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Department of the Treasury Internal Revenue Service

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

▶ 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.lrs.gov/form990.

Open to Public Inspection

Α	For the	2015 calendar year, or tax year beginning and e	ending		
В	Check if	C Name of organization		D Employer identifi	cation number
	applicable	INTERNATIONAL ASSOC OF HEAT & FROST		, -	
Г	Addres	SS T. T. T. T. T. T. T. A.			
F	Name Change			42-6	076559
F	initial return		Room/suite	E Telephone numbe	
F	Final	333 CM OWN CWDREW			202-6874
_	/return/ termin				174,384.
г	ated Amend	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	
늗	lretum Applic	DES MOINES, IA 50309		H(a) Is this a group re	
L	tion pendir	F Name and address of phincipal officer. DEFF BRODE		for subordinates	
_		333 SW 9TH STREET SUITE K , DES MOINES,		H(b) Are all subordinates in	_
_		empt status: 501(c)(3) X 501(c) ( 5 ) ◀ (insert no.) 4947(a)(1) or	r 527		list. (see instructions)
		te: N/A		H(c) Group exemptio	n number 🕨
		organization: X Corporation Trust Association Other	L Year o	of formation:	A State of legal domicile: IA
P	art I	Summary			
Φ	1 1	Briefly describe the organization's mission or most significant activities: ${f TO}$ ${f PR}$	COMOTE	AND PROTEC	T THE
Activities & Governance	}	INTERESTS OF ITS MEMBERSHIP BY PROVIDING	<b>EDUCA</b>	TION, TRAIN	ING, JOB
Ē	2	Check this box  if the organization discontinued its operations or dispose	ed of more	than 25% of its net as	ssets.
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	3
ŏ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	3
ან თ	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	• •	5	4
<u>i</u>	ء ا			6	0
.₹		Total number of volunteers (estimate if necessary)  Total unrelated business revenue from Part VIII, column (C), thee CEVEE  Net unrelated business taxable income from Form 990/Toline 34			0.
Ą	/ a	Net an elected business revenue from Part VIII, column (O), mile 122 (O)	السير ال	7a	
	<u> </u>	The difference bearings to the control of the contr	<del></del>		0.
		Contributions and grants (Part VIII, line 1h)		Prior Year	Current Year
ē	8	Contributions and grants (Part VIII, line 1h)	#\$1 <u> </u>	242,606.	0.
ē	9	Program service revenue (Part VIII, line 2g)	// <b>// // // // // // // // // // // // </b>	0.	127,671.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	a#[	0.	<u> </u>
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<i>§</i>	0.	<u>46,713.</u>
2017	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u> </u>	242,606.	174,384.
7	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	0.	0.
$\Rightarrow$	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
මුව	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		66,839.	70,604.
>= <u>8</u>	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
¥ĕ	· [	Total fundraising expenses (Part IX, column (D), line 25)	0.		
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		104,505.	82,843.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		171,344.	153,447.
23	10	Revenue less expenses. Subtract line 18 from line 12	. –	71,262.	20,937.
	3	Tovolido loso oxportisos. Gabridos into to trott into 12	Red	ginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	100	99,124.	121,590.
Net Assets Au	20	Total liabilities (Part X, line 26)		0.	6,770.
ē	21	•	<u> </u>	99,124.	
	22 art II	Net assets or fund balances Subtract line 21 from line 20		77,144.	114,820.
		<del></del>			described and a second ball of the
	-	lities of perjury, I declare that I have examined this return, including accompanying schedules			y knowledge and belief, it is
tru	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of whi	ich preparer	nas any knowleage.	
		Signature of officer		Data	
Sig	gn			Date //	20-17
He	re	JEFF BROSE, PRESIDENT	<del> //</del>	1-1-2-0001	7
		Type or print name and title MARK P. SELBY TRUSTE		pete P. JULY	4-20-17
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pa	id	THOMAS M. POWERS, CPA Thomas m Powers, CI	RA !	Y-17-17 self-employe	
Pre	parer	Firm's name FREYBERG HINKLE ASHLAND POWERS' &	STOW	ELL Firm's EIN	39-1531945
Us	e Only	Firm's address 15420 W. CAPITOL DR.			
		BROOKFIELD, WI 53005-2621		Phone no. 26	27846210
Ma	ay the If	RS discuss this return with the preparer shown above? (see instructions)			. X Yes No
	001 12-1		ns.		Form <b>990</b> (2015)
					( · - · )

# INTERNATIONAL ASSOC OF HEAT & FROST

	n 990 (2015) INSULATORS LU 74	42-6076559	Page 2
Pa	art III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<del></del>	
1	Briefly describe the organization's mission: UNION REPRESENTATION.		
	UNION REFRESENTATION.		
2	Did the organization undertake any significant program services during the year w	rhich were not listed on	
	the pnor Form 990 or 990-EZ?		s X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it con-	ducts, any program services?Ye	s X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three		
	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.	V /-	<del></del>
4a	(Code) (Expenses \$ including grants of \$ TO ASSIST WORKERS UNDER ITS JURISDICTION		TNC
	WAGES, HOURS, AND WORKING CONDITIONS. PRO		TIAG
	APPLICABLE AS THIS IS A LABOR UNION.	OGIGAN BATENDED ARE NOT	
	III III III III III IIII IIII IIII IIII IIII		· · · · · · ·
		<del></del>	
4b	(Code) (Expenses \$ including grants of \$	) (Revenue \$	)
		<del></del>	<del></del>
		<del></del>	
4c	(Code ) (Expenses \$ including grants of \$	) (Revenue \$	)
			,
		<del></del>	
		<del></del>	
		<del></del>	
	Other program convices (Describe in Schodule O.)		
4d		) (Revenue \$	
4e		\ /usvaline \$	
		Form	990 (2015)

Form 990 (2015)
Part IV Checklist of R INSULATORS LU 74

	· · · · · · · · · · · · · · · · · · ·		Yes	No
1	(s the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		100	110
	If "Yes," complete Schedule A	1	i	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			
	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	sımılar amounts as defined ın Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	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		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable		İ	
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
þ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	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
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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			
	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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	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			
	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,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
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>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		İ	
	complete Schedule G, Part III	19_		_ <u>X</u> _

Part IV Checklist of Required Schedules (continued)

	·		Yes	No
20a	Qid 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>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	ļ		
	domestic 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 or for domestic individuals on	ł		İ
	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	ľ		Í
	Schedule J	23		X
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			
	Schedule K. If "No", go to line 25a	24a		X
b	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		ļ
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		Į
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 "Yes,"			
	complete Schedule L, Part II	26	X	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
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		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	1		
	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			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	}		ł
	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		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
35a	·	35a		X
b				
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35 <u>b</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		ļ
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		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	<u>X</u>	
		Form	<b>590</b>	(2015)

	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	T	
4.	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	<u></u>	Yes	No
1a		4		l
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable   Ib     Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	Ή		
C	(gambling) winnings to prize winners?	1c		l
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	10	-	
20	filed for the calendar year ending with or within the year covered by this return  2a	ıl		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	-21	
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	35		
76	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
h	If "Yes," enter the name of the foreign country:	76	-	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	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		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		_X
d	If "Yes," indicate the number of Forms 8282 filed during the year	] '		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	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		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsonng organization have excess business holdings at any time during the year?	_8_		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		_
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12	. I		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>∤</b> ∤		
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders	}		
þ	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	┨ <u>.</u>		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	$\{    $		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10-	<del>                                     </del>	_
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		_
L	Note. See the instructions for additional information the organization must report on Schedule O.			
ь	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans  Enter the amount of reserves on hand  13c			
с 14а	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
_	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	11. The second s		990	2015

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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			X
Sec	tion 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 1a 3			
	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.	}		
b	Enter the number of voting members included in line 1a, above, who are independent3			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
_	officer, director, trustee, or key employee?	2		x
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision		_	
Ü	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
4		5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	_ <del>5</del>	X	Λ
6	Did the organization have members or stockholders?	_		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	٠. ا	v	
-	more members of the governing body?	7a	<u> </u>	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or		37	
	persons other than the governing body?	7b	<u> </u>	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b		X
9	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	9		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		_X_
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?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		_ <u>X</u> _
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		_X_
14	Did the organization have a written document retention and destruction policy?	14		X
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?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	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	ļ		
	taxable entity during the year?	16a		X
ь	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?	16b	ļ	
Sec	tion 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) a	vailab	le	
-	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	financ	cial	
. •	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
_•	JEFF BROSE - 515-202-6874			
	333 SW 9TH STREET SUITE K, DES MOINES, IA 50309			
	- <u></u>			

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

Check if Schedule O contains a response or note to any 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 nor any related organization compensated any current office									director, or trustee.				
(A)	(B)	_ (0			(C) Position			(D)	(E)	(F)			
Name and Title	Average		not c	heck	more	than		Reportable	Reportable	Estimated			
	hours per	box	, unie cer an	ess person is both an nd a director/trustee)			han tee)	compensation	compensation	amount of			
	week		1		1		,	from the	from related	other			
	(list any hours for	direct	Į.			_		organization	organizations (W-2/1099-MISC)	compensation from the			
	related	ë e	şę	l		Isate		(W-2/1099-MISC)	(17 2/ 1000 11/100)	organization			
	organizations	Individual trustee or director	Institutional trustee		) ee	ed mc		( · · · · · · · · · · · · · · · · · · ·		and related			
	below	deal	ig i	   ==	l de	oyee	je		į	organizations			
	line)	횰	퇄	Officer	ě	Highesi compensated employee	For			<u> </u>			
(1) JAKE SMITH	1.00			ŀ						_			
SERGEANT AT ARMS/TRUSTEE-EXECUTIVE B		X	<u> </u>	<u> </u>	<u> </u>	<u> </u>		0.	0.	0.			
(2) DAVID JONES	1.00								_	_			
EXECUTIVE BOARD	<u> </u>	X	<u> </u>	_	<u> </u>	<u> </u>		0.	0.	0.			
(3) CHRIS THOMPSON	1.00		ł					_		•			
TRUSTEE-EXECUTIVE BOARD	<u> </u>	X	<u> </u>		L_	ļ		0.	0.	0.			
(4) TED WATSON	36.00		1										
BUSINESS MANAGER/CORRESPONDING SECRE		<b> </b>	<u> </u>	X	<u> </u>		-	46,024.	0.	2,186.			
(5) JEFF BROSE	3.00		1					0 500					
PRESIDENT	1 00	-	<del> </del>	X	-	-	_	3,700.	0.	0.			
(6) CURTIS PAUSCHER	1.00		1	7.				0.0		F-4			
VICE PRESIDENT	1 00	-		X		-	-	92.	0.	51.			
(7) JEREMY HIEMBAUGH	1.00			x				0.	•	•			
FINANCIAL SECRETARY-EXECUTIVE BOARD	1.00		}—	_		}	-		0.	0.			
(8) JON DAGNILLO	1.00	}		x				0.	0.	^			
RECORDING SECRETARY-EXECUTIVE BOARD	<del> </del>	-	-	^	├	$\vdash$	-			0.			
	<b></b>	1											
	<del>                                     </del>	-	├─	-	-	-	<del>                                     </del>						
	<del> </del>			ļ				n					
	<del> </del>		-		$\vdash$	_							
		1		-				ni					
	1												
		1					} .			ı			
					-	-							
			_										
	<u> </u>	_	<u> </u>	_									
	ļ	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>			<u> </u>				
		-											
	<del></del> _	Щ.	Ц.	<u></u>	Ц_	<u></u>	L	L	L	F 900 (2015)			

Form **990** (2015)

INSULAT	$\Delta D \alpha$	T TT	74
INSTITUTE	1185	1.11	14

Par	t VII Section A. Officers, Directors, Trus		ploy	ees			ghe	st C	compensated Employe	es (continued)				
	Name and title	(B) Average hours per week	(do	not c	Pos heck ss pe	c) rtion more rson		one han	(D) Reportable compensation	(E) Reportable compensatio	on	1	(F) stimat nount	of
		(list any hours for related organizations below line)	tee or director	il trustee			Highest compensated employee		from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MIS	ıs	org an	other other other rom th ganizat d relat anizat	ation ie tion ted
	<del></del>				-									
			-											
			-	† 		-						-		
			-	-		-	-	-		:		-		
			-	<del> </del>	-	 	-	-						
			-	-	-	-	+-	-						
			-	-		-	-	-						
	Sub-total	<u> </u>	<u></u>	<u>l</u>	l	<u> </u>	<u> </u>		49,816.		0.	<u> </u>	2,2	37.
	Total from continuation sheets to Part V	II, Section A				•			0.		0.		_	0.
d 2	Total (add lines 1b and 1c)  Total number of individuals (including but n	 lot limited to th	ose	liste	ed al	bove	e) wl	no re	49,816. eceived more than \$100	,000 of reportab	0 <b>.</b> le	<u> </u>	2,2	
	compensation from the organization								·				Yes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s			e, ke		nplo	yee	, or	highest compensated e	mployee on		3		х
4	For any individual listed on line 1a, is the su and related organizations greater than \$15	um of reportab	le co	omp	ensa				=	the organization				Х
5	Did any person listed on line 1a receive or a	accrue compe	nsat	ion 1	rom	any	/ uni		· · · · · · · · · · · · · · · · · · ·	dual for services	'	_4_		
Sec	rendered to the organization? If "Yes," com tion B. Independent Contractors	i <u>plete Scheaul</u>	<u>e J 1</u>	or s	ucn	<u>pers</u>	son_		<del>·-··-</del>	<del></del>		5		<u>X</u>
1	Complete this table for your five highest co										pens	ation 1	rom	
	the organization. Report compensation for (A)		ear	enai	ng v	vitri	or w	'ILI]	(B)			((	 >)	
	Name and business	address	N	INC	<u> </u>	-		$\dashv$	Description of s	ervices		ompe	nsatio	n
								-	<del></del>					
								4						
						_		$\dashv$	<del> </del>					
								_	<del></del>					
	<del></del>													
	Total number of independent contractors (i \$100,000 of compensation from the organi		ot lı	mite	d to		se li: 0	sted	above) who received m	ore than			000	

Form 990 (2015)

42-6076559 INSULATORS LU 74 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 Related or Unrelated Total revenue exempt function business revenue revenue ts, Grants Amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) <u>1e</u> f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f Business Code 900099 127,671. 127,671 Program Service Revenue 2 a DUES f All other program service revenue 127,671 g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents .... Less: rental expenses c Rental income or (loss) d Net rental income or (loss) Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 . . . b Less: direct expenses . . . . 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 Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 46,713. 46,713. 11 a REIMBURSED EXPENSES 900099 d All other revenue 46,713. e Total. Add lines 11a 11d

0.

174,384.

Total revenue. See instructions.

174,384.

_	•	AL ASSOC OF I	HEAT & FROST		076EE0 - 40
	990 (2015) INSULATORS I		<del></del>	44-01	076559 Page <b>10</b>
	on 501(c)(3) and 501(c)(4) organizations must com		or organizations must d	complete column (A)	<del></del>
Seci	Check if Schedule O contains a respon			omplete column (/y.	
Do	not include amounts reported on lines 6b.	(A)	(B)	(C)	(D) Fundraising
	3b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	ındivıduals. See Part IV, line 22				
3	Grants and other assistance to foreign			1	
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	52,053.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				<del></del>
7	Other salaries and wages	10,910.		<del> </del>	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	1,050.			<del></del>
9	Other employee benefits			<del> </del>	
10	Payroll taxes	6,591.		<del> </del>	<del></del>
11	Fees for services (non-employees):				
a	Management			<del>   </del>	
D	Legal	363.		<del> </del>	
d	Accounting	303.		<del> </del>	
u	Professional fundraising services. See Part IV, line 17			<del>                                     </del>	
f	Investment management fees	<del> </del>		1	
9	Other. (If line 11g amount exceeds 10% of line 25,			† <del>  </del>	
9	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	2,985.			
13	Office expenses	3,996.			
14	Information technology	953.			
15	Royalties				
16	Occupancy	9,553.			
17	Travel	7,481.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials			· · · · · · · · · · · · · · · · · · ·	
19	Conferences, conventions, and meetings	286.			
20	Interest	30 517		<del> </del>	
21	Payments to affiliates	38,517.		<del> </del>	
22	Depreciation, depletion, and amortization	25.			
23	Other expenses, Itemize expenses not covered	43.		<del>                                     </del>	
24	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
a	amount, list line 24e expenses on Schedule 0.) TRAINING REIMBURSED	16,063.			

educational campaign and fundraising solicitation. Check here If following SOP 98-2 (ASC 958-720)

Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined

Form 990 (2015)

1,676.

153,447.

718.

227.

**BANK CHARGES** 

c PAC EXPENSE

d DONATION e All other expenses

Form 990 (2015)
Part X | Balance Sheet INSULATORS LU 74

			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	99,124.	1	119,267.
	2	Savings and temporary cash investments		2	113/120/
	3	Pledges and grants receivable, net		3	<del></del>
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	2,323
	6	Loans and other receivables from other disqualified persons (as defined under			27323.
-		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary		}	
v)		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	<del> </del>
As	8	Inventories for sale or use		8	<del></del>
	9	Prepaid expenses and deferred charges		9	<del> </del>
		Land, buildings, and equipment cost or other			<del></del>
		basis. Complete Part VI of Schedule D 10a		·	
	ь	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11	<del> </del>	13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16 _	Total assets. Add lines 1 through 15 (must equal line 34)	99,124.	16	121,590.
	17	Accounts payable and accrued expenses	0.	17	6,770.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Š	22	Loans and other payables to current and former officers, directors, trustees,			
≝	)	key employees, highest compensated employees, and disqualified persons.			
Liabilities	]	Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
	1	Schedule D	<del></del>	25	<del></del>
	26	Total liabilities. Add lines 17 through 25	0.	26	6,770.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
Ses	1	complete lines 27 through 29, and lines 33 and 34.	00 104		114 000
aŭ	27	Unrestricted net assets	99,124.	27	114,820.
Ba	28	Temporarily restricted net assets		28	
<u> </u>	29	Permanently restricted net assets		29	<del></del>
Ę		Organizations that do not follow SFAS 117 (ASC 958), check here			
Net Assets or Fund Balances	]	and complete lines 30 through 34.		00	
set	30	Capital stock or trust principal, or current funds	<del></del>	30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net	32	Retained earnings, endowment, accumulated income, or other funds	99,124.	32	11/ 020
_	33	Total lightlytes and not proceed from helphage.	99,124.	33	114,820. 121,590.
	34	Total liabilities and net assets/fund balances	JJ,144.	<u> 54</u>	Form <b>990</b> (2015)

Form **990** (2015)

Form	990 (2015) INSULATORS LU 74	42-60	76559	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			84.
2	Total expenses (must equal Part IX, column (A), line 25)	2			47.
3	Revenue less expenses Subtract line 2 from line 1	3			37.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	99	9,1	24.
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		5,2	41.
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	114	1,8	20.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	··· ·		لعل
				Yes	No
1	Accounting method used to prepare the Form 990.  Cash Accrual X Other SEE SCH	0			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	i on a			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 separat	e basıs,	- {		
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,	1 1		ĺ
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	<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 Sir	ngle Audıt			1
	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 requi	red audit	- ( - (		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	_	3b		1

Form **990** (2015)

### SCHEDULE C (Form 990 or 990-EZ)

# Political Campaign and Lobbying Activities

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► 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>.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Tax) (see separate instructions), the	en			· -
<ul> <li>Section 501(c)(4), (5), or (6) organ</li> </ul>	izations: Complete Part III.			
	NATIONAL ASSOC OF	HEAT & FROS	T Empl	oyer identification number
INSULATORS LU 74				42-6076559
Part I-A Complete if the	organization is exempt und	ler section 501(c	or is a section 527 o	rganization.
		<del></del>	<del> </del>	<del></del>
4 Drawids a description of the arm	anizationle direct and indirect politic	al compound activition	in Doubli	
•	anization's direct and indirect politic	ar campaign activities	m Part IV.	
2 Political expenditures			<b>&gt;</b> \$	'- <del></del>
3 Volunteer hours				
Part I-B Complete if the	organization is exempt und	ler section 501(c)	 (3).	
	tax incurred by the organization und			
	tax incurred by organization manage	•		
_	ction 4955 tax, did it file Form 4720		. , , ,	Yes No
4a Was a correction made?	511011 4000 tax, aid it iiio 1 01111 17 20	tor time your.		Yes No
b If "Yes," describe in Part IV.			•	L res NO
Part I-C Complete if the	organization is exempt und	er section 501(c)	except section 5010	c)(3).
	ided by the filing organization for se			
• •	ganization's funds contributed to ot	•		
exempt function activities	Janization's funds contributed to ot	nei organizations ioi s	► \$	
• • • • • • • • • • • • • • • • • • • •		 and an Farm 1100 DOI	•	
·	ures. Add lines 1 and 2. Enter here a	ind on Form 1120-POL	-, <b>&gt;</b> •	
line 17b			. •	
4 Did the filing organization file Fo	•			Yes No
	d employer identification number (El	•	_	• •
	nization listed, enter the amount paid			
	e promptly and directly delivered to		•	te segregated fund or a
political action committee (PAC)	. If additional space is needed, prov	nde information in Par	I IV.	<del></del>
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
			filing organization's	contributions received and
			funds. If none, enter -0	promptly and directly delivered to a separate
				political organization
				If none, enter -0
	<b>\</b>			<b>\</b>
			T	
				]
			<del></del>	† <del></del>
		<del> </del>	<del></del>	<del> </del>

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

Schedule C (Form 990 or 990-EZ) 2015

LHA 532041 10-05-15

# INTERNATIONAL ASSOC OF HEAT & FROST

Schedule C (Form 990 or 990 EZ) 2015 IN  Part II-A   Complete if the organ	SULATORS ization is exe	LU 74 mpt under sectio	n 501(c)(3) and file	42- ed Form 5768 (	6076559 Page 2 election under
section 501(h)).					
A Check Lifthe filing organization	_	= : :	n Part IV each affiliated	group member's na	me, address, EIN,
expenses, and share of	, ,	• •			
B Check I If the filing organization	checked box A a	nd "limited control" pro	ovisions apply.		1
Limits o (The term "expenditu	n Lobbying Expe res" means amoi		)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence	ce public opinion (	(grass roots lobbying)			<del> </del>
<b>b</b> Total lobbying expenditures to influence	ce a legislative bo	dy (direct lobbying)	·		
c Total lobbying expenditures (add lines			· · · · · · ·		
d Other exempt purpose expenditures			· · · · · ·		
e Total exempt purpose expenditures (a	dd lines 1c and 1	(b			<del>-</del>
f Lobbying nontaxable amount. Enter th			h columns		
If the amount on line 1e, column (a) or (b)		bying nontaxable am			
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,000,00		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,500,0		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,000		00 plus 5% of the exce			
	\$1,000		55 OVEI \$1,500,000.		
Over \$17,000,000	<b>1</b> \$1,000,	000.			
<ul> <li>g Grassroots nontaxable amount (enters</li> <li>h Subtract line 1g from line 1a If zero or</li> <li>i Subtract line 1f from line 1c If zero or</li> </ul>	less, enter -0-				
j If there is an amount other than zero o	n either line 1h or	line 1, did the organiz	ation file Form 4720		
reporting section 4911 tax for this yea	r?	•		<u></u>	Yes No
(Some organizations that	made a section 5	eraging Period Under 601(h) election do not ate instructions for li	have to complete all o	f the five columns	below.
	Lobbying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	( <b>c)</b> 2014	( <b>d</b> ) 2015	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					1
(150% of line 2a, column(e))					
c Total lobbying expenditures	-				
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
4. Greenwaste labbuma avanaditura					

Schedule C (Form 990 or 990-EZ) 2015

42-6076559 Page 3

Schedule C (Form 990 or 990-EZ) 2015 INSULATORS LU 74 42-607655

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 on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of the lobbying activity.		Yes	No	Amo	ount
1 During the year, did the filing organization attempt to influence foreign, national, state or	r			_	
local legislation, including any attempt to influence public opinion on a legislative matter	r				
or referendum, through the use of:					
a Volunteers?	[				
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c thro	ugh 1i)?				
c Media advertisements?	Ļ				
d Mailings to members, legislators, or the public?	.				
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?	.				
g Direct contact with legislators, their staffs, government officials, or a legislative body?	.				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar mean	ns? .				
i Other activities?	-				
j Total. Add lines 1c through 1i	-	-			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3	3)? .		<del></del>		
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section	4912 .				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		- FO4(-)	(E)		
Part III-A Complete if the organization is exempt under section 501(c) 501(c)(6).	c)(4), sectio	n 501(c)	(5), or se	ection	
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1	X	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	•		. 2	- 41	X
3 Did the organization agree to carry over lobbying and political expenditures from the pri	or vear?	•	. 2		$\frac{x}{x}$
answered "Yes."  1 Dues, assessments and similar amounts from members		<del></del>	1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amount	unte of politic	al	<u>                                   </u>	_	_
expenses for which the section 527(f) tax was paid).	ants of pointe	a.			
a Current year			2a		
b Carryover from last year			2b		<u>-</u>
c Total		•	2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 10	62(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what port		ess	<del></del>	-	
does the organization agree to carryover to the reasonable estimate of nondeductible k					
expenditure next year?	,g p		4		
5 Taxable amount of lobbying and political expenditures (see instructions)			. 5		
Part IV Supplemental Information					
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (a	ffiliated group	list); Part II	-A, lines 1 a	and 2 (see	
instructions); and Part II-B, line 1. Also, complete this part for any additional information.					

### SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

Complete if the organization answered "Yes" on 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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

INTERNATIONAL ASSOC OF HEAT & FROST

**Employer identification number** 42-6076559

Schedule D (Form 990) 2015

INSULATORS LU 74 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII. the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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532051 11-02-15

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

•	INTERNA	TIONAL AS	SUC U	F HEAT	& FRU	21.				_	
		<u>ORS LU 74</u>						<u>42-60</u>			<u>age 2</u>
Par											
3	Using the organization's acquisition, accessi	on, and other reco	rds, check	any of the	following tha	t are a s	significant	use of its	collectio	ıtem	ıs
	(check all that apply):										
а	Public exhibition		ا <u>ل</u> ا ه	Loan or exc	hange progra	ıms					
b	Scholarly research		e	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and exp	lain how th	ey further t	he organizati	on's exe	empt purp	ose in Par	t XIII.		
5	During the year, did the organization solicit o	r receive donation	s of art, his	storical trea	sures, or oth	ər sımila	ar assets		_		
	to be sold to raise funds rather than to be ma	aintained as part o	of the orga	nization's co	ollection?			🗀	Yes		No
Par	t IV Escrow and Custodial Arran	gements. Com	plete if the	organizatio	n answered '	'Yes" oı	n Form 990	0, Part IV,	lıne 9, or		
	reported an amount on Form 990, Par	rt X, line 21.									
1a	Is the organization an agent, trustee, custod	ian or other ınterm	ediary for	contribution	s or other as	sets no	t ıncluded				
	on Form 990, Part X?							. $\square$	Yes		] No
ь	If "Yes," explain the arrangement in Part XIII										
									Amount	t	
С	Beginning balance						1c				
	A 1 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				_		1d				
e	District the second constitution of the second		_				. 1e				
f	Ending balance						1f				
2a	Did the organization include an amount on F	orm 990, Part X, lı	ne 21, for e	escrow or co	ustodial acco	unt liab	ılıty?	[	Yes		No
	If "Yes," explain the arrangement in Part XIII.								-		
Par											
		(a) Current year	(b) P	rior year	(c) Two year	s back	(d) Three	years back	(e) Four	years	back
1a	Beginning of year balance										
ь	Contributions	- · · · · · · · · · · · · · · · · · · ·									
c	Net investment earnings, gains, and losses										
_	Grants or scholarships							• •			
	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 bala	ınce (line 1	g, column (a	a)) held as.						
a	Board designated or quasi-endowment	•	%	,							
b	Permanent endowment ▶	<del></del> %	<del></del>								
_	Temporarily restricted endowment ▶	— <del>—</del> %	•								
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.									
За	Are there endowment funds not in the posse	-	nization tha	at are held a	and administe	red for	the organi	zation			
	by:	_								Yes	No
	(i) unrelated organizations					_		_	3a(i)		
	man and the state of the same								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization				,		_		3b		
4	Describe in Part XIII the intended uses of the						-				
	rt VI Land, Buildings, and Equipn										
	Complete if the organization answere		990, Part I	V, line 11a. 9	See Form 990	), Part X	(, line 10.				
	Description of property	(a) Cost o			t or other		Accumulat	ed	(d) Boo	k valu	е
	2000	basis (inve			(other)	· · ·	epreciation				
12	Land										
	Buildings			1							
	Leasehold improvements										
	F										
	Other	•									

Schedule D (Form 990) 2015

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

•			 _
schedule D (Form 990) 2015	INSULATORS LU	74	

Part VII Investments - Other Securities.				
Complete if the organization answered "Yes"				<del>, </del>
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuatio	n: Cost or end-o	of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other	<del></del>			
(B)		<del></del>		
(C)				
(D)	<del></del>			
<u>(E)</u>				<del></del>
(F)	<u> </u>	<del></del>		
(G)		<del>- </del>		
(H) Tatal (Col. (h) must equal Form 000, Port V, col. (P) line 12.)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.	L	<del></del>		
Complete if the organization answered "Yes"	on Form 000 Part IV I	ine 11c See Form 990 Part Y	line 13	
(a) Description of investment	(b) Book value	(c) Method of valuatio		of-vear market value
<del></del>	(4) 200	(0, 100 100 100 100 100 100 100 100 100 1		your marrier raids
<u>(1)</u> (2)		<del></del>	<del></del>	
(3)	<del></del>	+	<del></del>	
(4)	<del></del>			
(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"	on Form 990, Part IV, I	ine 11d. See Form 990, Part X	line 15	
(a)	Description			(b) Book value
(2)				<del></del>
(3)	<u> </u>			
(4)				
(5)				
				<del></del>
(8)				
(9)	- 1E \	<del> </del>		
Total. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities.	<u>e 15.) </u>	<del></del>	<u>.</u>	<del></del>
Complete if the organization answered "Yes"	on Form 990 Part IV	line 11e or 11f See Form 990	Part Y line 25	
(a) Description of liability	0111 0111 330,1 art 14,	(b) Book value	1 art X, III 0 20.	<del></del>
(1) Federal income taxes		(4)		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 25.)			

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 X

Schedule D (Form 990) 2015

532053 09-21-15

Par	t XI Reconciliation of Revenue per Audited Financial State	ments With Reve	enue per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a		
1	Total revenue, gains, and other support per audited financial statements		1	174,384.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments	. 2a		
b	Donated services and use of facilities	2b		
C	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		_
e	Add lines 2a through 2d	••	2e	0,
3	Subtract line 2e from line 1		3	174,384.
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		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	· · · · · · · · · · · · · · · · · · ·	5	174,384.
Pai	t XII Reconciliation of Expenses per Audited Financial State		enses per Retum	•
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a.	<del></del>	
1	Total expenses and losses per audited financial statements		1_1	<u>153,447.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities			
b	Prior year adjustments	2b		
C	Other losses	2c		
d	Other (Describe in Part XIII.)	_2d_		_
е	Add lines 2a through 2d		. 2e	0.
3	Subtract line 2e from line 1		. 3	153,447.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII )	4b		_
С	Add lines 4a and 4b		4c	0.
_5_	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	153,447.
	t XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; F			
PAI	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any  RT X, LINE 2:  B. GENERALLY ACCEPTED ACCOUNTING PRINCIP:			GEMENT TO
EV	ALUATE TAX POSITIONS TAKEN BY THE LOCAL	AND RECOGNI	ZE A TAX LIZ	ABILITY
<u>(O</u>	R ASSET) IF THE LOCAL HAS TAKEN AN UNCER	TAIN POSITI	ON THAT MORI	LIKELY
TH	AN NOT WOULD NOT BE SUSTAINED UPON EXAMI	NATION BY T	HE INTERNAL	REVENUE
SE	RVICE. THE LOCAL IS SUBJECT TO ROUTINE A	UDITS BY TA	XING JURISD	CTIONS;
HOI	WEVER, THERE ARE CURRENTLY NO AUDITS FOR	ANY TAX PE	RIODS IN PRO	OGRESS.
110	VEVER, THERE THE COMMINIST NO MOSTES TON			
		<del>-</del>		<del></del>
			_	

#### SCHEDULE L

Department of the Treasury

(Form 990 or 990-EZ)

#### Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open To Public Inspection

Internal Revenue Service Name of the organization INTERNATIONAL ASSOC OF HEAT & FROST **Employer identification number** 42-6076559 INSULATORS LU 74 Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (b) Relationship between disqualified (d) Corrected? (a) Name of disqualified person (c) Description of transaction person and organization Yes No 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, rf any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (d) Loan to or from the (h) Approved (a) Name of (b) Relationship (e) Original (i) Written (c) Purpose (f) Balance due (g) in by board or committee? (i) Written agreement? interested person with organization of loan principal amount default? organization? To From Yes\_ Yes No No Yes No FORMER BUNAUTHOR TED WATSON X 0 2,323 X X 323 ▶ \$ <u>Total</u> Grants or Assistance Benefiting Interested Persons. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (c) Amount of (e) Purpose of (d) Type of (b) Relationship between interested person and assistance assistance assistance the organization

SEE PART V FOR CONTINUATIONS

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

532131 10-02-15

Schedule L (Form 990 or 990-EZ) 2015

#### INTERNATIONAL ASSOC OF HEAT & FROST

Schedule L (Form 990 or 990-EZ) 2015 INSULATORS LU 74 42-6076559 Page 2 Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of (a) Name of interested person (b) Relationship between interested (c) Amount of (d) Description of organization's person and the organization transaction transaction revenues? <u>Yes</u> No Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions) SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS: (A) NAME OF PERSON: TED WATSON (B) RELATIONSHIP WITH ORGANIZATION: FORMER BUSINESS MANAGER (C) PURPOSE OF LOAN: UNAUTHORIZED CASH ADVANCES

#### **SCHEDULE 0**

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

Open to Public Inspection

OMB No 1545-0047

Name of the organization

INTERNATIONAL ASSOC OF HEAT & FROST

**Employer identification number** 

INSULATORS_LU_74	<u>42-6076559</u>
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION M	ISSION:
PLACEMENT, AND ONGOING WORKERS TO JOIN THE UNION.	
FORM 990, PART VI, SECTION A, LINE 6:	
THE MEMBERSHIP OF THE LOCAL IS MADE UP OF JOURNEYMEN, FO	DREMEN, APPRENTICES,
IMPROVERS, AND RETIREES.	
FORM 990, PART VI, SECTION A, LINE 7A:	
ONLY THE JOURNEYMEN AND FOREMEN ARE ELIGIBLE TO VOTE IN	LOCAL ELECTIONS.
FORM 990, PART VI, SECTION A, LINE 7B:	
ONLY THE JOURNEYMEN AND FOREMEN ARE ABLE TO APPROVE SIGN	NIFICANT DECISIONS
OF THE GOVERNING BODY.	
FORM 990, PART VI, SECTION A, LINE 8B:	
THE LOCAL HAS NO COMMITTEE WITH THE AUTHORITY TO ACT ON	BEHALF OF THE
GOVERNING BODY.	
FORM 990, PART VI, SECTION B, LINE 11:	
THE FORM 990 IS PROVIDED TO THE PRESIDENT TO REVIEW AND	APPROVE. THE
PRESIDENT PRESENTS THE FORM 990 TO THE REST OF THE EXECU	JTIVE BOARD AT THEIR
SUBSEQUENT MEETING.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE LOCAL MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL ST	FATEMENTS AVAILABLE
TO THE PUBLIC UPON REQUEST.	

Name of the organization	INTERNATIONAL INSULATORS LU		EAT & FROST	<u> </u>	Employer identification number $42-6076559$
FORM 990, PAR	r XII, LINE 1:				
MODIFIED CASH	BASIS OF ACCO	UNTING		_	
FORM 990, PAR	T XII, LINE 2C	:			
THE EXECUTIVE	BOARD ASSUMES	RESPONSIBI	LITY FOR OV	ERSIGHT (	OF THE AUDIT
AND FOR THE S	ELECTION OF AN	INDEPENDEN	T ACCOUNTAN	T.	
			<del></del>		