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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 private foundations)

2013

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	2013 calendar year, or tax year beginning JUL_1, 2013 and	enaing L	<u> 10N 30, 2014</u>	
В	Check if	C Name of organization		D Employer identific	cation number
	applicable	INTERNATIONAL BROTHERHOOD OF ELECTRIC	\mathtt{AL}		
	Addres	WORKERS 1253 LOCAL		_	
L	Name change	Doing Business As		01-0	<u> 226195 </u>
L	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	1 '	
	Termin ated	176 MAIN STREET		207-	<u>453-1301</u>
	Amend return	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	<u>354,965.</u>
	Application	FAIRFIELD, ME 04937		H(a) Is this a group re	
	pendin	F Name and address of principal officer CHARLES FRASER		for subordinates	າ ∐Yes X No
		SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No
$\overline{\Gamma}$	Tax-exe	mpt status	or 527	If "No," attach a	list. (see instructions)
J	Websit	e:▶ WWW.IBEW1253.ORG		H(c) Group exemption	n number ▶ 0064
K	Form of	organization: X Corporation Trust Association Other	L Year	of formation: 1946 N	State of legal domicile: ME
		Summary			
_	1	Briefly describe the organization's mission or most significant activities. ${f TO}$ ${f C}$	ARRY (OUT THE BETT	ERMENT OF
Governance		CONDITIONS FOR WORKERS, THE IMPROVEMENT			
rna	2	Check this box If the organization discontinued its operations or dispo			
) Ve	3	Number of voting members of the governing body (Part VI, line 1a)		3	10
		Number of independent voting members of the governing body (Part VI, line 1b)		4	10
Activities &	5	Fotal number of individuals employed in calendar year 2013 (Part V, line 2a)		5	4
/itie	6	Total number of volunteers (estimate if necessary)		6	0
Ę	7a	Fotal unrelated business revenue from Part VIII, column (C), line 12		7a	0.
ď		Net unrelated business taxable income from Form 990-T, line 34		7b	0.
	1			Prior Year	Current Year
4	8	Contributions and grants (Part VIII, line 1h)		0.	0.
nue	9	Program service revenue (Part VIII, line 2g)		645,705.	351,898.
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		712.	2,801.
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	_	2,954.	266.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		649,371.	354,965.
_	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
10	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		258,979.	259,760.
Se	160	Professional fundraising fees (Part IX, column (A), line 11e)	-	0.	0.
Expenses	h	Total fundraising expenses (Part IX, column (D), line 25)	o. 🗀		
X	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		178,884.	177,352.
		Total expenses Add lines 13-17 (must equal Part IX, column-(A),-line-25)		437,863.	437,112.
		Revenue less expenses. Subtract line 18 from line 12 RECEIVED	-	211,508.	-82,147.
<u> </u>	g 19	nevenue less expenses. Subtract line 10 nom line 12	701	eginning of Current Year	End of Year
ets (g 20	Total assets (Part X, line 16)		532,289.	448,639.
SSC	20	Total assets (Part X, line 16) Total liabilities (Part X, line 26)	K	4,394.	5,381.
Net Assets or	21	Net assets or fund balances Subtract line 21 from line 20	그딸는	527,895.	443,258.
i ii	≘∣ <u>22</u> Part II	Signature Block OGDEN, UT	1	321,033.	143,2301
· 🗀		Ities of perjury, I declare that I have examined this return, including accompanying schedul	ec and state	ments, and to the hest of m	w knowledge and belief it is
		t, and complete Declaration of preparer (other than officer) is based on all information of w			y knowledge and belief, it is
<u> </u>	e, correc		rillon prepart	ti ilas any knowledge.	
ί _		Signature of officer		Date	
Sig	="			11-14	-14
) He	re	CHARLES FRASER, BUSINESS MANAGER Type or print name and title			
ļ —				Date Check	PTIN
Pa	id	Print/Type preparer's name Preparer's signature	ا . د	illiqliq if self-employ	
•		LISA DUNBAR FUNDIS COMPANIA DE LA COMPANIA DEL LA COMPANIA DE LA COMPANIA DE LA COMPANIA DEL LA COMPAN			01-0440155
1	eparer o Only	Firm's name RUNYON KERSTEEN OUELLETTE		Firm's EIN	01-0440133
1 08	e Only	Firm's address 20 LONG CREEK DRIVE SOUTH PORTLAND, ME 04106		Dhana na 2 O	7-773-2986
	ab - 14			į monė no. 2 0	X Yes No
<u>M</u> 8	ay ine li	RS discuss this return with the preparer shown above? (see instructions)	_		LALITES LINO

Form 990 (2013) WORKERS 1253 LOCAL 01-0226195 Page 2 Part III | Statement of Program Service Accomplishments \mathbf{X} Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: THE OBJECTIVES OF THE INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS ARE TO ORGANIZE ALL WORKERS IN THE ENTIRE ELECTRICAL INDUSTRY IN THE UNITED STATES AND CANADA, INCLUDING ALL THOSE IN PUBLIC UTILITIES AND ELECTRICAL MANUFACTURING, INTO LOCAL UNIONS; TO PROMOTE REASONABLE Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes." describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported) (Expenses \$ including grants of \$) (Revenue \$ ARBITRATE & NEGOTIATE FOR MEMBERS. ADMINISTRATION OF THE MARKET RECOVERY PROGRAM FOR PROMOTING THE ORGANIZED ELECTRICAL CONSTRUCTION INDUSTRY WITHIN THE LOCAL JURISDICTION. (Code _____) (Expenses \$__ _____including grants of \$ Other program services (Describe in Schedule O.) including grants of \$) (Revenue \$

INTERNATIONAL BROTHERHOOD OF ELECTRICAL

Total program service expenses ▶

Form 990 (2013) WORKERS 1253 LOCAL
Part IV Checklist of Required Schedules

			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	-	X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		_ <u></u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	3		х
4	public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
7	duning 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	•		
Ū	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		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	40		X_
11	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		
• •	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
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 167 If "Yes," complete Schedule D, Part VII	11b	X	
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		X
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
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		
'	the organization's separate of consolidated limit class 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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		_X_
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	X
14a		14a		X
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	446		_v
46	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b	-	X
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	1	х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	"		1
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>

Form 990 (2013) WORKERS 1253 LOCAL
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			**
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> X</u>
22	Did the organization report more than \$5,000 of grants or 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		X
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			
	Schedule J	23		<u>X</u> _
24a	·			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			.,
	Schedule K If "No", go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	_	
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	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			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial]
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions).			
а		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		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
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
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_	ļ	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			-
	Part V, line 1	34	X	ļ
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			1
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	X	<u> </u>
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_	<u> </u>	<u> </u>
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	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	[1	1
	Note, All Form 990 filers are required to complete Schedule O	38	X	
		Forn	990	(2013

WORKERS 1253 LOCAL

01-0226195 Page **5**

Га	LV	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	1a	1 0					
		the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0					
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
		oling) winnings to prize winners?	•		1c	Х			
2a		the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,							
		or the calendar year ending with or within the year covered by this return	2a	4					
b		ast one is reported on line 2a, did the organization file all required federal employment tax retu	rns?		2b	Х			
	Note.	If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)						
За	Did the	e organization have unrelated business gross income of \$1,000 or more during the year?			За		Х		
b	If "Yes	s," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b				
4a	At any	γ time during the calendar year, did the organization have an interest in, or a signature or other	autho	rıty over, a					
	fınanc	ial account in a foreign country (such as a bank account, securities account, or other financial	ассоц	int)?	4a		Х		
b	If "Yes	s," enter the name of the foreign country: >							
	See in	structions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Ассог	ints					
5a	Was th	he organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х		
b	Did an	ny taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	action	7	5b		Х		
C	If "Yes	s," to line 5a or 5b, did the organization file Form 8886-T?			5c				
6a	Does t	the organization have annual gross receipts that are normally greater than \$100,000, and did t	he org	anızatıon solıcıt					
	•	ontributions that were not tax deductible as charitable contributions?			6a		Х		
b	If "Yes	s," did the organization include with every solicitation an express statement that such contribu	tions (or gifts					
		not tax deductible?			6b				
7	_	nizations that may receive deductible contributions under section 170(c).		_					
		corganization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices	provided to the payor?	7a 7b		X		
С		e organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as rec	luired			3.7		
		Form 8282?	١ ـ .	1	7c		X		
		s," indicate the number of Forms 8282 filed during the year	7d	-+0			v		
_		e organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		CLY	7e		X		
f		e organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont organization received a contribution of qualified intellectual property, did the organization file F		ROO as required?	7f 7g		Λ		
g h		organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization like F			7 <u>9</u> 7h				
8		oring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D			 '''				
Ü		zation, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at			8				
9	-	soring organizations maintaining donor advised funds.	uny in	ne during the year.	۰				
а		e organization make any taxable distributions under section 4966?			9a				
		e organization make a distribution to a donor, donor advisor, or related person?			9b				
10		on 501(c)(7) organizations. Enter							
а	Initiati	on 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		1				
11	Section	on 501(c)(12) organizations. Enter:							
а		income from members or shareholders	11a						
b	Gross	income from other sources (Do not net amounts due or paid to other sources against							
	amoui	nts due or received from them.)	11b						
12a	Section	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a				
b	If "Yes	s," enter the amount of tax-exempt interest received or accrued during the year	12b						
13	Section	on 501(c)(29) qualified nonprofit health insurance issuers.			ļ	<u> </u>			
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	1		1			
	organ	ization is licensed to issue qualified health plans	13b						
		the amount of reserves on hand	13c	L	ļ		ļ		
		e organization receive any payments for indoor tanning services during the tax year?			14a		X		
<u> </u>	If "Yes	s," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	le O		14b				

INTERNATIONAL BROTHERHOOD OF ELECTRICAL Form 990 (2013) WORKERS 1253 LOCAL 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 Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 10 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 10 b Enter the number of voting members included in line 1a, above, who are independent 1b 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? 2 3 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Did the organization have members or stockholders? 6 X Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, 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 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 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 X 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 Did the organization have a written whistleblower policy? 13 13 X 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a 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 taxable entity during the year? 16a 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 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 ▶ME
- 8 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 X 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 ► CHARLES FRASER − 207-453-1301

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Form 990 (2013) WORKERS 1253 LOCAL

01-0226195

Page 7

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

Employees, and independent Contractors		
Check if Schedule O contains a response or note to any	y line in this Part VII	

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization		d organization compensa				mper	nsat	ted any current officer, o	director, or trustee	
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	(do		Pos heck		i than	eno	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot or/trus	h an	compensation	compensation	amount of
	week	-			1,000	,,,,,,	100)	from	from related	other
	(list any hours for	giect						the organization	organizations (W-2/1099-MISC)	compensation from the
	related	9	ste		İ	sate		(W-2/1099-MISC)	(***271033181100)	organization
	organizations	Individual trustee or director	institutional trustee		yee	E E		(,		and related
	below	dduat	tetto	=	ğ	est co	5			organizations
	line)	Ę	fast	Officer	Key	Highest compensated employee	뎚		_	
(1) NICHOLAS PAQUET	2.00									
PRESIDENT		X		X				0.	0.	0.
(2) CHARLES YOUNG	1.00									
VICE PRESIDENT		X		X				0.	0.	0.
(3) HARRY LYONS	1.00									
TREASURER		X		X				0.	0.	0.
(4) TIM FADER	2.00									
RECORDING SECRETARY		X		X				0.	0.	0.
(5) COLIN CLARK	1.00									
EXECUTIVE BOARD		X						0.	0.	0.
(6) MIKE CORCORAN	1.00									-
EXECUTIVE BOARD		X						0.	0.	0.
(7) JOHN WEED	1.00									
EXECUTIVE BOARD		X						0.	0.	0.
(8) CHARLES FRASER	40.00									
FINACIAL SECRETARY/BUSINESS M		X		X			$oxed{oxed}$	27,913.	0.	5,663.
(9) LEE WHITAKER	1.00									
EXECUTIVE BOARD		X		L			<u> </u>	0.	0.	0.
	_	ļ								
		ļ			<u> </u>					
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		<u>l</u>	<u> </u>				L	I	l	

			Yes	No
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	_ 3		<u> X</u>
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes," complete Schedule J for such person	5		X
200	stion B. Independent Contractors			

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from									
	the organization. Report compensation for the calendar year ending with or within the organization's tax year									
	(A) (B) (C)									
	Name and business address	NONE	Description of services	Compensation						

 Name and business address	NONE	Description of services	Compensation		
er of independent contractors (including but f compensation from the organization	ut not limited to those li	sted above) who received more than			

Form 990 (2013) Part VIII **Statement of Revenue**

		Check if Schedule O cont	ains a response	or note to any line				
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts ts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
Š,	С	Fundraising events	1c					
ᆵ	d	Related organizations	1d					
S.E	е	Government grants (contribut	ions) 1e					
r Sign	f	All other contributions, gifts, gran	ts, and					
불		similar amounts not included abo	ve 1f					
들임	g	Noncash contributions included in lines	1a-1f \$					
<u>ခို လိ</u>	h	Total. Add lines 1a-1f		•				
				Business Code				
e	2 a	MEMBERSHIP DUES	<u> </u>	900099	351,898.	351,898.		
<u>ه چَ</u>	b							
Program Service Revenue	c							
le 3	d							
5, I	е	·						
ا -	f	All other program service reve	nue					
—	g	Total. Add lines 2a-2f		•	351,898.			
	3	Investment income (including	dividends, inter	est, and				
		other sımılar amounts)		▶	2,801.			2,801.
	4	Income from investment of tax	x-exempt bond p	oroceeds 🕨				
	5	Royalties		<u> </u>				
			(i) Real	(ii) Personal				
ł	6 a							
·	b	Less rental expenses						
	С	` '		L				1
	d	, ,		<u> </u>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory		-				
	b	Less: cost or other basis		1				
l		and sales expenses		1				}
	С	, ,						
	d	• , ,			-			
E I	8 a	Gross income from fundraisin	•					
ē		including \$	 "					
Other Reve		contributions reported on line						
횰		Part IV, line 18	a					
ᅙ		Less: direct expenses	. b	'				
		Net income or (loss) from fund	-					
	9 а	Gross income from gaming ad						1
		Part IV, line 19 Less direct expenses	a					
- 1	b	 Less direct expenses Net income or (loss) from garr 	b bas cotuutios	'				
		Gross sales of inventory, less	_					
i	io a	and allowances		254.				
	h	Less cost of goods sold	a b					
		: Net income or (loss) from sale		, <u> </u>	254.			254.
ł	<u> </u>	Miscellaneous Revenu		Business Code	<u> </u>			454.
	11 ^	MISCELLANEOUS		900099	12.	12.		
ļ	ıı a	`		70007	12.	12.		
-			···					+
	d					 		
		Total. Add lines 11a-11d			12.			†
	12	Total revenue. See instructions.	•	. [354,965.	351,910.	0	3,055.
33200 10-29	9						×	Form 990 (2013)

Form 990 (2013)

Form 990 (2013) WORKERS 1253 LOCAL
Part IX Statement of Functional Expenses

Secti	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)									
	Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b (A) (B) (C) (D)									
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	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				i I					
	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									
5	Compensation of current officers, directors,									
	trustees, and key employees	83,512.								
6	Compensation not included above, to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)	400 556		-						
7	Other salanes and wages	109,556.								
8	Pension plan accruals and contributions (include	10 004								
	section 401(k) and 403(b) employer contributions)	18,084.								
9	Other employee benefits	24,808.			-					
10	Payroll taxes	23,800.								
11	Fees for services (non-employees)									
_	Management									
b	Legal	9,125.								
	Accounting	9,143.								
d	Lobbying Professional fundraising services. See Part IV, line 17									
e f	Investment management fees									
g	Other (If line 11g amount exceeds 10% of line 25,									
y	column (A) amount, list line 11g expenses on Sch 0.)									
12	Advertising and promotion	3,979.		 						
13	Office expenses	16,636.	·- ·							
14	Information technology				-					
15	Royalties									
16	Occupancy	10,800.								
17	Travel	6,731.								
18	Payments of travel or entertainment expenses	•								
	for any federal, state, or local public officials				i					
19	Conferences, conventions, and meetings	1,247.								
20	Interest .									
21	Payments to affiliates .									
22	Depreciation, depletion, and amortization	3,102.								
23	Insurance .	9,703.								
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)									
а	PER CAPITA TAX	86,002.								
ь	VEHICLE EXPENSE	12,230.								
С	OTHER	11,184.								
d	REPAIRS AND MAINTENANCE	4,160.								
е	All other expenses	2,453.	-							
25	Total functional expenses. Add lines 1 through 24e	437,112.								
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)				I					

Form 990 (2013)

01-0226195 Page 11

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 238,462 106,753. 1 Cash - non-interest-bearing 1 252,619. 305,419. 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 4 4 Accounts receivable, net 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 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 instr) Complete Part II of Sch L Notes and loans receivable, net 7 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 54,556. basis Complete Part VI of Schedule D 10a 43,361 13,446. 11,195. Less accumulated depreciation 10b Investments - publicly traded securities 11 11 $25, 2\overline{72}$. 27,762. 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 15 532,289 448,639. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 4,394. 5,381. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 394 381. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 527,895 443,258. 27 Unrestricted net assets 27 Temporarily restricted net assets 28 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 527,895 443,258. 33 Total net assets or fund balances 33 448.639. 532,289 Total liabilities and net assets/fund balances

orm	1990 (2013) WORKERS 1253 LOCAL	01-02	70TA2	Pag	ge 12
Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>65.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	43	7,1	<u> 12.</u>
3	Revenue less expenses Subtract line 2 from line 1	3	<u> </u>	2,1	<u>47.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	52	<u>7,8</u>	<u>95.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	_6			
7	Investment expenses	7		_	
8	Pnor period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		<u>2,4</u>	<u>90.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	44	<u>3,2</u>	<u>58.</u>
Pa	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				لتيا
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	ļ
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a	1 1		
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
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 separa	te basis,			
	consolidated basis, or both:				
	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 audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	<u>X</u>	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				1
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ngle Audıt			
	Act and OMB Circular A-133?		3a		X
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ured audit			I

Form **990** (2013)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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 www.irs.gov/form990.

2013

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

• Secti	on 501(c)(4), (5), or (6) organizat	ions: Complete Part III.	,		
		TIONAL BROTHERHO	OD OF ELECT	RICAL E	mployer identification number
		1253 LOCAL			01-0226195
Part I-		anization is exempt und	er section 501(c)	or is a section 52	7 organization.
2 Poli	vide a description of the organiz tical expenditures inteer hours	ation's direct and indirect politic	al campaign activities		> \$
Part I-	B Complete if the org	anization is exempt und	ler section 501(c)	(3).	·
		ncurred by the organization und			> \$
	•	incurred by organization manage		5	> \$
3 If th	e organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a Was	a correction made?				Yes No
b lf "Y	es," describe in Part IV				
Part I-	C Complete if the org	anization is exempt und	ler section 501(c)	, except section 5	501(c)(3).
1 Ente	er the amount directly expended	by the filing organization for sec	ction 527 exempt fund	tion activities	▶ \$
2 Ente	er the amount of the filing organ	zation's funds contributed to ot	her organizations for s	ection 527	
exe	mpt function activities				> \$
3 Tota	al exempt function expenditures	Add lines 1 and 2. Enter here a	ınd on Form 1120-POL	-,	
line	17b				S
	the filing organization file Form	<u>-</u>			Yes No
		nployer identification number (El			
		tion listed, enter the amount pair			
		omptly and directly delivered to			parate segregated fund or a
Poli		additional space is needed, prov	1 ***	<u> </u>	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fre filing organization funds If none, ente	's contributions received and
	· · · · · · · · · · · · · · · · · · ·				

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

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990 EZ) 2013 Part II-A Complete if the org	WORKE anizatio	RS 125 on is exer	3 LOCAL npt under section	n 501(c)(3) and file		0226195 Page 2
(election under sec	tion 501	(h)).				
- -		_	- · ·	Part IV each affiliated	group member's nar	me, address, EIN,
expenses, and shar		, ,	. ,			
Limit	ts on Lobi	oying Exper	d "limited control" pro nditures nts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ience pub	lic opinion (grass roots lobbying)			
b Total lobbying expenditures to influ	ience a le	gislative boo	ly (direct lobbying)		<u>-</u>	
c Total lobbying expenditures (add fi	nes 1a an	d 1b)		.		
d Other exempt purpose expenditure	es			L		
e Total exempt purpose expenditure	s (add line	s 1c and 1d)			
f Lobbying nontaxable amount. Ente	er the amo	unt from the	following table in bot	h columns		
If the amount on line 1e, column (a) o	r (b) is:	The lobi	bying nontaxable am	ount is:		
Not over \$500,000			the amount on line 1e			
Over \$500,000 but not over \$1,000	0.000		0 plus 15% of the exc	ess over \$500.000		
Over \$1,000,000 but not over \$1,5			0 plus 10% of the exc			
Over \$1,500,000 but not over \$17,			0 plus 5% of the exce			
Over \$17,000,000	555,555	\$1,000,0	_	55 5 (5 , 5 , 5 , 5 , 5)		
[0 40, 417,000,000		Ψ1,000,0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
g Grassroots nontaxable amount (en	tor 25% o	fline 1fl				''
h Subtract line 1g from line 1a If zero		•		<u> </u>		
_				-		
i Subtract line 1f from line 1c If zero	•		4. 4.4.4	-A		
j If there is an amount other than ze		er line in or	line 11, did the organiza	ation file Form 4/20		
reporting section 4911 tax for this	year?					Yes No
, -		at made a s	= = =	Section 501(h) n do not have to comp es 2a through 2f on pa		
	Lobi	ying Exper	ditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a)	2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
c Total lobbying expenditures			•			
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))						
f Grassroots lobbying expenditures						

01-0226195 Page 3

Schedule C (Form 990 or 990-EZ) 2013 WORKERS 1253 LOCAL 01-022619

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)).

or each "Yes," response to lines 1a through 1i below, provide in Pa		<u> </u>	a) I	(b	"
the lobbying activity.		Yes	No	Amo	ount
During the year, did the filing organization attempt to influence	e foreign, national, state or				
local legislation, including any attempt to influence public opii					
or referendum, through the use of:	· ·				
a Volunteers?	_				
b Paid staff or management (include compensation in expenses	reported on lines 1c through 1i)?	. [
c Media advertisements?					
d Mailings to members, legislators, or the public?				ı	
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officia	s, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, le	ctures, or any similar means?				
i Other activities?					
j Total Add lines 1c through 1i					
a Did the activities in line 1 cause the organization to be not de-	scribed in section 501(c)(3)?			<u></u>	
b If "Yes," enter the amount of any tax incurred under section 4	912				
c If "Yes," enter the amount of any tax incurred by organization	managers under section 4912	L			
		<u> </u>			
	under section 501(c)(4) sec	ction 501(c)	(5), or se	ction	
art III-A Complete if the organization is exempt	under section 30 (c)(+), sec				
				V	_
ort III-A Complete if the organization is exempt 501(c)(6).				Yes	ı
Songlete if the organization is exempt 501(c)(6). Were substantially all (90% or more) dues received nondeductions.	tible by members?		1	Yes X	
Were substantially all (90% or more) dues received nondeduce Did the organization make only in-house lobbying expenditure. Did the organization agree to carry over lobbying and political art III-B Complete if the organization is exempt 501(c)(6) and if either (a) BOTH Part III-A	tible by members? s of \$2,000 or less? expenditures from the prior year? under section 501(c)(4), se		2 3)(5), or se	X	
Were substantially all (90% or more) dues received nondeduce Did the organization make only in-house lobbying expenditure Did the organization agree to carry over lobbying and political art III-B Complete if the organization is exempt 501(c)(6) and if either (a) BOTH Part III-A answered "Yes."	tible by members? s of \$2,000 or less? expenditures from the prior year? under section 501(c)(4), se		2 3 0(5), or se R (b) Par	X	
Were substantially all (90% or more) dues received nondeduce Did the organization make only in-house lobbying expenditure. Did the organization agree to carry over lobbying and political art III-B Complete if the organization is exempt 501(c)(6) and if either (a) BOTH Part III-A answered "Yes." Dues, assessments and similar amounts from members	tible by members? s of \$2,000 or less? expenditures from the prior year? under section 501(c)(4), set I lines 1 and 2, are answer	red "No," O	2 3)(5), or se	X	
were substantially all (90% or more) dues received nondeduce Did the organization make only in-house lobbying expenditure Did the organization agree to carry over lobbying and political art III-B Complete if the organization is exempt 501(c)(6) and if either (a) BOTH Part III-A answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditure.	tible by members? s of \$2,000 or less? expenditures from the prior year? under section 501(c)(4), set I lines 1 and 2, are answer	red "No," O	2 3 0(5), or se R (b) Par	X	
were substantially all (90% or more) dues received nondeductive organization make only in-house lobbying expenditure. Did the organization agree to carry over lobbying and political art III-B Complete if the organization is exempt 501(c)(6) and if either (a) BOTH Part III-A answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditure expenses for which the section 527(f) tax was paid).	tible by members? s of \$2,000 or less? expenditures from the prior year? under section 501(c)(4), set I lines 1 and 2, are answer	red "No," O	2 3)(5), or se R (b) Par	X	
were substantially all (90% or more) dues received nondeduce Did the organization make only in-house lobbying expenditure. Did the organization agree to carry over lobbying and political art III-B Complete if the organization is exempt 501(c)(6) and if either (a) BOTH Part III-A answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditure expenses for which the section 527(f) tax was paid). Current year	tible by members? s of \$2,000 or less? expenditures from the prior year? under section 501(c)(4), set I lines 1 and 2, are answer	red "No," O	2 3)(5), or se R (b) Par	X	
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, 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.irs.gov/form990.

Open to Public

OMB No 1545-0047

Inspection

Nam	e of the organization INTERNATIONAL BRO		CTRICAL	Employer identification number
	WORKERS 1253 LOCA	<u>[</u>		01-0226195
Pa			ilar Funds or A	ccounts.Complete if the
	organization answered "Yes" to Form 990, Part IV, I			0 \ F
		(a) Donor advised fur	nas	(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	<u>₹</u>	n donor advised fur	
	are the organization's property, subject to the organization			L Yes L No
6	Did the organization inform all grantees, donors, and donor			•
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any ot	ther purpose confe	
Da	impermissible private benefit?			Yes No
Pai			Form 990, Part IV,	line 7
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (e.g., recreation of			lly important land area
	Protection of natural habitat	Preserva	tion of a certified h	istoric structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qua	dified conservation contribution	n in the form of a co	onservation 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 s	• •		2c
d	Number of conservation easements included in (c) acquired	d after 8/17/06, and not on a h	istoric structure	
_	listed in the National Register			2d
3	Number of conservation easements modified, transferred,	released, extinguished, or term	linated by the orgai	nization during the tax
	year	accoment to leasted		
4	Number of states where property subject to conservation of		handling of	
5	Does the organization have a written policy regarding the p	<u>-</u>	nanoling of	Yes No
6	violations, and enforcement of the conservation easements		aaaamanta durna t	. —
6	Staff and volunteer hours devoted to monitoring, inspecting	-	_	
7 8	Amount of expenses incurred in monitoring, inspecting, an Does each conservation easement reported on line 2(d) ab			
0	and section 170(h)(4)(B)(ii)?	ove satisfy the requirements of	1 56011011 170(11)(4)(1	Yes No
9	In Part XIII, describe how the organization reports conserve	ation aggaments in the revenue	and evnence state	
9	include, if applicable, the text of the footnote to the organization		•	
	conservation easements.	ation's illiancial statements th	at describes the or	gariization s accounting to
Pa	t III Organizations Maintaining Collections	of Art. Historical Treas	ures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to For		,	
	If the organization elected, as permitted under SFAS 116 (venue statement a	and balance sheet works of art
	historical treasures, or other similar assets held for public e			
	the text of the footnote to its financial statements that desi			para control, promot, and and and
b	If the organization elected, as permitted under SFAS 116 (ue statement and l	balance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition,	,, ,		•
	relating to these items.			
	(i) Revenues included in Form 990, Part VIII, line 1			> \$
	(ii) Assets included in Form 990 Part Y	•	•	. • \$
2	If the organization received or held works of art, historical t	reasures, or other similar asset		
_	the following amounts required to be reported under SFAS		•	
а	Revenues included in Form 990, Part VIII, line 1			▶ \$
	Assets included in Form 990, Part X			* *

Schedule D (Form 990) 2013 INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS 1253 LOCAL

		1253 LOCA								Page 2
Pai	t III Organizations Maintaining C	collections of A	rt, His	torical Tr	easures, c	or Othe	r Simil	<u>ar Asse</u>	ts (contini	ıed)
3	Using the organization's acquisition, accessi	on, and other recor	ds, chec	k any of the	following tha	t are a si	gnıficant	use of its	collection	rtems
	(check all that apply)		_							
а	Public exhibition	•	╸└┤	Loan or exc	hange progra	ams				
b	Scholarly research	•	е 📖	Other						
C	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	in how th	ney further t	he organizati	on's exer	npt purp	ose in Par	t XIII	
5	During the year, did the organization solicit of	r receive donations	of art, hi	stoncal trea	sures, or othe	er sımılar	assets	_	_	
r	to be sold to raise funds rather than to be m								Yes	No_
Par	reported an amount on Form 990, Pa		lete if the	organizatio	n answered '	"Yes" to I	Form 990), Part IV, I	ine 9, or	
1a	Is the organization an agent, trustee, custod	an or other interme	diary for	contribution	s or other as	sets not	ıncluded			
	on Form 990, Part X?		-						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table						
		•	_						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 F	orm 990, Part X, line	€ 21?						Yes	□ No
b	If "Yes," explain the arrangement in Part XIII	Check here if the e	xplanation	on has been	provided in F	Part XIII				
Par	t V Endowment Funds. Complete	f the organization a	nswered	"Yes" to Fo	rm 990, Part	IV, line 10	0		•	
		(a) Current year	(b) P	nor year	(c) Two year	s back	d) Three y	ears back	(e) Four	ears back
1a	Beginning of year balance								,	
b	Contributions									
С	Net investment earnings, gains, and losses			•••						
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur	rent year end balan	ce (line 1	g, column (a	a)) held as.					
а	Board designated or quasi-endowment		%							
b	Permanent endowment >	%								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c should	uld equal 100%								
За	Are there endowment funds not in the posse	ession of the organia	zation tha	at are held a	nd administe	red for th	ne organi	zation	_	
	by									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organization:	s listed as required	on Sched	dule R?					3b	
4	Describe in Part XIII the intended uses of the		owment	funds.						
Pai	t VI Land, Buildings, and Equipn	nent.								_
	Complete if the organization answere	d "Yes" to Form 99	0, Part IV	/, line 11a S	ee Form 990	, Part X, I	ine 10.			
	Description of property	(a) Cost or	other	(b) Cost	or other	(c) Ac	cumulate	ed	(d) Book	value
	 	basis (invest	ment)	basis	(other)	dep	reciation			
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment .			5	4,556.		43,3	61.	11	.,195.
е	Other		_		_					
T-4-	Add lines to through to (Column (d) must a	aud Fama 000 Dan	+ V	(D) (·	10/011				11	105

	Schedule D (Form 990) 2013	WORKERS 1253 LOCA	AL	 <u>01-0226195</u>	Page 3
•	Part VII Investments -	Other Securities.	· -	•	

25 , 272 COST	Complete if the organization answered "Yes" t				···
25 , 272 CQST	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation. Cost or end	of-year market value
(3) Other (A) (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B	(1) Financial derivatives				
(3) Other (A) (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B	(2) Closely-held equity interests	25,272	COST		
G G G G G G G G	(3) Other				<u></u>
C C C C C C C C	(A)				
Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	(B)				
(G) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F	(C)	·			
(G) (H) (H) (H) (H) (H) (H) (H) (H) (H) (H	(D)				
G	(E)				
(H)	(F)				<u></u>
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	(G)				
Part VIII Investments - Program Related.	(H)				
Part VIII Investments - Program Related. Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	25,272	•		
(a) Description of investment (b) Book value (c) Method of valuation. Cost or end-of-year market value (1) (2) (3) (4) (4) (5) (6) (6) (7) (8) (9) (9) (7) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1					
(a) Description of investment (b) Book value (c) Method of valuation. Cost or end-of-year market value (1) (2) (3) (4) (4) (5) (6) (6) (7) (8) (9) (9) (7) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	Complete if the organization answered "Yes"	to Form 990, Part IV, line	11c. See Form 990, F	Part X, line 13.	
(2) (3) (4) (5) (6) (7) (8) (9) (9) (9) (1) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (9) (1) (1) (2) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (2) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (1) (2) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (2) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (9) (1) (1) (2) (3) (4) (5) (6) (7) (6) (7) (8) (9) (9) (9) (1) (1) (2) (3) (4) (5) (6) (6) (7) (6) (6) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9					of-year market value
(3) (4) (5) (6) (7) (8) (9) (9) Total. (Col. (b) must equal Form 990, Part X, col. (8) 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. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column, (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)	(1)				
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(9)					
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(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)	(a) ⁽	Description			(b) Book value
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(5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)	(3)				
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Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)		e 15.)		>	
1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)		to Form 990. Part IV. line	e 11e or 11f. See Form	1 990, Part X. line 25	
(1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)	(-) December of lightly				
(2) (3) (4) (5) (6) (7) (8) (9)					
(3) (4) (5) (6) (7) (8) (9)				1	
(4) (5) (6) (7) (8) (9)				1	
(5) (6) (7) (8) (9)				1	
(6) (7) (8) (9)			-	1	
(7) (8) (9)				1	
(8) (9)				1	
(9)				1	
	· · ·			1	
	Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 25.)		1	

2. Liability for uncertain tax positions. 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.

	INTERNATIONAL BROTHERHOOD	OF ELECTRICAL		
	dule D (Form 990) 2013 WORKERS 1253 LOCAL)226195 Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial Statem	•	Return	•
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a		1 1	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1		
а	Net unrealized gains on investments .	2a	4 1	
Ь	Donated services and use of facilities	2b	4	
С	Recovenes of pnor year grants	_2c	-	
d	Other (Describe in Part XIII)	2d	- [
е	Add lines 2a through 2d	•	2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	-	
þ	Other (Describe in Part XIII.)	4b	-	
С	Add lines 4a and 4b		4c	
<u>5</u>	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	name With Everynan na	5	
Pa	Reconciliation of Expenses per Audited Financial Statem		r Ketui	m.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a			
1	Total expenses and losses per audited financial statements		1-1-	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1		
a	Donated services and use of facilities	2a	-	
b	Pnor year adjustments	2b	-	
C	Other losses	2c	-	
d	Other (Describe in Part XIII.)	2d	- 1	
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.	1.1	1 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	-	
b	Other (Describe in Part XIII.)	4b	-	
	Add lines 4a and 4b		4c	
5 Do	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	
	rt XIII Supplemental Information.		4.5.	
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III,		4, Part	X, line 2, Part XI,
ines	2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any ad	ditional information.		
	· · · · · · · · · · · · · · · · · · ·			
וגר	om v I TND O.			
PAJ	RT X, LINE 2:			
T V 1	NAME OF TAKE TO A STREET OF THE PROST OF THE	IG OF ACCOUNTEDIO	HOD	
CA.	PLANATION: THE LOCAL FOLLOWS THE PROVISION	NS OF ACCOUNTING	FOR	
T TRI	CERTAINTY IN INCOME TAXES AS PROVIDED FOR	TN MUR TNCOME M	VEC	MODIC OF
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PK	OVISIONS HAD NO MATERIAL IMPACT ON THE LOC	CAL S FINANCIAL	STATI	EMENTS.
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TH.	IS STATEMENT CLARIFIES THE CRITERIA THAT A	AN INDIVIDUAL TA	X POS	SITION MUST
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HAS BEEN NO CUMULATIVE EFFECT ON THE LOCAL'S FINANCIAL STATEMENTS RELATED

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09-25-13
Schedule D (Form 990) 20

THOSE TAX POSITIONS TO BE RECOGNIZED IN THE FINANCIAL STATEMENTS. THERE

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

OMB No 1545-0047

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

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS 1253 LOCAL

Employer identification number 01-0226195

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PRODUCTS AND THE DEVELOPMENT OF A HIGH DEGREE OF EFFICIENCY IN THEIR
RESPECTIVE OCCUPATIONS.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
METHODS OF WORK; TO CULTIVATE FEELINGS OF FRIENDSHIP AMONG THOSE OF OUR
INDUSTRY; TO SETTLE ALL DISPUTES BETWEEN EMPLOYERS AND EMPLOYEES BY
ARBITRATION (IF POSSIBLE); TO ASSIST EACH OTHER IN SICKNESS OR
DISTRESS; TO SECURE EMPLOYMENT; TO REDUCE THE HOURS OF DAILY LABOR; TO
SECURE ADEQUATE PAY FOR OUR WORK; TO SEEK A HIGHER AND HIGHER STANDARD
OF LIVING; TO SEEK SECURITY FOR THE INDIVIDUAL; AND BY LEGAL AND PROPER
MEANS TO ELEVATE THE MORAL, INTELLECTUAL AND SOCIAL CONDITIONS OF OUR
MEMBERS, THIER FAMILIES AND DEPENDENTS, IN THE INTEREST OF A HIGHER
STANDARD OF CITIZENSHIP.
FORM 990, PART VI, SECTION A, LINE 6:
EXPLANATION: THE ORGANIZATION HAS MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A:
EXPLANATION: EVERY THREE YEARS PER LOCAL UNION BYLAWS, NOMINATIONS FOR
ELECTED OFFICES ARE HELD, FOLLOWED BY A SECRET BALLOT ELECTION. ALL
ELIGIBLE MEMBERS IN GOOD STANDING HAVE A RIGHT TO VOTE.
FORM 990, PART VI, SECTION A, LINE 7B:
EXPLANATION: MEMBERSHIP MEETINGS ARE HELD MONTHLY, GIVING THE BODY
OPPORTINITY TO VOTE ON MANY DECISIONS

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS 1253 LOCAL	Employer identification number 01-0226195
FORM 990, PART VI, SECTION B, LINE 11:	
EXPLANATION: THE EXECUTIVE BOARD REVIEWS THE 990 AND ASKS	ANY QUESTIONS
THEY HAVE OF MANAGEMENT.	
FORM 990, PART VI, SECTION C, LINE 19:	
EXPLANATION: ALL ORGANIZING DOCUMENTS AND FINANCIAL STATE	MENTS ARE
AVAILABLE TO THE PUBLIC UPON REQUEST.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
LOSS ON INVESTMENT IN SUBSIDIARY	
FORM 990, PART XII, LINE 2C:	
EXPLANATION: THIS PROCESS DID NOT CHANGE DURING THE YEAR.	

SCHEDULE R (Form 990)

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.

► See separate instructions.

Open to Public Inspection 2013

INTERNATIONAL BROTHERHOOD OF ELECTRICAL

Employer identification number 01-0226195

Part

WORKERS 1253 LOCAL

Name of the organization Department of the Treasury Internal Revenue Service

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

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

(a)	(Q)	(0)	(p)	(e)	(t)	(b)	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direc	Section 312(5)	2(0)(13)
of related organization		foreign country)	section	status (if section	entity	entity?	۰
				501(c)(3))		Yes	No
LOCAL UNION #1253, IBEW PROPERTIES, INC							
01-6029905, 176 MAIN ST., FAIRFIELD, ME	- 1						
04937	RENTAL SPACE	MAINE	501 (C)(2)		N/A	×	
IBEW LU #1253 POLITICAL ACTION COMMITTEE -							
01-0226195, 176 MAIN ST., FAIRFIELD, ME	···]						
04937	POLITICAL COMMITTEE	MAINE	527		N/A		×
LOCAL 1253 HEALTH & WELFARE FUND -							
01-6029461, 176 MAIN ST., FAIRFIELD, ME	HEALTH AND WELFARE						
04937	BENEFITS	MAINE	501(C)(9)				×
						-	

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

Schedule R (Form 990) 2013

Schedule R (Form 990) 2013 WORKERS 1253 LOCAL

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 Part III

Page 2

01-0226195

(a) Name, address, and EIN of related organization	(b) Pnmary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	Predomina (related, i excluded fro	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	<u> </u>	(h) Disproportionate allocations? Yes No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) SI General or non-managing luie Partner? (iule Partner? (55) Yes No	al or Percental own	(j) (k) General or Percentage managing ownership partner? Yes No
													İ
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 organizations treated as a corporation or trust during the tax year	anizations Taxable as ooration or trust during	s a Corpo g the tax y	ration or Trust Colear	mplete if the	e organization	answered "Y	as" on Form	990, Part I	IV, line 34	because it ha	ad one or	more re	lated
(a) Name, address, and EIN of related organization	7	Primi	(b) Primary activity	(C) Legal domicile (state or foreign country)	(d) Direct controlling entity		(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income		(g) Share of end-of-year assets	(h) Percentage ownership	1 7 1	(i) Section 512(b)(13) controlled entity?
								:					
									-				
													-
					!								
332162 00-12-13										Sche	Schedule R (Form 990) 2013	orm 99	0) 2013

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS 1253 LOCAL

Page 3

01-0226195

Schedule R (Form 990) 2013

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

Note. Complete line 1 if any entrty is listed in Parts II, III, or IV of this schedule					Yes	å
1 Dunng the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ins with one or more re	lated organizations listed	n Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		×
b Gift, grant, or capital contribution to related organization(s)				4		×
c Gift, grant, or capital contribution from related organization(s)				5		×
d Loans or loan guarantees to or for related organization(s)				1d		×
				1e	_	×
f Dividends from related organization(s)				÷		×
g Sale of assets to related organization(s)				19		×
				1		×
i Exchange of assets with related organization(s)				;=		×
j Lease of facilities, equipment, or other assets to related organization(s)				Ę		×
k Lease of facilities, equipment, or other assets from related organization(s)				¥	×	
	ganization(s)			=		×
m Performance of services or membership or fundraising solicitations by related org	related organization(s)			TL.		×
n Shanng of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			1n		×
				9		×
p Reimbursement paid to related organization(s) for expenses				10		×
				4		×
r Other transfer of cash or property to related organization(s)				+		×
s Other transfer of cash or property from related organization(s)			:	1\$		×
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 r	elationships and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	pevlove		
(1) LOCAL UNION #1253, IBEW PROPERTIES, INC.	Ж	0				
(2)						
(6)						
(4)						
(5)						
(9)						
332163 09-12-13			Schedule R (Form 990) 2013	R (Form	990) 2	013

Page-4 01-0226195

INTERNATIONAL BROTHERHOOD OF ELECTRICAL

WORKERS 1253 LOCAL Schedule R (Form 990) 2013 Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37

(h) (i) (j) (k)

DisproporCode V-UBI
amount in box 20 managing ownership
allocations? of Schedule K-1
Pest No (Form 1065) Yes No 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) end-of-year Share of assets 6 (f) Share of income total Predominant income partners set (related, unrelated, excluded from tax under section 512-514) yes No that was not a related organization. See instructions regarding exclusion for certain investment partnerships. Legal domicile (state or foreign country) Primary activity Name, address, and EIN of entity

Schedule R (Form 990) 2013

INTERNATIONAL BROTHERHOOD OF ELECTRICAL Schedule R (Form 990) 2013 01-0226195 Page 5 WORKERS 1253 LOCAL Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions)

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.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

ightharpoons If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension 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 Chanties & 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. Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or print INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS 1253 LOCAL 01-0226195 File by the Number, street, and room or suite no. If a P.O. box, see instructions Social security number (SSN) due date for filing your 176 MAIN STREET instructions City, town or post office, state, and ZIP code For a foreign address, see instructions. FAIRFIELD, ME 04937 0 Enter the Return code for the return that this application is for (file a separate application for each return) Application Return Application Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec 401(a) or 408(a) trust) Form 6069 05 11 Form 990-T (trust other than above) 06 Form 8870 12 CHARLES FRASER The books are in the care of ▶ 176 MAIN STREET - FAIRFIELD, ME 04937 Telephone No ► 207-453-1301 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, check this If it is for part of the group, 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 until FEBRUARY 15, 2015, to file the exempt organization return for the organization named above. The extension is for the organization's return for calendar year ► X tax year beginning JUL 1, 2013 , and ending JUN 30, 2014 Final return If the tax year entered in line 1 is for less than 12 months, check reason-Initial return Change in accounting period If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 3b Balance due, Subtract line 3b from line 3a. Include your payment with this form, if required.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

instructions.

by using EFTPS (Electronic Federal Tax Payment System) See instructions