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#### EXTENSION APPROVED THROUGH NOVEMBER 15, 2017

**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.

Open to Public

OMB No 1545-0047

Department of the Treasury

111101	nui i tot	information about Form 990 and its mist uctions is at w	WW.IIS	.007/10/11/990		The interpretation of
A	For ți	ne 2016 calendar year, or tax year beginning and endin	g			
В	Check	C Name of organization		D Employer ide	entifica	tion number
	applica	NATIONAL ELECTRICAL CONTRACTORS	- 1	D Linployer ide		idon nampei
	~ Add					
<u></u>	char	ge ASSUCIATION OF IOWA	{			
	Nam Char			4.2	<u>-06</u>	63119
	retu	Number and street (or P.O. box if mail is not delivered to street address)  Room	/suite	E Telephone nu	mber	
=	 ⊃Fına	8101 PTPCHWOOD COUPE		•		78-2341
ــــا	retur	In-			<u> </u>	678,240.
	ated		ł	G Gross receipts \$		<del></del>
L	_j retur	n UOMASION, IA JULII		H(a) Is this a gro	up retu	
<u></u>	_App.	F Name and address of principal officer. ANGELIA BOWERSON	- 1	for subordir	nates?	Yes X No
	pend	SAME AS C ABOVE	1	H(b) Are all subordin	ates incli	uded? Yes No
1 7	ax-e	xempt status: 501(c)(3) X 501(c) ( 6 )  (insert no.) 4947(a)(1) or	527	if "No." atta	ich a lis	st (see instructions)
		ite: WWW.IOWANECA.ORG		H(c) Group exem		
			year o	i formation: 194	/   M :	State of legal domicile: IA
[P	art I	Summary				
4.	1	Briefly describe the organization's mission or most significant activities: AFFILIA	TION	OF ELEC	TRIC	CAL
ခွ	1	CONTRACTORS				
Activities & Governance	2	Check this box I if the organization discontinued its operations or disposed of	more t	han 25% of its ne	t asset	rs
Ē	1 ~	·			1 _ 1	13
ő	3	Number of voting members of the governing body (Part VI, line 1a)			3	13
<u>ح</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)		•	14	~
ຶ່ນ	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)			5	4
Ę	6	Total number of volunteers (estimate if necessary)			6	0
Э	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			7a	0.
ð	,	Net unrelated business taxable income from Form 990-T, line 34			7b	0.
~	<del> </del>	THO United Sasified Carasis income nem commerce if income	$\top$	Prior Year	1:3	Current Year
201 <b>7</b>	_	O. d. b. do. o. a. d. anada (O. d.) (III. I. a. d.b.)	-		0.	0.
<b>≈</b> ≥	8	Contributions and grants (Part VIII, line 1h)				
	9	Program service revenue (Part VIII, line 2g)	<b> </b>	709,73		490,891.
1 1 Reven	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	29,55		-47,980.
۳.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11ERECEIVED			0.	0.
SEP	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		739,29	1.	442,911.
-,-	13	Grants and similar amounts paid (Part IX, column (A) lines (3)	280		0.	0,
SCANNED	1	Benefits paid to or for members (Part IX, column (A), line 4) SEP 0 1 2017	181		0.	0.
<b>"</b>			101	278,72		300,813.
Ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	18			
A	16a	Professional fundraising fees (Part IX, column (A), line 11e) OGDEN. UT			0.	<u>0.</u>
တ္တန္မ	b	Total fundraising expenses (Part IX, column (D), line 25)	-	<u> </u>		<u>, (32) (3344) (4.327</u>
S S	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	L	299,00	5.	404,205.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		577,72	6.	705,018.
	19	Revenue less expenses. Subtract line 18 from line 12		161,56		-262,107.
- 0		Trevende 1635 expenses. Outstate inte 16 front inte 12	Posi	inning of Current Yo		
Assets or Balances			Den			End of Year
sset	20	Total assets (Part X, line 16)	<b> </b>	1,427,56		1,561,271.
₽₽	21	Total liabilities (Part X, line 26)	ļ	8,70		330,469.
<u> 2</u>	22	Net assets or fund balances Subtract line 21 from line 20	<u>. 1</u>	1,418,85	4.	1,230,802.
Pa	rt II	Signature Block				
Unde	er pen	alties of perjury, I declare that I have examined this return, including accompanying schedules and st	atemen	ts, and to the best of	of my kr	nowledge and belief, it is
		ct, and complete, Demarator of preparer (bither than officer) as beset on all information of which pre				, IV 10
400,	00110	and complete schalars and the state of an information of which pro	parer in	3 1117 11101113	7 <i>दा</i>	つれて
		Signature of officer		Date	<u> 24</u>	201
Sigr	1			Date #	ı	
Here	Э	ANGELA BOWERSOX, EXECUTIVE DIRECTOR				
		Type or print name and title				
		Print/Type preparer's name Preparer's signature	Da		k	PTIN
Paid		JAMES J. HINGTGEN Jame D. Hunton, CPA	8/	22/2017   if self-e	employed	P01301731
		A TOTAL TOTA				42-0794029
Prep				Firm's EIN	<b></b>	34-0134043
Use	Unly	Firm's address 1601 22ND STREET, SUITE 400				005 0400
		WEST DES MOINES, IA 50266-1453		Phone no.	<u> 515-</u>	-225-8400
May	the I	RS discuss this return with the preparer shown above? (see instructions)		<del></del>		X Yes No

### NATIONAL ELECTRICAL CONTRACTORS

Part III   Statement of Program Service Accomplishments	Page 2	42-0663119	4,	ATION OF IOWA		
AFFILIATION OF BLECTRICAL CONTRACTORS    Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?   Yes   X	<u></u>			•	<del></del>	Par
AFFILIATION OF ELECTRICAL CONTRACTORS  2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2?  If "Yes," describe these new services on Schedule O.  Did the organization saces conducting, or make significant changes in how it conducts, any program services? \to Yes \tilde{X} 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.  (code   ) (Sepenses \$ 355,691. including grants of \$ ) (Revenue \$ 490,89 TO ARRANGE AND FROMOTE MEETINGS, LABOR RELATIONS, TRAINING, AND INSTRUCTIONAL PROGRAMS, AND TO CONDUCT NEGOTIATIONS FOR ELECTRICAL CONTRACTORS.  4b (Code   ) (Expenses \$ 100,000 AND TO CONDUCT NEGOTIATIONS FOR ELECTRICAL CONTRACTORS.		<del></del>	t III			
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule 0.  3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  If "Yes," describe these changes on Schedule 0.  4 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.  4a (Code ) (Expenses \$ 355,691. mcluding grants of \$ ) (Revenue \$ 490,89 TO ARRANGE AND PROMOTE MEETINGS, LABOR RELATIONS, TRAINING, AND INSTRUCTIONAL PROGRAMS, AND TO CONDUCT NEGOTIATIONS FOR ELECTRICAL CONTRACTORS.						-
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prior Form 990 or 990-E27			ear which were not listed on the	afficient program services during the ve	id the organization undertake any significa	
If "Yes," describe these new services on Schedule O.  Describe 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.  4a (Code	XNo	Vec	which were not listed on the		Farma 000 an 000 F70	_
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Ad Other program on your (December) Schoolyle (C)				de de de O V	**************************************	
4d Other program services (Describe in Schedule O.)		•	) /n			40
(Expenses \$ including grants of \$ ) (Revenue \$ )  4e Total program service expenses ▶ 355,691.			Hevenue \$			
4e Total program service expenses ► 355,691.				333,034.	otal program service expenses	<u>4e</u>

Form 990 (2016) ASSOCIATION OF IOWA
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)?	1		
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		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		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	İ		
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			1
	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,			ľ
	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	]		Ì
	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			1
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
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	``	, x	, 3 <u>8</u> 3.
	as applicable.	<b>(</b> )	F}	
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 167 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	111	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	<u> </u>	
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		<u> </u>
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		ľ	
	or more? If "Yes," complete Schedule F, Parts I and IV .	14b		<u> </u>
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		<u>_X</u> _
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		ı	
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		_ <u>X</u> _
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		ĺ	
	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		l	
	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,"			
	complete Schedule G. Part III	19		X
		Form	<b>990</b> (	2016)

orm 990 (2016)	ASSOCIATION OF IOWA	42-0663119 Page
art IV Checklist	of Required Schedules (continued)	

	•		res	_ NO
20a	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		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		1	
	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		1	
	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		1	1
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	]		
	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	1		1
	Schedule K. If "No", go to line 25a	24a	L	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	L
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	ľ		
	any tax-exempt bonds?	24c	<u> </u>	<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	1		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	<u> </u>	<b>ļ</b>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	į	l	l
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	1		j
	Schedule L, Part I	25b	ļ	<del> </del>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	İ		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26	<u> </u>	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			1
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			v
~~	of any of these persons? If "Yes," complete Schedule L, Part III	27	5	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	1,2		4
_	instructions for applicable filing thresholds, conditions, and exceptions)  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	300	× -	X
a	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b	_	X
b	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
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?	-		
	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		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			ł
	Part V, line 1	34		X
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			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	1
	Note. All Form 990 filers are required to complete Schedule O	38	X 000	(004.5)
		Form	3 <b>3</b> U	(2016)

ASSOCIATION OF IOWA

Pai	Check if Schedule O contains a response or note to any line in this Part V			<u></u>
	Check if Schedule O contains a response of note to any line in this hart v		<u> </u>	┰┺═┸
4-	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	4 ^		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1	<b>`</b> , ,
C	(gambling) winnings to prize winners?	1c		<del>                                     </del>
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	<u> </u>	1
20	filed for the calendar year ending with or within the year covered by this return	\$. <sup>1</sup>	444	
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	<u> </u>
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	3 2	24	, ×
32	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		<del></del>
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			$\vdash$
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:	ξ,	1	£, ,
_	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		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	7 March 1997 1997 1997 1997 1997 1997 1997 199			
	any contributions that were not tax deductible as chantable 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).	Ĭ.	\$ \\ \tag{2}	\$
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		
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		
đ	,	***	\$ "	,\$
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	<b> </b>	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<b>  </b>	<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	<b>——</b>	<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<del>-</del>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	<del>  `  </del>		6
	sponsoring organization have excess business holdings at any time during the year?	8		<del>-</del> -
9	Sponsoring organizations maintaining donor advised funds.	- 33	4 /	
a	Did the sponsoring organization make any taxable distributions under section 4966?	_9a		<u> </u>
_	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter.  Initiation fees and capital contributions included on Part VIII, line 12	,	ا ا	\$
a h	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10a  10b		1	*
ь 11	Section 501(c)(12) organizations. Enter:			
''	Gross income from members or shareholders	3	<b>(</b>	
b	Gross income from other sources (Do not net amounts due or paid to other sources against	\		
_	amounts due or received from them.)	,	^	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	×		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	_`		
	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	复	,	1
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	] ]	1	
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		
		Form	990	(2016)

ASSOCIATION OF IOWA

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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 Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 13 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? 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? 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 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a Х b Each committee with authority to act on behalf of the governing body? 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, X and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X Did the organization have a written whistleblower policy? 13 13 X Did the organization have a written document retention and destruction policy? 14 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? X a The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed -NONE 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 X Upon request Own website Another's website 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, address, and telephone number of the person who possesses the organization's books and records ANGELA BOWERSOX - 515-278-2341 8191 BIRCHWOOD COURT, SUITE G. JOHNSTON 50131 Form 990 (2016) 632006 11-11-16

Form 990 (2016)

ASSOCIATION OF IOWA

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

Check if Schedule (	contains a res	sponse or note t	o any lin	ne 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

(A)	(B)	(C) Position						(D)	(E)	(F)
Name and Title	Average hours per		do not check more than one lox, unless person is both an					Reportable compensation	Reportable compensation	Estimated amount of
	week	offi	cer an	d a d	recto	r/trus	tee)	from	from related	other
	(list any	ctor			İ	1		the	organizations	compensation
	hours for	or dir	e;			ated		organization	(W-2/1099-MISC)	from the
	related	ustee	truste		, s	bens		(W-2/1099-MISC)		organization
	organizations below	lual tr	nstitutional trustee		nploye	yee y	_			and related organizations
	line)	Individual trustee or director	Institu	Officer	Key employee	Highest compensated employee	Former		'	organizations
(1) DAVE GILL	3.00									
GOVERNOR		Х		Х		L	Ш	0.	0.	0
(2) BARNEY POTTEBAUM	5.00					1		_	_	
PRESIDENT		X		Х	ļ	L		0.	0.	0
(3) RON THIELEN	2.00		1		}	1		_	_	_
VICE PRESIDENT	<del> </del>	X	:	X	<u> </u>	L-		0.	0.	0
(4) TOM KECK	2.00				l	l				
TREASURER	<del>                                     </del>	X	Щ	Х	╙	<b> </b>	Щ	0.	0.	0
(5) KELLY REAMES	0.50	٠,,			ì				•	
MEMBER AT LARGE/DIRECTOR	0.50	Х	$\vdash$		┡	<u> </u>	$\vdash$	0.	0.	0
(6) TIM WILSON DIRECTOR	0.50	x						_	0	
(7) DENNIS VOS	0.50	^	$\vdash$	_	-	├-	$\vdash$	0.	0.	0
DIRECTOR	0.30	x						0.	0.	•
(8) LENNIE THIELEN	0.50	^	$\vdash$		├─	├	$\vdash$	<u> </u>		0
DIRECTOR	0.30	x			l			0.	0.	0
(9) ROBERT DANDURAND	0.50	=	$\vdash$		<del>                                     </del>	$\vdash$	$\vdash$			
DIRECTOR		x			l			0.	0.	0
(10) TOM KECK	0.50				$\vdash$					
DIRECTOR		х			i			0.	0.	0
(11) CHRIS AZINGER	0.50									
DIRECTOR		X			İ			0.	0.	0
(12) GREG BEMRICH	0.50									
DIRECTOR		Х						0.	0.	0
(13) CHRIS WELLS	0.50									
DIRECTOR		X				L.		0.	0.	0
(14) ANGELA BOWERSOX	40.00							_		
SECRETARY/MANAGER		<u> </u>		X	<u> </u>	L.		119,150.	0.	19,985
		$\vdash$			<u> </u>	-	H			
					L	L				
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Form 990 (2016)

ASSOCIATION OF IOWA

Par	VIII Section A Officers Directors True		olovi		000	ı U:.	- b - a		omnopostod Employee			<u> </u>	<u>`</u>	age
<u> </u>	T OCCULON 7 II OTHOCKO, DIR COLLONS, 77 IIIO	ľ	DIOY	ees,			gnes	it C				Т		
	(A)	(B)			(C Posi				(D)	(E)		_	(F)	
	Name and title	Average		not c	heck r	more	than c		Reportable	Reportable			stimate	
	•	hours per week					s both		compensation	compensation		l a	mount	
		(list any	$\vdash$	T				, 	from	from related			other	
		hours for	director		l i				the	organization			npensa	
		related	5	eg.			sated		organization (W-2/1099-MISC)	(W-2/1099-MIS	3C)	ľ	rom th	
		organizations	nster	suri		8	ned u		(VV-2/1095-WIGC)				ganızat ıd relat	
		below	tal tr	tiona	1.1	yoldı	ye st	_				l .	anızatı	
		line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compens employee	Former	i			0.9	uzu.	0113
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	Sub-total	• •							119,150.	<del></del>	0.	┷	9,9	
	Total from continuation sheets to Part VI	l, Section A							0.		0.	_		0.
<u>d</u>	Total (add lines 1b and 1c)	· · ·						<u> </u>	119,150.	<del></del>	0.		9,9	85.
2	Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,0	000 of reportable	)			_
	compensation from the organization				_			_					<del></del>	1
											(		Yes	No
3	Did the organization list any former officer,	director, or tru	ıste	e, ke	у еп	nplo	yee,	or i	highest compensated em	nployee on	- 1			z.
	line 1a? If "Yes," complete Schedule J for si	uch individual									.	3	<u>L</u>	X
4	For any individual listed on line 1a, is the su	m of reportabl	е со	mpe	ensa	tion	and	oth	ner compensation from th	ne organization				~ ′
	and related organizations greater than \$150	0,000? If "Yes.	" со	mple	ete S	Sche	dule	Jf	or such individual			4		Х
5	Did any person listed on line 1a receive or a	•		•						ual for services		× .		7.0%
	rendered to the organization? If "Yes." com					-			- <b>3</b>			5		X
Sec	tion B. Independent Contractors					2127.11			·					
1	Complete this table for your five highest co	mnensated ind	lene	nde	nt co	ontra	actor	rs th	nat received more than \$	100 000 of comp	ensa	tion fr		
•	the organization Report compensation for the	•								•	CHISA		,,,,	
	(A)	ine carendar ye	Jui C	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· <u>g</u> ••		<i>71</i> <b>VV</b> 1	Ţ	(B)	T		((	"	
	Name and business	address	NC	INC	2				Description of se	ervices	С		יי nsatior	n
								1	<del></del>					
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		··· <u> </u>						$\perp$	<u> </u>					
2	Total number of independent contractors (in	ncluding but no	ot fir	nıted	d to t	thos	e lis	ted	above) who received mo	re than			·	
	\$100,000 of compensation from the organiz	zation				(	)		<u></u>					

Page 9

		Check if Schedule O cont	ains a response (	or note to any lir	ne in this Part VIII			
.*			*, *		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ice Contributions, Gifts, Grants and Other Similar Amounts			ts, and ve 1f 1	Business Code	381,645.	381,645.		
Program Service Revenue		b ADMINISTRATIVE		900099	86,949.	86,949.		
o S		c BENEFITS FUND A	DMINIST	900099	22,297.	22,297.		
e a		d	·-···					
5		e						
Δ.		f All other program service reve	nue .		400 001			
		g Total. Add lines 2a-2f			490,891.	37 3%	2.5	
	4 5	Investment income (including other similar amounts) Income from investment of tax Royalties		<b>&gt;</b>	23,929.			23,929.
	_	,	(i) Real	(II) Personal	} \$ ; \$	"Ж : `3	2, 1	3 % \$
		a Gross rents b Less: rental expenses c Rental income or (loss)	(I) Fledi	(ii) i ersonal				
		d Net rental income or (loss)						
	7	<ul> <li>a Gross amount from sales of assets other than inventory</li> <li>b Less cost or other basis and sales expenses</li> </ul>	(i) Securities 163,420. 208,065. -44,645.	(ii) Other 27,264. -27,264.	ming control of the c	The state of the s		and the state of t
		c Gain or (loss)	44,045.	-21,204.	71 000	\$ b \$ \$ \$ \$	3 >	71 000
Other Revenue	_	d Net gain or (loss)  a Gross income from fundraising including \$  contributions reported on line Part IV, line 18	of 1c) See	•	-71,909.			-71,909.
Other		b Less: direct expenses c Net income or (loss) from fund a Gross income from gaming act			***			
;		Part IV, line 19 b Less: direct expenses c Net income or (loss) from gami	a b	<b>•</b>	3			8 2
		<ul> <li>a Gross sales of inventory, less r</li> <li>and allowances</li> <li>b Less: cost of goods sold</li> </ul>	returns a b				,	\$\land{\chi}
Į		Net income or (loss) from sales	of inventory	<b>&gt;</b>				
[		Miscellaneous Revenue	•	Business Code	` `	· ·		
	11 a	a	·					
- [	•	d All other revenue						
	12	Total. Add lines 11a-11d  Total revenue. See instructions.			442,911.	490,891.	0.	-47,980.

Part IX Statement of Functional Expenses

	Check if Schedule O contains a responsi not include amounts reported on lines 6b,	(A) Total expenses	<b>(B)</b> Program service	(C) Management and	( <b>D)</b> Fundraising
7b, 8	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21			83 6 64 6° 8°. 18	
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	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,	120 125			
	trustees, and key employees	139,135.		<del></del>	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	111 020			· · · · · · · · · · · · · · · · · · ·
7	Other salaries and wages	111,039.		<del></del>	<del> </del>
8	Pension plan accruals and contributions (include	5 026			
	section 401(k) and 403(b) employer contributions)	5,926. 26,992.			
9	Other employee benefits	17,721.			
10	Payroll taxes	11,121.			
11	Fees for services (non-employees).				
a	Management	2,607.			
b	Legal	9,725.		<del></del>	
С.	Accounting	12,500.	<del></del>	<del></del>	<del></del>
ď	Lobbying	12,500.			
e	Professional fundraising services. See Part IV, line 17	7,353.		<u> </u>	
f	Investment management fees Other. (If line 11g amount exceeds 10% of line 25,	7,333.			
g	column (A) amount, list line 11g expenses on Sch O.)				
40	Advertising and promotion	22,977.	<del></del>		
12 13	Office expenses	30,732.			
14	Information technology	307.523	<del></del>		
15	Royalties				
16	Occupancy	52,703.			
17	Travel	32,749.			
18	Payments of travel or entertainment expenses				
.0	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	150,676.			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	35,359.			
23	Insurance	4,859.			
24	Other expenses. Itemize expenses not covered			1 1. 1. 1.	
	above. (List miscellaneous expenses in line 24e. If line		1 % X Y S + Z		
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	T DOTOL VIDALIA	28,854.			
b	DUES	8,330.			
С	LABOR RELATIONS	4,781.			
d					ļ
е	All other expenses	<del></del>			ļ
25	Total functional expenses. Add lines 1 through 24e	705,018.			
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined			1	l
	educational campaign and fundraising solicitation.			1	
	Check here if following SOP 98-2 (ASC 958-720)		1	1	

Form 990 (2016)
Part X | Balance Sheet

Part_	X	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	Ine in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			589,044.	1	564,764
	2	Savings and temporary cash investments				2	
- 1	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net	76,033.	4	54,833		
	5	Loans and other receivables from current and fo	rmer of	ficers, directors,	A CARRY DO	ž '	7.4.
		trustees, key employees, and highest compensa					
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqualif	fied per	sons (as defined under	· · · · · · · · · · · · · · · · · · ·	820	1 3 1 1 1 1 1 1 1 1
		section 4958(f)(1)), persons described in section		\{ }			
		employers and sponsoring organizations of secti	-			7	
gg		employees' beneficiary organizations (see instr)			- ` ` `	6	***
Assets	7	Notes and loans receivable, net				7	<del> </del>
₽ Ps	8	Inventories for sale or use		••		8	<u> </u>
	9	Prepaid expenses and deferred charges	•		4,864.	9	5,717
1	0a	Land, buildings, and equipment cost or other	1 1			233	3.4% . 3.53.
		basis Complete Part VI of Schedule D	10a	258,535.		, š /	
	b	Less accumulated depreciation	10b	41,407.	84,779.	10c	217,128
1	1	Investments - publicly traded securities		· · · · · · · · · · · · · · · · · · ·	672,843.	11	718,829
1	2	Investments - other securities. See Part IV, line 1		12	,,,,,,		
1	3	Investments program-related See Part IV, line 1		13			
1	4	Intangible assets		14			
1	5	Other assets. See Part IV, line 11		15			
1	6	Total assets. Add lines 1 through 15 (must equa	al line 3	4)	1,427,563.	16	1,561,271
1	7	Accounts payable and accrued expenses			8,709.	17	330,469
1:	8	Grants payable		18			
1	9	Deferred revenue		•		19	
2	0	Tax-exempt bond liabilities				20	
2	1	Escrow or custodial account liability. Complete F	Part IV o	of Schedule D		21	
ဖ္မ 2	2	Loans and other payables to current and former	officers	, directors, trustees,		4	
Liabilities		key employees, highest compensated employees	s, and c	disqualified persons			
ia		Complete Part II of Schedule L		•		22	
4		Secured mortgages and notes payable to unrelate				23	
2		Unsecured notes and loans payable to unrelated				24	
2	5	Other liabilities (including federal income tax, pay				1	
		parties, and other liabilities not included on lines	17-24)	Complete Part X of			
_		Schedule D		•	9 700	25	220 460
2	<u> </u>	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958)		here X and	8,709.	26	330,469.
		complete lines 27 through 29, and lines 33 and		there <b>X</b> and		< .	
Se 2		Unrestricted net assets	u 54.		1,418,854.	27	1,230,802.
la 2		Temporarily restricted net assets		•	1,410,034.	28	1,230,002
8 2		Permanently restricted net assets		•	· +	29	·
=		Organizations that do not follow SFAS 117 (AS	SC 9581	check here	<i>*</i> 40 €2	<u> 29</u>	\
ᇤ		and complete lines 30 through 34.	30 300,	, one or here		900	
\$ 30		Capital stock or trust principal, or current funds			4.1	30	
sse 3		Paid-in or capital surplus, or land, building, or equ	uipmen	t fund		31	
Net Assets or Fund Balances		Retained earnings, endowment, accumulated inc				32	
ž   3		Total net assets or fund balances	-, -		1,418,854.	33	1,230,802.
34		Total liabilities and net assets/fund balances			1,427,563.	34	1,561,271.
							Form <b>990</b> (2016

Form **990** (2016)

COLL	1990 (2010) 1100 0 1111 1 2011		<u> </u>	Гау	ye z
Pai	rt XI Reconciliation of Net Assets				
	. Check if Schedule O contains a response or note to any line in this Part XI		·		
		1			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,9	
2	Total expenses (must equal Part IX, column (A), line 25)	2			18.
3	Revenue less expenses. Subtract line 2 from line 1	3	-262		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,41	8,8	54.
5	Net unrealized gains (losses) on investments	5	7	4,0	55.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	_10	1,23	0,8	02.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			>	, 200 (000)
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.		<b>%</b> ,	2000 2000 2000 2000 2000 2000 2000 200
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	on a	i.a.	. 3	200 s
	separate basis, consolidated basis, or both:		n y		8
	Separate basis Consolidated basis Both consolidated and separate basis		\$	"	
b	Were the organization's financial statements audited by an independent accountant?		2b	$\bar{\mathbf{x}}$	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,	. ,	4.3	***
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis		) E		) 53.5 23.3
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,	å	1	100
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O	***	*	200
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audr	nt 👯	<b>*</b>	} .}{
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit	t   T		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3ь	ŀ	

# 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.

OMB No 1545-0047
2016

Open to Public Inspection

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

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

- 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), then				
<ul> <li>Section 501(c)(4), (5), or (6) organizate</li> </ul>	ions: Complete Part III			
Name of organization NATIONA	L ELECTRICAL CON	TRACTORS	Emp	loyer identification number
	TION OF IOWA			<u>42-0663119</u>
Part I-A   Complete if the org	anization is exempt und	er section 501(c)	or is a section 527 or	ganization.
1 Provide a description of the organiz	ation's direct and indirect politic	al campaign activities	ın Part IV.	
2 Political campaign activity expendit	ures		▶ \$	·
3 Volunteer hours for political campai	gn activities .		•••	
Part I-B   Complete if the org	anization is exempt und	er section 501(c)	(3).	
1 Enter the amount of any excise tax			> \$	<del></del>
2 Enter the amount of any excise tax	, -			
3 If the organization incurred a section			•	Yes No
4a Was a correction made?			•	Yes No
b If "Yes," describe in Part IV.	•	•	•	
Part I_C Complete if the org	anization is exempt und	er section 501(c)	except section 501(c	)(3).
1 Enter the amount directly expended	by the filing organization for se	ction 527 exempt fund	tion activities > \$	·
2 Enter the amount of the filing organ	ization's funds contributed to ot	her organizations for s	ection 527	
exempt function activities			. ▶\$	
3 Total exempt function expenditures	Add lines 1 and 2 Enter here a	and on Form 1120-POL	<del>-,</del>	
line 17b			▶ \$	
4 Did the filing organization file Form	1120-POL for this year?			Yes No
5 Enter the names, addresses and en	nployer identification number (Ell	N) of all section 527 po	olitical organizations to which	the filing organization
made payments For each organiza	tion listed, enter the amount paid	d from the filing organi	zation's funds. Also enter the	e amount of political
contributions received that were pre-	omptly and directly delivered to a	a separate political org	anization, such as a separat	e segregated fund or a
political action committee (PAC) If	additional space is needed, prov	ride information in Part	i IV.	
(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
			is a second	If none, enter ∙0
				ļ
		l		

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

Schedule C (Form 990 or 990-EZ) 2016

LHA

632041 11-10-16

#### NATIONAL ELECTRICAL CONTRACTORS

Schedule C (Form 990 or 990-EZ) 2016  Part II-A   Complete if the org	ASSOC janizatio	IATION on is exem	OF IC	WA r section	501(c)	(3) and file	42-0 ed Form 5768 (ele	663119 Page 2
section 501(h)).			<del>-</del> :				<del></del>	<del></del>
<del>-</del> -		_			Part IV e	ach affiliated	d group member's nam	e, address, EIN,
expenses, and sha			•	•		_		
B Check ▶ if the filing organiza	ation check	ked box A an	<u>d "limited o</u>	control" pro	visions a	pply.	T	
Limi (The term "expen		bying Expen neans amou		incurred.)			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infli	uence pub	lic opinion (g	rass roots	lobbying)				
b Total lobbying expenditures to infli	uence a le	gislative bod	y (direct lol	obying)				
c Total lobbying expenditures (add in	ines 1a an	d 1b)	-	,				
d Other exempt purpose expenditure	es	•				·		
e Total exempt purpose expenditure		 s 1c and 1d)				•		
f Lobbying nontaxable amount Enter				able in both	n columns	S		
If the amount on line 1e, column (a) of				axable am			7.5% X 85°	2 4
	<u> </u>			on line 1e.	ount is.			
Not over \$500,000	0.000					\$500,000		
Over \$500,000 but not over \$1,00				of the exc				
Over \$1,000,000 but not over \$1,5						\$1,000,000		
Over \$1,500,000 but not over \$17	,000,000			of the exces	ss over \$	1,500,000.		
Over \$17,000,000		\$1,000,0	000		_		Ц	
	<del></del> -						3	" \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
g Grassroots nontaxable amount (er		•					<del></del>	
h Subtract line 1g from line 1a. If zer	o or less,	enter -0-						<del> </del>
i Subtract line 1f from line 1c If zero	o or less, e	enter -0-					L	L
j If there is an amount other than ze	ero on eithe	er line 1h or li	ine 1i, did t	he organiza	ation file F	Form 4720		
reporting section 4911 tax for this	year?	<del></del>	<u> </u>					Yes No
(Some organizations t		4-Year Ave a section 50 e the separa	)1(h) electi	on do not	have to c	omplete all	of the five columns be	elow.
	Lob	bying Expen	ditures Di	uring 4-Yea	r Averag	ing Period		
Calendar year (or fiscal year beginning in)	(a)	2013	(b) 2	2014	(c	) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount		3.5		<del></del>	2 582	** * *	***	
b Lobbying ceiling amount (150% of line 2a, column(e))		**************************************	******	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		*****		
c Total lobbying expenditures								
d Grassroots nontaxable amount			i					
e Grassroots ceiling amount (150% of line 2d, column (e))	\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				**************************************	\$\ \ \		
f Grassroots lobbying expenditures		I						

Schedule C (Form 990 or 990-EZ) 2016

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)).

of the	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	<del></del>	(a)		(b)	
	lobbying activity.	Yes	No	1	Amount	
1	During the year, did the filing organization attempt to influence foreign, national, state or	0 /		1		
	local legislation, including any attempt to influence public opinion on a legislative matter	****		× ¾ .	3	
	or referendum, through the use of				×.	
	Volunteers?			<b>-</b>	<	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			<b>-1</b> .%	M. 4	
	Media advertisements?			1		
	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?			<del>                                     </del>		
	Grants to other organizations for lobbying purposes?			+	······	
	Direct contact with legislators, their staffs, government officials, or a legislative body?			<del>                                     </del>		
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	-		+		
	Other activities?			<del> </del>		
	Total Add lines 1c through 1i	ž,	}<~			
-			\$`	3 %		
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		3.0	1 ( )	>	
	If "Yes," enter the amount of any tax incurred under section 4912	\$ . \$ . \};	\$ } \$	<u> </u>		
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			3,70	3	
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A   Complete if the organization is exempt under section 501(c)(4),	n F01(a)//	5) 0700	♥	X 247	
i, ai t	501(c)(6).	)	o), or se	ction		
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		1	Yes	No X	
	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?		1 2	Yes		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the lili-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	on 501(c)(	2 3 5), or se	ction	X X X	
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the lili-B Complete if the organization is exempt under section 501(c)(4), sec	on 501(c)(	2 3 5), or se (b) Part	ction	X X X ine 3, is	
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the lili-B. Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members	on 501(c)(t "No," OR	2 3 5), or se	ction	X X X	
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the lili-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	on 501(c)(t "No," OR	2 3 5), or se (b) Part	ction	X X X ine 3, is	
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	on 501(c)(t "No," OR	2 3 5), or se (b) Part	ction III-A, li	X X X ine 3, is	
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	on 501(c)(t "No," OR	2 3 5), or se (b) Part	ction III-A, li	X X X ine 3, is	
2 3 Part 1 2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	on 501(c)(t "No," OR	2 3 5), or se (b) Part	ction III-A, li	X X X ine 3, is 81,645.	
2 3 Part 1 2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	on 501(c)(t "No," OR	2 3 5), or se (b) Part	ction III-A, li	X X X ine 3, is	
2 3 Part 1 2 a b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	on 501(c)(t "No," OR	2 3 5), or se (b) Part 1 2a 2b 2c 3	ction III-A, li	X X X ine 3, is 81,645.	
2 3 Part 1 2 a b c	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues lif notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3.	on 501(c)(t "No," OR	2 3 5), or se (b) Part 1 2a 2b 2c 3	ction III-A, li	X X X ine 3, is 81,645.	
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues lif notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures of nondeductible lobbying and political expenditures (and not include amount on the exceedable estimate of nondeductible lobbying and political expenditures (and not include amount on the exceedable estimate of nondeductible lobbying and political expenditures (and not include amount on the exceedable estimate of nondeductible lobbying and political expenditures (and not include amount on the exceedable estimate of nondeductible lobbying and political expenditures (and not include amount on the exceedable estimate of nondeductible lobbying and political expenditures (and not include amount on the exceedable estimate of nondeductible lobbying and political expenditures (and not include amount on the exceedable estimate of nondeductible lobbying and political expenditures (and not include amount on the exceedable estimate of nondeductible lobbying and political expenditures (and not include amount on the exceedable estimate of nondeductible lobbying and political expenditures (and not include amount on the exceedable estimate of nondeductible lobbying and political expenditures (and not include amount on	on 501(c)(t "No," OR	2 3 5), or se (b) Part 1 2a 2b 2c 3	ction III-A, li	X X X ine 3, is 81,645. 12,500.	
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues lif notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3.	on 501(c)(t "No," OR	2 3 5), or se (b) Part 1 2a 2b 2c 3	ction III-A, li	X X X ine 3, is 81,645.	

## **SCHEDULE D**

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.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION OF IOWA

Employer identification number 42-0663119

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I organization answered "Yes" on Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 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 Held at the End of the Tax Year day of the tax year. Total number of conservation easements 2a 2b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the penodic 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 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 Assets included in Form 990, Part X

Schedule D (Form 990) 2016

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

4	Desc	ribe in	Part >	(III the i	ntended	uses o	f the o	rganizatio	n's endov	<u>vment f</u>	funds.
Pai	<del>i</del> VI	Lar	nd B	uildin	as an	d Faui	nme	nt.		_	

(i) unrelated organizations

(ii) related organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

Description of property	Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (other)		(c) Accumulated depreciation	(d) Book value	
1a Land .					
<b>b</b> Buildings	<u> </u>	145 000	F 030	140 050	
c Leasehold improvements		145,090.	5,038.	140,052.	
d Equipment		62,971.	26,935.	36,036.	
e Other		50,474.	9,434.	41,040.	
Total. Add lines 1a through 1e (Column (d) must equa	l Form 990. Part X. colum	n (B), line 10c.)		217,128.	

Schedule D (Form 990) 2016

3a(i)

3a(ii)

by.

Part VII	Investments - Other Securities.		_		
<del></del>	Complete if the organization answered "Yes"				<del></del>
	tion of security or category (including name of security)	(b) Book value	(c) Method of	valuation. Cost or en	d-of-year market value
	al derivatives	<del></del>	<del> </del>		
	held equity interests	<del></del>	<del> </del>		<del></del>
(3) Other			<del> </del>		<del></del>
(A)			<del> </del>		<del></del>
(B)					
(C)			<del> </del>	<del></del>	
(D)		<del></del>	<del> </del>		
(E)	<del></del>		<del> </del>		
<u>(F)</u> (G)			<del> </del>		
(H)			<del> </del>		<del></del>
	b) must equal Form 990, Part X, col. (B) line 12.)		73 3 4 5 5 4	. * . <u>.</u> *	· * * · * · * · · · ·
	Investments - Program Related.				
	Complete if the organization answered "Yes" (	on Form 990, Part IV, line (b) Book value	e 11c See Form 990	Part X, line 13.	d-of-year market value
	(a) Description of investment	(b) Dook value	(C) Welliod of	Valuation Cost of en	3-Oryear market value
(1)			<del> </del>		
(2)			<del> </del>		
(3)					
(4) (5)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
(6)			<del> </del>		
(7)			<del> </del>		
(8)				· · · · · · · ·	
(9)					
	b) must equal Form 990, Part X, col. (B) line 13.)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3 3 % ' 1 1	X
Part IX	Other Assets.				
	Complete if the organization answered "Yes"		e 11d See Form 990	, Part X, line 15	<b>,</b>
	(a)	Description			(b) Book value
(1)					<del></del>
(2)					ļ
(3)					
(4)					<del></del>
(5)		<del></del>	<del></del>		<del></del>
(6)	<del></del>				
(7)		<del></del>			<del> </del>
(8)			<del></del>	<del></del>	<del> </del>
<u>(9)</u>	4)	45)			
Part X	omn (b) must equal Form 990. Part X. col. (B) line Other Liabilities.				<del></del>
	Complete if the organization answered "Yes"	on Form 990, Part IV, line		m 990, Part X, line 25	·
1	(a) Description of liability		(b) Book value		* * ', ` '
	leral income taxes	·			
(2)				<b>- </b>	
(3)				<b>-</b>	
(4)				┫"、 、	<b>₹</b>
(5)				<b>┧</b> シ シ シ シ	
(6)				┥ `` ^	` ' ( )
				<b>1</b> ` ′	
(8)				1 , ,	,
(9)	man (h) must aqual Form 000 Port V and (D) line	25.)		<b>1</b> `.	` \ .
	<u>imn (b) must equal Form 990, Part X. col. (B) line</u>	•	to the organization's	financial statements t	hat reports the

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) 2016

ASSOCIATION OF IOWA

Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		<del></del>
1	Total revenue, gains, and other support per audited financial statements	1	516,966.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	13 7	
а	Net unrealized gains (losses) on investments 2a 74,055.		
b	Donated services and use of facilities		
С	Recoveries of prior year grants	<b>]</b>	
d	Other (Describe in Part XIII )	è	
е	Add lines 2a through 2d	2e	74,055. 442,911.
3	Subtract line 2e from line 1	3	442,911.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII )	, 8°	
С	Add lines 4a and 4b	4c	<u> </u>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	442,911.
Pa	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses per I	Return	).
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	705,018.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	5 ° °	_
а	Donated services and use of facilities . 2a	<b>)</b> " "	
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII )	]	
е	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	705,018.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	(48)	<del></del>
а	Investment expenses not included on Form 990, Part VIII, line 7b	<b>1</b> , 1	
b	Other (Describe in Part XIII )	11	
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	705,018.
Pa	rt XIII Supplemental Information.	_	
Prov	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b, Part V, line 4	; Part X	, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information		
PAI	RT X, LINE 2:		
<u>ACC</u>	COUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES	OF	AMERICA
REÇ	QUIRE MANAGEMENT TO EVALAUTE TAX POSITIONS TAKEN BY THE CHA	.PTER	AND
REC	COGNIZE A TAX LIABILITY OR ASSET FOR AN UNCERTAIN POSITION	THAT	MORE
LIF	KELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY TH	E IN	TERNAL
RE	VENUE SERVICE. MANAGEMENT HAS EVALUATED THEIR MATERIAL TAX	<u>POS</u>	ITIONS
<u>ANI</u>	DETERMINED THERE ARE NO UNCERTAIN POSITIONS TAKEN OR EXPE	CTED	TO BE
TAI	KEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY OR ASSET	OR D	ISCLOSURE
<u>IN</u>	THE FINANCIAL STATEMENTS.		<del></del>

# NATIONAL ELECTRICAL CONTRACTORS 42-0663119 Page 5 ASSOCIATION OF IOWA Schedule D (Form 990) 2016 ASSOCIATIO Part XIII | Supplemental Information (continued)

#### 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.

OMB No 1545-0047 2016

► Attach to Form 990 or 990-EZ. ■ Information about Schedule O (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

Name of the organization

NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION OF IOWA

Employer identification number 42-0663119

FORM 990, PART VI, SECTION A, LINE 6:
THE ASSOCIATION HAS MEMBERS.
FORM 990, PART VI, SECTION A, LINE 7A:
THE ASSOCIATION'S MEMBERS HAVE THE RIGHT TO ELECT MEMBERS OF THE BOARD OF
DIRECTORS.
FORM 990, PART VI, SECTION B, LINE 11B:
FORM 990 WAS MADE AVAILABLE TO THE BOARD OF DIRECTORS FOR REVIEW BEFORE
FILING WITH THE IRS.
FORM 990, PART VI, SECTION B, LINE 15:
THE BOARD OF DIRECTORS DETERMINES EXECUTIVE DIRECTOR COMPENSATION.
COMPARABLE SALARY INFORMATION OF EXECUTIVE DIRECTORS IN SIMILAR POSITIONS
IS UTILIZED.
FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, POLICIES AND FINANCIAL
STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.
FORM 990, PART VI, SECTION B
THE ORGANIZATION IS IN THE PROCESS OF REVIEWING AND APPROVING POLICIES
CONCERNING CONFLICT OF INTEREST, WRITTEN DOCUMENT AND RETENTION POLICY
AND A WHISTLEBLOWER POLICY.