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Form 990

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.irs.gov/form990.

OMB No 1545-0047 2016

Open to Public Inspection

A	For the 2016 cale	ndar year, or tax					016, and er		3		,		
В	Check if applicable	C Name of organiz	ation ILA	CLERKS	& CHE	CKERS LO	OCAL 17	771	D	Employer is	dentification n	umber	
	Address change	Doing business a								57-60	26500		
	Name change	Number and stre	et (or PO box	x if mail is not de	livered to stree	et address)	R	oom/s	uite E	Telephone r	number		
	Initial return	2113 COURT	LAND A	VENUE						(843)	723-17	74	
	Final return/terminated	City or town, stat	e or province	country and ZIP	or foreign po	stal code				<u> </u>			
	Amended return	CHARLESTON	Į			5	SC 2940	03	G	Gross receip	pts \$ 525	5.347	
	Application pending	F Name and addre	ss of principal	officer					H(a) Is this a gro			Yes	X
	_	ROBERT STRIPLING	G 2113 CC	OURTLAND A	VE CHAR	LESTON	SC 2940	03 [H(b) Are all subd	ordinates inclu	uded?	Yes	_ □ •
ī	Tax-exempt status		501(c) (nsert no)	4947(a)(1		7	it No, attac	n a list (see	instructions)		
,		/A	-1 ` : _ ` `	<u>, , , , , , , , , , , , , , , , , , , </u>	· ·		<u> </u>		H(c) Group exer	nption numbe	er 🕨		
K	Form of organization	X Corporation	Trust	Association	Other -		L Year of for	rmation	1950	M State	of legal domici	ile SC	
Pa	rt I Summa						<u>' </u>						
		be the organizatio	n's missior	n or most sig	nificant act	ivities	PROMOT	E S	OLIDARI	TY AND	MEMBER	WEL	FARE
d)				<u>-</u>			- =	=					
ĕ					. – – – -								
Ĕ													
9	2 Check this b			discontinue							ts		
Activities & Governance		oting members of t								h	3		14
S		ndependent voting									4		14
ا	5 Total number 6 Total number	r of individuals em r of volunteers (est	ployed in c	alendar year	r 2016 (Pai	t V, line 2a)		• •			5		
<u></u>		ed business reven								k	5 7a		247
Act		d business taxable									7b	525 ,	
ᅱ	D Not amount	a basiness taxable	111001110 111	5111 1 01111 550)-1, IIIIC 34			···		Year	-	rrent Ye	0
	8 Contribution	s and grants (Part	VIII line 1h	າ)					FIIO	Tear	Cui	Tent re	aı
<u>e</u>		vice revenue (Part								03,341	 	525,	345
Hevenue		ncome (Part VIII, c								03,341	•	JZJ,	<u> </u>
₽		ue (Part VIII, colum							-		+		
		e – add lines 8 thr							5	03,341		525,	347
		sımılar amounts pa								, , , , , , , , , , , , , , , , , , , ,			
	14 Benefits pair	to or for members	s (Part IX, o	column (A), I	ıne 4) .								
	15 Salaries, oth	er compensation, e	employee t	penefits (Par	t IX, colum	n (A), lines 5	5-10)		2	91,569	, ,	286,	064
Ses	16a Professiona	fundraising fees (F	Part IX, col	umn (A), line	11e)								
Expenses		sing expenses (Pa							U SE	. * *		?	2.0
М				· ·	-							·	
	-	ses (Part IX, colum						一.		42,053		148,	
	19 Revenue les	ses Add lines 13-1 s expenses Subtra	r (must eq	from line 40	Juliiii (A)	とにいない		أن	-	33,622	-	434,	
<u>გ</u>	15 Revenue les	s expenses Subira	act lifte 10	110111 11110 12	+ + -			짱		69,719			150
and a	20 Total assets	(Part X, line 16)			6	1. VON	2017	있	Beginning o		_+	d of Ye	
vet Assets o und Balance		es (Part X, line 16)			309	MOA. T. O	/	RS	_	96,724		647,	
돌					. i. i		T			34,624			928
~"		r fund balances Si	ubtract line	21 from line	20	OGDEN	<u>V, U. I</u>	<u>1</u>	4	62 , 100	<u>. </u>	<u>553,</u>	<u> 250</u>
		re Block											
Unde comp	r penalties of perjury, I d lete Declaration of prep	eclare that T ave examinater (other than officer) is	ed this return, based of all	including accom information of wh	panying sche	dules and staten as any knowled	nents, and to th ge	he bes	t of my knowledg	e and belief,	it is true, correc	t, and	
		Kal A	. 5	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	7	· · · · · ·				1/01	, / -	74	7
ei~	Signa	ure of officer	77	4					I Date	MUL	- 4,	<u>w</u> :	/ -
Sig Hei	l k	יות במשט שמשמ	INC	U					mp na cur	, ED	•		_
		BERT STRIPLI or print name and title	LING						TREASUF	KEK .			
		preparer's name		Prepamer's sign	nature -	$\overline{}$	Date		T _{z:}	IVI .	PTIN		
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Pai					, , , ,		111	-	• • self	employed	P0143	<u> 3528</u>	
	parer Firm's name Only	. ======			<u> </u>								
J3(Firm's add			_ЪГ						n's EIN ►			
		SUMMER					<u>483-530</u>		Pho	ne no (8		1-684	
May	the IRS discuss the	is return with the p	reparer sh	own above?	(see instru	ictions)					X Y	es	No

Form	990 (2016)	ILA CLERK	S & CHECKER	S LOCAL 1771			57-6	026500	Pag	je 2
Par				Accomplishme						$\overline{}$
	Che	eck if Schedule O c	ontains a response	or note to any line	in this Part III	<u> </u>	<u> </u>	<u></u> .		Ш
1	Briefly des	cribe the organizati	on's mission							
	PROMOT	E SOLIDARITY	AND MEMBE	R_WELFARE	_					
2	Did the org	janization undertake	e any significant pr	ogram services duri	ng the year w	hich were not lister	d on the prior			
	Form 990	or 990-EZ?						T Yes	X N	lo
	If 'Yes,' de	scribe these new se	ervices on Schedul	e O						
3	Did the org	janization cease co	nducting, or make	significant changes	in how it cond	ducts, any program	services?	Yes	X	lo
		scribe these change						_	_	
4	Section 50	ne organization's pr 1(c)(3) and 501(c)(4 ie, if any, for each p	 organizations are 	omplishments for ea e required to report to ported	ch of its three the amount o	e largest program s f grants and allocat	ervices, as measu lions to others, the	red by expens total expenses	es s,	
4 a	(Code) (Expens	es \$	including	grants of	\$) (Revenue	\$)
		SUPPORT		<u> </u>			 '			
					- <i></i>					
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4 b	(Code _) (Expens	es \$	ıncludıng	grants of	\$) (Revenue	\$		_)
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4.0	(Code) (Expense	es S	ıncludina	grants of	s) (Revenue	Ś		
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			_ 							
			- 							
4 d		ram services (Desc								
	(Expenses			ling grants of \$) (Reve	enue \$)	
4 e	Total progr	am service expense	es 🕨							

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Χ Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Χ 2 Χ 3 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues. assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C. Part III. Χ 5 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. 6 Χ 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 Χ Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D. Part III Χ 8 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 Χ Χ 10 Ž: \.\ \}} If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule Χ 11 a b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII . . . 11 b Χ Χ 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 Χ e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X Χ 11 e 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 . . . Χ 11 f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Χ 12a 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 Χ 12 b 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. . . . Χ 13 14a Did the organization maintain an office, employees, or agents outside of the United States? . . . Χ 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising Χ 14b 15 Х Χ 16 17 Χ 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 Χ Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,'

Checklist of Required Schedules (continued) Yes No Χ 20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H . . 20a b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II Χ 21 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, 22 Χ 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 Χ 23 Χ 24a 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 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 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 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? Χ 26 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 Χ 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a Χ b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Χ 28b Schedule L. Part IV. Х 28c Χ Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Χ 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 Χ Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections Χ 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, Χ 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?......... 35a Χ 35b Χ 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 Χ 37

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38 | X | Form **990** (2016)

Form 990 (2016) ILA CLERKS & CHECKERS LOCAL 1771 Part V | Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V

	Check it schedule of contains a response of note to any line in this Part V	• •		• •
4.	Estantha gumbar reported in Pau 2 of Form 4000 Fister 0 of ast contacts		Ye	s No
	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	2	1	
		-		
•	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1	c X	
2 :	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 a			1 × .
1	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3	а	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	3	b	
	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4	а	Х
	b If 'Yes,' enter the name of the foreign country	4	- 1 - 2 - 2 - 3	Si 1
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	âz.	> 2	
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5	-	X
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5	<u>c</u>	
	a 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?	6	а	Х
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6	b	
7	Organizations that may receive deductible contributions under section 170(c).			3
á	a 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?	7	3.3. a	X
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7	b	
(C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	7		X
(d If 'Yes,' indicate the number of Forms 8282 filed during the year		- 1	
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7	<u> </u>	X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7		
ł	a If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a		_	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	3	33 7	+
	organization have excess business holdings at any time during the year?	8	1	1 . *
9	Sponsoring organizations maintaining donor advised funds.		2 19 55	1
a	a Did the sponsoring organization make any taxable distributions under section 4966?	9:	a	
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	91	+	1
10	Section 501(c)(7) organizations. Enter	3.	T .	* 1
a	a Initiation fees and capital contributions included on Part VIII, line 12		Ů,	
t	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	· · · · · · · · · · · · · · · · · · ·	ľ		
а	Gross income from members or shareholders]	, à }	
t	o Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12	3	
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			* :
	Section 501(c)(29) qualified nonprofit health insurance issuers.	2.1		** · · · · · · · · · · · · · · · · · ·
а	Is the organization licensed to issue qualified health plans in more than one state?	138	3	<u></u>
	Note. See the instructions for additional information the organization must report on Schedule O	Š	1.	
	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			
	a Did the organization receive any payments for indoor tanning services during the tax year?	148	a	X
<u> </u>	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	141	o	

Pa	rt VI® Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b belo a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes Schedule O. See instructions	w, an In	d for	
	Check if Schedule O contains a response or note to any line in this Part VI			. X
Sec	ction A. Governing Body and Management			
			Yes	No
1 :	a Enter the number of voting members of the governing body at the end of the tax year			
ı	b Enter the number of voting members included in line 1a, above, who are independent 1 b	3		14
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	** <u>*</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
7 a	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?	7 a	X	
ŀ	Are any governance decisions of the organization reserved to (or subject to approval by) members,		-	
-	stockholders, or persons other than the governing body?	7 Ь	, X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	ÿ ja		1
	a The governing body?	8 a	X	
	b Each committee with authority to act on behalf of the governing body?	86		X
9	organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		
40.	a Did the organization have local chapters, branches, or affiliates?	40-	Yes	No
	b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their	10 a		X
	operations are consistent with the organization's exempt purposes?	10 b		
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			· . 🖔
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	X	
	o Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	X	
•	Schedule O how this was done	12 c	Х	
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?	*	, so. /	
	a The organization's CEO, Executive Director, or top management official	15a		X
K	o Other officers or key employees of the organization	15 b	s. 558°s	X
40-	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)		` 💗	
	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a	i- 233	Х
	o 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?	16 b		1 %.
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► South Carolina			
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) of for public inspection. Indicate how you made these available. Check all that apply Own website. X Another's website. X Upon request. Other (explain in Schedule O)	availab	le	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available the public during the tax year	e to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	ROBERT STRIPLING 2113 COURTLAND AVE CHARLESTON SC 29403-3003 (8	43)	723-1	1774

Form 990 (2016) ILA CLERKS & CHECKERS	LOCAL	1771		57-60265	00 Page 7
Part VII Compensation of Officers, Direct Independent Contractors	ors, Tru	stees, Key Employe	es, Highest C	ompensated En	nployees, and
Check if Schedule O contains a response or	note to ar	y line in this Part VII	<u> </u>	<u>.</u>	<u> L</u>
Section A. Officers, Directors, Trustees, K	ey Emp	loyees, and Highest	Compensate	d Employees	
1 a Complete this table for all persons required to be liste organization's tax year List all of the organization's current officers, direct compensation Enter -0- in columns (D), (E), and (F) if no	ors, trustee	es (whether individuals or o	,		
 List all of the organization's current key employees 	s, if any S	ee instructions for definitio	, , ,		
 List the organization's five current highest compensation (Box 5 of Form Worganization and any related organizations 					
 List all of the organization's former officers, key em of reportable compensation from the organization and an 			employees who re	ceived more than \$1	00,000
 List all of the organization's former directors or tri organization, more than \$10,000 of reportable compensa 					
List persons in the following order individual trustees or demployees, and former such persons	directors, i	nstitutional trustees, office	rs, key employees	highest compensate	∍d
Check this box if neither the organization nor any rela	ated organ	zation compensated any o	current officer, dire	ctor, or trustee	
		(C)			
(A) Name and Title	(B) Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the

(A) Name and Title		thar	one s both dir	box, on an o	unles fficer		οn	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	per week (list any hours for related organiza- tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) WILLIAM STRIPLING TRUSTEE	4.00	X						9,365.	0.	0.
(2) NEAL EDGERTON TRUSTEE	5.00	Х						9,850.	0.	0.
(3) LANCE MCLAUGHLIN VICE-PRESIDENT	20.00			Х				38,028.	0.	0.
(4) JOHN_ALVANOSPRESIDENT	32.00			Х		i		58,582.	0.	0.
(5) RALPH CAMPBELL SECRETARY	4.00			Х				7 , 890.	0.	0.
(6) NICHOLAS CHRIST EXECUTIVE BOARD MEMBER	2.00	Х						3,338.	0.	0.
(7) ROBERT_STRIPLING TREASURER	15.00			X				30,921.	0.	0.
(8) DAVID DUNLAP EXECUTIVE BOARD MEMBER	3.00	Х						5,206.	0.	0.
(9)										
(10)										
(11)										
(12)				,						
(13)										<u> </u>
(14)				-						

Part VII Section A. Officers, Directors, 110	(B)	l				c3, 1	air	d riighest con	ipensateu Linp	l Cyces (continued)
. (A) Name and title	Average hours per week	box	, unle	heck ss pe	ition more rson	than cost both or/trust	an tee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	(list any hours for related	individual or director	institution	Officer	Key emp	Highest co employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
	organiza - tions below dotted line)	Individual trustee or director	nstitutional trustee		employee	Highest compensated employee			-	0. ga
(15)						8.	-			
(16)							-			
(17)		<u> </u>					_			
(18)							_			
(19)									<u>, </u>	<u> </u>
(20)						-				
(21)							-			
(22)		-								
(23)							_			
(24)							-			
(25)		-					_			
1 b Sub-total							>	163,180.	0.	0.
d Total (add lines 1b and 1c)							<u> </u>	163,180.	0.	0.
2 Total number of individuals (including but not limited from the organization ►	d to those	listed	abo	ove)	who	rece	eive	d more than \$100,0	000 of reportable co	
3 Did the organization list any former officer, director, on line 1a? If "Yes," complete Schedule J for such in										Yes No
For any individual listed on line 1a, is the sum of rep the organization and related organizations greater to such individual	oortable co	mpe	nsat If 'Y	ion a	and com	other	r coi	mpensation from		. 4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' or										. 5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensate	ad indone	ndoni				4h a 4		anned mane than 64	00 000 of	
compensation from the organization Report compe	nsation for	r the	cale	ndar	yea	ar end	ding	with or within the	organization's tax ye	ear (C)
Name and business addre	ess							Description o		Compensation
			_							
2 Total number of independent contractors (including \$100,000 of compensation from the organization	but not lim	nited	to th	ose	liste	ed ab	ove) who received mo	re than	
BAA		TEEA0	108	11/16	5/16					Form 990 (2016)

		Check if Schedule O contains a response or note to any	line in this Part VIII.			<i>.</i>
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	d d e f	Federated campaigns	▶			
Program Service Revenue	2 a b c d	MEMBERSHIP DUES AND AS 900099	525,347.	0.	525,347.	0.
Progr		All other program service revenue	► 525,347.			
	b	Investment income (including dividends, interest and other similar amounts)	>			
	d 7a b	Net rental income or (loss)				
Other Revenue	8a b	Gross income from fundraising events (not including: \$ of contributions reported on line 1c) See Part IV, line 18 a Less direct expenses b Net income or (loss) from fundraising events				
	b	Gross income from gaming activities See Part IV, line 19				
	þ	Gross sales of inventory, less returns and allowances				
	11 a	Miscellaneous Revenue Business Code		: %., 1	* 1 *	
	b					
	_	All other revenue				
		Total. Add lines 11a-11d		0.	525,347.	0.
			1 223,347.			<u> </u>

Par	1990 (2016) ILA CLERKS & CHECKER: 1 IX.: Statement of Functional Expension			57-602	
	tion 501(c)(3) and 501(c)(4) organizations must co	mplete all columns All c			
•	Check if Schedule O contains a res	sponse or note to any lir	ne in this Part IX		
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
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, trustees, and key employees	163,180.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages	102,230.			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	20,654.			
11	Fees for services (non-employees)				
а	Management				
b	Legal	10,197.			
c	Accounting	14,532.			
d	Lobbying				
е	Professional fundraising services See Part IV, line 17 .		A 77 & 3	4 4	
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	13,399.			
14	Information technology	2,475.	<u> </u>	 	
15	Royalties		L 	 	
16	Occupancy		 		
17	Travel	20,820.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	5,681.			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	12,821.			
23	Insurance	13,700.			
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				

b DUES AND ASSESSMENTS

c REPAIRS & MAINTENANCE

e All other expenses

25 Total functional expenses Add lines 1 through 24e. .

a TELEPHONE ___

d UTILITIES _

4,984

9,210

4,402

4,609

31,303. 434,197. Form 990 (2016) ILA CLERKS & CHECKERS LOCAL 1771

Part X Balance Sheet

1 Cash - non-interest-bearing 155, 638 1 221, 039 2 Savings and temporary cash investments 2 3 3 Pedges and grains receivable, net 3 3 4 Accounts receivable, net 4 4 4 5 Loans and other receivables from current and former officers, directors trustees, key employees, and highest compensated employees. Complete Part II of Schedule 5 6 6 Loans and other receivables from current and stormer officers, directors trustees, key employees, and highest compensated employees. Complete Part II of Schedule 5 6 7 Notes and loans receivable, net 7 7 7 7 7 7 7 7 7			Check if Schedule O contains a response or note to any line in this Part X			
2 Savings and temporary cash investments 2 2 3				(A) Beginning of year		
3 Piedges and grants receivable, net. 4 4		1	Cash – non-interest-bearing	155,838.	1	221,039.
1		2	Savings and temporary cash investments		2	
Solution	}	3	Pledges and grants receivable, net		3	
trustees, key employees, and highest compensated employees Complete Part II of Schedule 1 6 Loans and other receivables from other disqualified persons (as defined under section 4958)(11), presents described in section 4958(c(3)(8), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions) Complete Part II of Schedule L 7 7 7 Notes and icians receivable, net 8 Inventiones for sale or use 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part IV of Schedule D 11 Investments—publicly traded securities 11 Investments—publicly traded securities 12 Investments—publicly traded securities 12 Investments—program-related See Part IV, line 11 13 Investments—publicly traded securities 14 Intangible assets. 15 Other assets See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses. 17 Accounts payable and accrued expenses. 18 Grants payable. 19 Deferred revenue 20 Tax-exempt bond liabilities 19 Deferred revenue 21 Loans and other payable sto current and former officers, directors, trustees, key employees, injected compensated employees, and notes payable to unrelated third parties 21 Loans and other payables to current and former officers, directors, trustees, key employees, injected compensated employees, and notes payable to unrelated third parties 22 Loans and other payables to unrelated third parties 23 Secured mortages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other insubtles (including federal income area, payables to related third parties, and cher liabilities. Add lines 17 through 25. 26 Total liabilities. Add lines 17 through 25. 27 Unsecured notes and loans payable to unrelated third parties. 28 Total liabil		4	Accounts receivable, net		4	
### and sportsoning organizations of section 50 (c)(0) evolutorly employees beneficiary organizations (see instructions) Complete Parl II of Schedule L		5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		•	
8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part V of Schedule D 10b 158,014 439,374 10c 426,139 11 Investments – publicy traded securities 11 Investments – prolyticy traded securities 12 Investments – program-related See Part IV, line 11 12 13 Investments – program-related See Part IV, line 11 13 14 Intangble assets 14 15 Other assets See Part IV, line 11 1,512 15 0 0 15 15 0 0 16 16 17 17 18 19 19 19 19 19 19 19		6	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees'		. <u>%</u>	
10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 584,153 10 c 426,139 11 Investments — publicly traded securities 11 Investments — publicly traded securities 11 10 a 158,014 439,374 10 c 426,139 11 Investments — publicly traded securities 11 12 Investments — program-related See Part IV, line 11 12 Investments — program-related See Part IV, line 11 13 14 Intangible assets 14 15 15 00 16 16 16 16 16 16 16	2	7	Notes and loans receivable, net		7	
10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 584,153 10 c 426,139 11 Investments — publicly traded securities 11 Investments — publicly traded securities 11 10 a 158,014 439,374 10 c 426,139 11 Investments — publicly traded securities 11 12 Investments — program-related See Part IV, line 11 12 Investments — program-related See Part IV, line 11 13 14 Intangible assets 14 15 15 00 16 16 16 16 16 16 16	se	8	Inventories for sale or use		8	
10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 584,153 10 c 426,139 11 Investments — publicly traded securities 11 Investments — publicly traded securities 11 10 a 158,014 439,374 10 c 426,139 11 Investments — publicly traded securities 11 12 Investments — program-related See Part IV, line 11 12 Investments — program-related See Part IV, line 11 13 14 Intangible assets 14 15 15 00 16 16 16 16 16 16 16	As	9			<u> </u>	
10a	ļ	_	1 1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b Less accumulated depreciation		10 a		1 6 3 TW	,	
11 Investments — publicly traded securities 11 12 Investments — other securities See Part IV, line 11 12 13 Investments — other securities See Part IV, line 11 13 Investments — program-related See Part IV, line 11 13 Investments — program-related See Part IV, line 11 14 14 14 15 15 15 16 14 15 15 15 16 16 16 16 16		h			100	126 120
12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 1,512 15 0. 16 Total assets. See Part IV, line 11 1,512 15 0. 16 Total assets. Add lines 1 through 15 (must equal line 34) 596,724 16 647,178 17 Accounts payable and accrued expenses 17 Accounts payable and accrued expenses 18 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons 22 Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties 24 25 Other liabilities, and lines 17-24) Complete Part X of Schedule D 1, 319 25 2, 371 26 Total liabilities. Add lines 17 through 25 134, 624 26 93, 928 27 Unrestricted net assets 28 29 Permanently restricted net assets 29 29 29 29 29 29 20 20				433,374.		420,139.
13 Investments - program-related See Part IV, line 11 14 Intangible assets 14 Intangible assets 14 15 Other assets See Part IV, line 11 1,512 15 0 0 0 16 Total assets. Add lines 1 through 15 (must equal line 34) 596,724 16 647,178 17 Accounts payable and accrued expenses 17 18 18 19 Deferred revenue 18 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons 22 23 Secured mortgages and notes payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties 24 25 Other liabilities (including federal income tax, payables to related third parties 24 25 Other liabilities in discluded on lines 17-24) Complete Part X of Schedule D 1,319 25 2,371 25 2,371 26 Total liabilities. Add lines 17 through 25 134,624 26 93,928 27 Unrestricted net assets 28 Temporanty restricted net assets 28 29 Organizations that do not follow SFAS 117 (ASC 958), check here 29 29 29 20 20 20 20 20			•			
14	Ì					
15 Other assets See Part IV, line 11						
16				1 510		
17 Accounts payable and accrued expenses. 17 18 19 Deferred revenue 19 20 21 20 21 22 21 22 22						
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 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 24 25 24 26 27 27 27 27 28 29 29 29 29 29 29 29	\dashv		Accounts payable and accrued expenses	596,724.		647,178.
Deferred revenue			· ·			
20 Tax-exempt bond liabilities			·			
Escrow or custodial account liability Complete Part IV of Schedule D	ļ					
23 Secured mortgages and notes payable to unrelated third parties 133,305. 23 91,557. 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. Add lines 17-24) Complete Part X of Schedule D 1,319. 25 2,371. 26 Total liabilities. Add lines 17 through 25 134,624. 26 93,928. Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 28 29 Permanently restricted net assets 28 Organizations that do not follow SFAS 117 (ASC 958), check here 30 and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 462,100. 33 553,250.	S		·			
23 Secured mortgages and notes payable to unrelated third parties 133,305. 23 91,557. 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. Add lines 17-24) Complete Part X of Schedule D 1,319. 25 2,371. 26 Total liabilities. Add lines 17 through 25 134,624. 26 93,928. Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 28 29 Permanently restricted net assets 28 Organizations that do not follow SFAS 117 (ASC 958), check here 30 and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 462,100. 33 553,250.	₹.	-		4 4 4		
23 Secured mortgages and notes payable to unrelated third parties 133,305. 23 91,557. 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. Add lines 17-24) Complete Part X of Schedule D 1,319. 25 2,371. 26 Total liabilities. Add lines 17 through 25 134,624. 26 93,928. Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 28 29 Permanently restricted net assets 28 Organizations that do not follow SFAS 117 (ASC 958), check here 30 and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 462,100. 33 553,250.	jabili	22	key employees, highest compensated employees, and disqualified persons			
Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D. Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Universtricted net assets. Temporarily restricted net assets. Permanently restricted net assets. Organizations that do not follow SFAS 117 (ASC 958), check here Department of the particles of	-	23	Secured mortgages and notes payable to unrelated third parties	133,305.	23	91,557.
Organizations that follow SFAS 117 (ASC 958), check here innes 27 through 29, and lines 33 and 34. Unrestricted net assets	Į	24	Unsecured notes and loans payable to unrelated third parties		24	<u> </u>
Organizations that follow SFAS 117 (ASC 958), check here \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D \dots	1,319.	25	2,371.
Organizations that follow SFAS 117 (ASC 958), check here \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	_	26	Total liabilities. Add lines 17 through 25	134,624.		93,928.
Unrestricted net assets			Organizations that follow SFAS 117 (ASC 958), check here ► X and complete	3. 3. 3.		
27 Unrestricted net assets	8		lines 27 through 29, and lines 33 and 34.		N.	
Temporarily restricted net assets 28 Permanently restricted net assets 29 Porganizations that do not follow SFAS 117 (ASC 958), check here of and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 31 Total net assets or fund balances 32 Total liabilities and net assets/fund balances 33 Total liabilities and net assets/fund balances	Ĕ	27	Unrestricted net assets		27	
Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 35 Total liabilities and net assets/fund balances	ğ	28	Temporarily restricted net assets		28	
Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	7	29	Permanently restricted net assets		29	
30 Capital stock or trust principal, or current funds	T.FE				3	
31 Paid-in or capital surplus, or land, building, or equipment fund	0	30	Capital stock or trust principal, or current funds	6000 4000 100		1200 mar and the second
32 Retained earnings, endowment, accumulated income, or other funds	ا <u>چ</u>					
Total net assets or fund balances	Š			L		
2 34 Total liabilities and net assets/fund balances	#			462 100		553 250
	Ž	34	Total liabilities and net assets/fund balances	596,724.	34	647,178.

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Form 990 (2016)

For	n 990 (2016) ILA CLERKS & CHECKERS LOCAL 1771 57	-6026500)	Pa	ıge 12
Ra	rt XI 🕹 Reconciliation of Net Assets	-			
	Check if Schedule O contains a response or note to any line in this Part XI				. П
ĺ	Total revenue (must equal Part VIII, column (A), line 12)	1	5	25,3	347.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4	34,1	97.
3	Revenue less expenses Subtract line 2 from line 1	3		91,1	50.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4	62,1	
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses				
8	Prior period adjustments	. 8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
>	column (B))	· 10	5	53,2	<u>50.</u>
Pa	rt XII' Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. П
1	Accounting method used to prepare the Form 990 X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on		2 a	Yes	No X
	separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?		2 b	X	,
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis			Ź	\$ \$ \$
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the au review, or compilation of its financial statements and selection of an independent accountant?	dit, 	2 c	х	-
2	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	_		2 *x	
	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3 a		X
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b		

BAA

Form 990 (2016)

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

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

► 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 www.irs.gov/form990.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

(6)

• 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 • Section 501(c)(4), (5), or (6) organizations Complete Part III Employer identification number CLERKS & CHECKERS LOCAL 1771 57-6026500 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of 'political campaign activities') Part I-B Complete if the organization is exempt under section 501(c)(3). b If 'Yes,' describe in Part IV Part I-C Complete if the organization is exempt under section 501(c) , except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL. Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing (e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0organization's funds If none, enter-0-(1)(2) (3)(4)(5)

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

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990-EZ) 2016 T T 7	CIEDKO	·	CHECKEDS	TOCAT	1771

57-6026500

Page 2

Partill-A Complete if section 501	the organizatio (h)).	n is exempt ι	ınder secti	on 501(c)(3) and	filed For	m 5768 (e	election under
	ng organization belon	gs to an affiliated	group (and lis	t in Part IV e	ach affilia	ated group r	nember's na	me,
address, EIN, expenses, and share of excess lobbying expenditures)								
B Check ► If the film	ng organization check	red box A and 'Iim	nted control' p	rovisions app	ly			
(The term	Limits on Lobby 1 'expenditures' mea			.)		(a) F organizat	iling ion's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	res to influence publ	ic opinion (grass i	oots lobbying)					
b Total lobbying expenditu	res to influence a leg	jislative body (dire	ect lobbying) .		[
c Total lobbying expenditu					+			
d Other exempt purpose e	•							
e Total exempt purpose ex	xpenditures (add line:	s 1c and 1d)	• • • • • • •		}			
f Lobbying nontaxable am both columns					<u></u> .			
If the amount on line 1e, col	lumn (a) or (b) is	The lobbying n		ount is	_	N. Y		
Not over \$500,000		20% of the amount		 			****	
Over \$500,000 but not over \$		\$100,000 plus 15%			_	A ACK		
Over \$1,000,000 but not over		\$175,000 plus 10%				, W	.A	
Over \$1,500,000 but not over Over \$17,000,000	\$17,000,000	\$225,000 plus 5% o \$1,000,000	ine excess over	\$1,500,000	{			
g Grassroots nontaxable a	amount (enter 25% of		·			<u>,000),000 m</u>		*
h Subtract line 1g from line					- F			
i Subtract line 1f from line					1			
j If there is an amount oth section 4911 tax for this								Tyes No
		4-Year Averaging						
(Ѕоп	ne organizations tha	- '	501(h) elect	on do not h	ave to c	omplete all ough 2f.)	of the five	
	Lobb	ying Expenditur	es During 4-1	'ear Averagi	ng Perio	od		
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2	014	(c) 2015	5	(d)	2016	(e) Total
2 a Lobbying nontaxable amount								
b Lobbying ceiling amount (150% of line 2a, column (e))								
c Total lobbying expenditures								
d Grassroots nontaxable amount								
e Grassroots ceiling amount (150% of line 2d, column (e))								
f Grassroots lobbying expenditures								
BAA						Sche	dule C (For	m 990 or 990-EZ) 2016

Schedule C (Form 990 or 990-EZ) 2016 I LA	CLERKS & (CHECKERS	LOCAL	<u>1</u> 771	57-6026500
Part II-B Complete if the or (election under se			nder sec	ction 501(c)(3)	and has NOT filed Form 5768

(election under section 50 I(II)).						
For each Was' represent on lines do through de balance provide in Bort IV a detailed describes				(b)		
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	•	Amount	_	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of						
a Volunteers?	-	! 				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	ļ		á.	. `. ` %		
c Media advertisements?	·					
d Mailings to members, legislators, or the public?	-					
e Publications, or published or broadcast statements?	<u> </u>					
f Grants to other organizations for lobbying purposes?	<u> </u>		<u> </u>			
g Direct contact with legislators, their staffs, government officials, or a legislative body?						
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	_					
i Other activities?						
j Total Add lines 1c through 1i	·	16				
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			- * <i>1</i>	Á . 🚵	3% /	
b If 'Yes,' enter the amount of any tax incurred under section 4912	**		<u> </u>			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912	in i	A.				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				i (i	1	
Part III-A Complete if the organization is exempt under section 501(c)(4), section 50	(c)(5)	, or				
section 501(c)(6).						
			_	Yes	No	
1 Were substantially all (90% or more) dues received nondeductible by members?					X	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2 X	ļ	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior					X	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 50′ (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) answered 'Yes.'	(c)(5) Part l	, or s II-A,	ection line 3,	501(c) is)	
1 Dues, assessments and similar amounts from members		1				
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).						
a Current year		2 a				
b Carryover from last year	[2 b				
c Total		2 c				
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
		377				
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?				_		
5 Taxable amount of lobbying and political expenditures (see instructions)	<u></u>	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 (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information

SCHEDULE D (Form 990)

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 2016

n990. Open to Rublic inspection Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

	ILA CLERKS & CHECKERS LOCAL 1771			57-6026500
Pai	t Organizations Maintaining Donor Advised Funds or Other	Similar Funds	or Acc	
11/41	Organizations Maintaining Donor Advised Funds or Other Complete if the organization answered 'Yes' on Form 990, Pai	rt IV, line 6		
	(a) Donor advised fun	ds	(b) F	unds and other accounts
1	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 are the organization's property, subject to the organization's exclusive legal control	held in donor advis	ed funds	TYes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that for charitable purposes and not for the benefit of the donor or donor advisor, or for impermissible private benefit?	any other purpose of	conferring	1
Pa	Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Pai	rt IV, line 7		
1	Purpose(s) of conservation easements held by the organization (check all that appl			
	Preservation of land for public use (e.g., recreation or education)	•	ustorically	y important land area
	Protection of natural habitat	Preservation of a c	ertified h	istoric structure
	Preservation of open space	J		
2	Complete lines 2a through 2d if the organization held a qualified conservation conti	ribution in the form	of a cons	ervation easement on the
	last day of the tax year	F		
				Held at the End of the Tax Year
	a Total number of conservation easements	F	2 a	
	Total acreage restricted by conservation easements	, , , , , , , , , , , , , , , , , , ,	2 b	
•	Number of conservation easements on a certified historic structure included in (a)		2 c	
(I Number of conservation easements included in (c) acquired after 8/17/06, and not structure listed in the National Register	on a historic	2 d	
3	Number of conservation easements modified, transferred, released, extinguished, of tax year ►	or terminated by the	organiza	ation during the
4	Number of states where property subject to conservation easement is located ▶			
5	Does the organization have a written policy regarding the periodic monitoring, inspending enforcement of the conservation easements it holds?			
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations,	and enforcing cons	ervation (easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and ▶\$	enforcing conservat	ion ease	ments during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirem and section 170(h)(4)(B)(ii)?	ents of section 170	(h)(4)(B)((I) Yes No
9	In Part XIII, describe how the organization reports conservation easements in its re include, if applicable, the text of the footnote to the organization's financial stateme conservation easements	venue and expense ints that describes t	stateme he organi	nt, and balance sheet, and zation's accounting for
Pai	Organizations Maintaining Collections of Art, Historical Tr Complete if the organization answered 'Yes' on Form 990, Par	reasures, or Ot	her Sin	nilar Assets.
1;	a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report i art, historical treasures, or other similar assets held for public exhibition, education, in Part XIII, the text of the footnote to its financial statements that describes these i	or research in furth		
ı	o If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its historical treasures, or other similar assets held for public exhibition, education, or refollowing amounts relating to these items			
	(i) Revenue included on Form 990, Part VIII, line 1			▶\$
	(ii) Assets included in Form 990, Part X			▶\$
2	If the organization received or held works of art, historical treasures, or other simila amounts required to be reported under SFAS 116 (ASC 958) relating to these items	ir assets for financia s	ıl gaın, pr	rovide the following
	Revenue included on Form 990, Part VIII, line 1			▶\$
ı	Assets included in Form 990, Part X			►\$

Part III Organizations Maintainii	ng Collections	of Art, HISTO	ricai i reasures, c	or Other Similar Ass	ets (conti	inuea)
3 Using the organization's acquisition, acitems (check all that apply)	ccession, and othe			t are a significant use of i	s collection	
a Public exhibition		d Loan o	or exchange programs			
b Scholarly research		e Other				
c Preservation for future generations						
4 Provide a description of the organization Part XIII			•			
5 During the year, did the organization s to be sold to raise funds rather than to	be maintained as	part of the organ	zation's collection?		Yes	No
Part IV Escrow and Custodial A line 9, or reported an amo	rrangements. unt on Form 99	Complete if the One Part X, line	ne organization ans e 21	swered 'Yes' on Forn	n 990, Parl	i IV,
1 a Is the organization an agent, trustee, on Form 990, Part X?	ustodian or other i	ntermediary for c	ontributions or other as	sets not included	Yes	No
b If 'Yes,' explain the arrangement in Pa	rt XIII and complete	e the following ta	ble	r		
					Amount	
c Beginning balance						
d Additions during the year						
e Distributions during the year						
f Ending balance				<u> </u>		
2 a Did the organization include an amoun				•		No
b If 'Yes,' explain the arrangement in Pa	rt XIII Check here	if the explanation	n has been provided on	Part XIII		
Date Company	mlota if the area	anization and	wared 'Vee' on Far	000 Dart IV line (
Part V Endowment Funds. Com						
4 a Beginning of year belance	(a) Current year	(b) Prior year	(c) Two years bad	k (d) Three years back	(e) Four y	rears back
1 a Beginning of year balance b Contributions					 	
b Contributions		-			 	
c Net investment earnings, gains, and losses						
d Grants or scholarships						
e Other expenditures for facilities and programs						
f Administrative expenses						
g End of year balance [
2 Provide the estimated percentage of the	•	balance (line 1g	, column (a)) held as			
a Board designated or quasi-endowment		^g				
b Permanent endowment	 %					
c Temporarily restricted endowment		- ⁹⁶				
The percentages on lines 2a, 2b, and 2	2c should equal 10	0%				
3 a Are there endowment funds not in the	possession of the	organization that	are held and administe	red for the		
organization by					Ye	s No
(i) unrelated organizations					. 3a(i)	
(ii) related organizations					. 3a(ii)	
b If 'Yes' on line 3a(ii), are the related or		•			. 3b	
4 Describe in Part XIII the intended uses		n's endowment fu	ınds			
Part VI Land, Buildings, and Equation Complete if the organization	•	es' on Form 9	990, Part IV, line 11	a See Form 990, Pa	art X, line	10.
Description of property		or other basis restment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book	value
1 a Land		22,083.				22,083.
b Buildings		519,556.		115,880.	•	3,676.
c Leasehold improvements						
d Equipment	[35,726.		35,346.		380.
e Other		6,788.		6,788.		0.
Total. Add lines 1a through 1e (Column (d)	must equal Form 9		nn (B), line 10c)		42	26,139.
BAA					ule D (Form	

Page 3

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	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)	- 	
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
_(I)		
Total_(Column (b) must equal Form 990, Part X, column (B) line 12)▶	· · · · · · · · · · · · · · · · · · ·	
Part VIII Investments - Program Related.	os' on Form 000	Part IV, line 11c See Form 990, Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
	(b) Book value	(c) Method of Valuation Cost of end-of-year market value
(1) (2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total (Column (b) must equal Form 990, Part X, column (B) line 13) >		
Part IX® Other Assets.		
		Part IV, line 11d See Form 990, Part X, line 15
(a) Des	cription	(b) Book value
(1) (2)		
(3)	-	
		
(4)		
(4) (5)		
(5) (6) (7)		
(5) (6) (7) (8)		
(5) (6) (7) (8) (9)		
(5) (6) (7) (8) (9) (10)		
(5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) lim	ne 15)	
(5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) lim		
(5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) lim Part X Other Liabilities. Complete if the organization answered 'Yes' on Fo	orm 990, Part IV, line 1	
(5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) lim		
(5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) lim Part X Other Liabilities. Complete if the organization answered 'Yes' on Form (a) Description of liability (1) Federal income taxes	orm 990, Part IV, line 1	
(5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) lim Part X Other Liabilities. Complete if the organization answered 'Yes' on Form (a) Description of liability	orm 990, Part IV, line 1	1e or 11f See Form 990, Part X, line 25
(5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line Part X Other Liabilities. Complete if the organization answered 'Yes' on Form (a) Description of liability (1) Federal income taxes (2) DUES (3) PAYROLL AND RELATED LIABILITIES (4) CREDIT CARD PAYABLE	orm 990, Part IV, line 1 (b) Book value	1e or 11f See Form 990, Part X, line 25
(5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line Part X Other Liabilities. Complete if the organization answered 'Yes' on Form (a) Description of liability (1) Federal income taxes (2) DUES (3) PAYROLL AND RELATED LIABILITIES (4) CREDIT CARD PAYABLE (5)	orm 990, Part IV, line 1 (b) Book value	1e or 11f See Form 990, Part X, line 25
(5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) lim Part X Other Liabilities. Complete if the organization answered 'Yes' on Form (a) Description of liability (1) Federal income taxes (2) DUES (3) PAYROLL AND RELATED LIABILITIES (4) CREDIT CARD PAYABLE (5) (6)	orm 990, Part IV, line 1 (b) Book value	1e or 11f See Form 990, Part X, line 25
(5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) lim Part X Other Liabilities. Complete if the organization answered 'Yes' on Fo (a) Description of liability (1) Federal income taxes (2) DUES (3) PAYROLL AND RELATED LIABILITIES (4) CREDIT CARD PAYABLE (5) (6) (7)	orm 990, Part IV, line 1 (b) Book value	1e or 11f See Form 990, Part X, line 25
(5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) lim Part X Other Liabilities. Complete if the organization answered 'Yes' on Fo (a) Description of liability (1) Federal income taxes (2) DUES (3) PAYROLL AND RELATED LIABILITIES (4) CREDIT CARD PAYABLE (5) (6) (7) (8)	orm 990, Part IV, line 1 (b) Book value	1e or 11f See Form 990, Part X, line 25
(5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) lim Part X Other Liabilities. Complete if the organization answered 'Yes' on Form (a) Description of liability (1) Federal income taxes (2) DUES (3) PAYROLL AND RELATED LIABILITIES (4) CREDIT CARD PAYABLE (5) (6) (7) (8) (9)	orm 990, Part IV, line 1 (b) Book value	1e or 11f See Form 990, Part X, line 25
(5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) lim Part X Other Liabilities. Complete if the organization answered 'Yes' on Form (a) Description of liability (1) Federal income taxes (2) DUES (3) PAYROLL AND RELATED LIABILITIES (4) CREDIT CARD PAYABLE (5) (6) (7) (8) (9) (10)	orm 990, Part IV, line 1 (b) Book value	1e or 11f See Form 990, Part X, line 25
(5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) lim Part X Other Liabilities. Complete if the organization answered 'Yes' on Fo (a) Description of liability (1) Federal income taxes (2) DUES (3) PAYROLL AND RELATED LIABILITIES (4) CREDIT CARD PAYABLE (5) (6) (7) (8) (9)	orm 990, Part IV, line 1 (b) Book value	1e or 11f See Form 990, Part X, line 25

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 2 b 3 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b. 40

Provide 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

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Part XIII | Supplemental Information.

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047 2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

ILA CLERKS & CHEC	CKERS LOCAL 1771	57-6026500
	ROBERT STRIPLING, TREASURER IS THE BROTHER OF W	ILLIAM STRIPLING,
Pt VI, Line 2	ALTERNATE TRUSTEE.	
Pt VI, Line 7a	ALL THE ORGANIZATION'S MEMBERS ELECT THE GOVERN	ING BOARD OF OFFICERS.
Pt VI, Line 6	THE ORGANIZATION IS A UNION COMPRISED OF MEMBER	S.
	ALL CHANGES TO THE BYLAWS AND POLICIES OF THE C	RGANIZATION ARE REQUIRED
	TO BE VOTED ON BY THE MEMBERS AND REQUIRES APPR	OVAL BY 2/3 OF VOTING
Pt VI, Line 7b	MEMBERS.	
	COMMITTEES CAN MAKE RECOMMENDATIONS TO THE EXEC	UTIVE BOARD BUT CANNOT
Pt VI, Line 8b	ACT ON THEIR BEHALF.	
	A COPY OF THE 990 WAS PROVIDED TO EACH VOTING B	OARD MEMBER FOR REVIEW
Pt VI, Line 11b	AND QUESTIONS.	
	EACH BOARD MEMBER IS REQUIRED TO SIGN THE ORGAN	IZATION'S CONFLICT OF
	INTEREST POLICY ON AN ANNUAL BASIS. PURSUANT TO	THIS POLICY EACH OFFICER
	AND BOARD MEMBER WILL RECUSE THEMSELVES FROM ANY	DISCUSSION AND VOTE FOR
	WHICH A CONFLICT FOR THEMSELVES OR THEIR FAMILY	EXISTS. DETERMINATIONS
	OF WHETHER A CONFLICT EXISTS ARE MADE AT A MANA	GEMENT, BOARD MEMBER,
	OFFICER, AND INDIVIDUAL LEVEL. ACTUAL CONFLICTS	ARE REVIEWED BY THE
Pt VI, Line 12c	BOARD, WITHOUT THE PRESENCE OF THE INTERESTED P	ARTY.