					
(a) (b) (c) (c) (c) (d) (d) (e) (d) (e) (d) (e) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e					

2013 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

Asset	Description	Date Acquired Method	hod	le	Line	Unadjusted Eost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	BUILDINGS											
7	NG TO TO	070179SL	<u>.</u>	00 1	9	385,000.			385,000.	322,437.	_	9,625.
	* 990 PAGE 10 TOTAL BUILDINGS FIRNITHIRE &		- <u>-</u>			385,000.		0	385,000.	322,437.	0	9,625.
,	į.	VARIESSL	<u>.</u>	00	16	52,741.			52,741.	34,317.		6,469.
	JRNITURE &					52,741.		0	52,741.	34,317.	0	6,469.
	MACHINEKI & EQUIPMENT									ί		
. 1	1AUTOMOBILES	VARIESSL	00.	0	16	95,292.			95,292.	90,351.		4,527.
_	* 990 PAGE 10 TOTAL MACHINERY & EQUIPM		•			95,292.		0	95,292.	90,351.	0	4,527.
	LAND		·									
	t 1	070779L				85,000.			85,000.		, i	0
	. 990 FAGE IO IOIAL LAND					85,000.		0	85,000.	0	0	0
<u></u>	PROGRAM SERVICES											
	JILDING APROVMENTS	VARIESSL	0.	00 1	9	255,758.			255,758.	136,026.		24,148.
	∢C.					255,758.		0.	255,758.	136,026.	0	24,148.
	GRAND TOTAL AGE 10 DEPR			<del>-</del>		873,791.		0	873,791.	583,131.	0	44,769.
328102 05-01-13			$\dashv$		(D) · A	(D) - Asset disposed		, ITC	, Section 179, Salv	* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction	nercial Revital	ization Deduction



Form **8868** (Rev. January 2014)

Department of the Treasury

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

File a separate application for each return.

OMB No 1545-1709

rugual Keve	nus Service	► information about Form 886	s and its i	nstructions is at www.irs.gov/form	18868.	ì			
• If you a	re filing for an Aut	omatic 3-Month Extension, complete	e only Par	t I and check this box			. ► X		
		litional (Not Automatic) 3-Month Ext							
Do not co	emplete Part II un	less you have already been granted a	n automat	ic 3-month extension on a previous	ly filed Forr	n 8868.			
Electroni	c filing (e-file). Yo	u can electronically file Form 8868 if ye	ou need a	3-month automatic extension of time	e to file (6 :	months for a	corporation		
required t	o file Form 990-T),	or an additional (not automatic) 3-mon	th extensi	on of time. You can electronically fil	le Form 886	8 to request	an extension		
		ns listed in Part I or Part II with the exc							
		which must be sent to the IRS in paper							
		lick on e-file for Charities & Nonprofits							
Part I	Automati	c 3-Month Extension of Time	. Only s	ubmit original (no copies ne	eded).				
A corpora	tion required to fil	e Form 990-T and requesting an auton	atic 6-mo	nth extension - check this box and o	complete				
Part I only	/ , ,						▶ 🗀		
All other o		ding 1120-C filers), partnerships, REMi							
to file inco	ome tax returns.			·	Enter filer	's identifying	number		
Type or	Name of exemp	ot organization or other filer, see instruc	ctions.		Employer	identification i	number (EIN) or		
print					, ,				
Eda bu tha	IBEW_LOCAL_76 91-026809						3091		
due date for	•	, and room or suite no. If a P.O. box, se		tions.	Social sec	urity number	(SSN)		
filing your return See		town or post office, state, and ZIP code. For a foreign address, see instructions.							
instructions.	1		reign add	ress, see instructions.					
	TACOMA,	WA 98409							
							المنتسا		
Enter the	Return code for t	he return that this application is for (file	a separat	te application for each return)			0 1		
							<del></del>		
Applicat	ion		Return	Application			Return		
ls For			Code	ls For			Code		
Form 990	or Form 990-EZ		01	Form 990-T (corporation)			07		
Form 990	)-BL		02	Form 1041-A			08		
	20 (individual)		03	Form 4720 (other than individual)			09		
Form 990	<del></del>		04	Form 5227			10		
	D-T (sec. 401(a) or		05	Form 6069			11		
Form 990	OT (trust other tha		06	Form 8870			12		
		DENNIS CALLIES				00400			
		re of ► 3049 S 36TH ST	REET,		A, WA	98409			
		53) 475-1192		Fax No.		<del></del>	. [		
		not have an office or place of busines					. ▶ └-		
	<del></del>	rum, enter the organization's four digit	7						
box 🕨		int of the group, check this box				ers the extens	ion is for.		
1 ire	•	tic 3-month (6 months for a corporation	•	•					
_	AUGUST 1		ot organiza	ation return for the organization nam	ed above.	The extension	ı		
	for the organizatio								
<b>•</b>	X calendar yea								
	tax year beg	inning	, ar	nd ending		<u> </u>			
2 lf 1	<del></del>	ed in line 1 is for less than 12 months, o	check reas	son Initial return	Final retur	n			
		ounting period			<del></del>	<del></del>			
		for Forms 990-BL, 990-PF, 990-T, 4720	), or 6069,	enter the tentative tax, less any		_	0		
		ts. See instructions.			3a_		0.		
		for Forms 990 PF, 990 T, 4720, or 606					_		
_		ents made. Include any prior year over			3b_	\$	0.		
		act line 3b from line 3a. Include your p	-		Ì		•		
		ctronic Federal Tax Payment System).			3c	L <b>\$</b>	<u> </u>		
Caution		to make an electronic funds withdrawa	ı (direct de	ebit) with this Form 8868, see Form	8453-EO a	nd Form 8879	-EO for payment		
สารแบบไ	y. 10.								