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# Form 990

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

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

Department of the Treasury Internal Revenue Service    Do not enter social security numbers on this form as it may be made public.   Open to Public															
	A For the 2016 calendar year, or tax year beginning , 2016, and ending ,										,				
		of applicable		Name of organ		TERNATIONA	L ASSOCIA			<u>_</u>	AWIA	D Employ	er iden	tification number	
	$\prod_{i=1}^{n}$	Address change		Doing business				<b></b>		<u> </u>		61-	6038	500	
	$\vdash$	Name change				box if mail is not deli	vered to street ac	Idress)		Room/suit	e	E Telepho			
	H	nitial return	70	8 DORSE	Y WAY							(50	02) 327-0645		
	H	inal return/terminal				ce, country, and ZIP	or foreign postal	code	. —	<u> </u>		130	_ ,	2, 0040	
	Н	Amended return	Į.	UISVILL	,		•	KY	40	223-2	700	G Gross r	oceints	\$ 855,286.	
	$\vdash$	Application pend		Name and add		nal officer			- 40			group return			
	∟,′	application pend			•	OODHAVEN RIDGE C	m I AIITAI	א קונה	Y 40		•				
	Tax	overnt status		A GLENN	X 501(c)			4947(a)(1) o		527	If 'No,'	subordinates attach a list (	see instr	ructions)	
<u> </u>		c-exempt status		501(c)(3)	A 301(c)	(5) (11)	sert no )	[4947(a)(1) U	لـــــــــــــــــــــــــــــــــــــ	<del></del>			<b>-</b>	_	
<u></u>			N/A		T			<del></del>			<del></del>	exemption nu			
К Ра		m of organizatio		Corporation	Trust	Association	Other -		Year of	f formation	1918	8 [m/s	state of I	egal domicile KY	
Pa	1	Summ Briefly des		o organizat	ion'e mise	ion or most sign	uficant actual	ioc II	NITON	N ORGA	NIT 77	TTON			
	'					BARGAININ							_ <u>-</u>		
Activities & Governance						N PROCESS									
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ie.	5				•	n calendar year							5	<u> </u>	
.≅	6				, ,	necessary)	•						6	120	
P	7 a	Total unre	ated b	usiness reve	nue from	Part VIII, colum	n (C), line 12						7a	0.	
	t	Net unrela	ted bus	siness taxab	le income	from Form 990	-T, line 34						7b	0.	
						DE	OEIVE					rior Year		Current Year	
	8	Contribution	ns and	l grants (Pai	t VIII, line	1h)		٠				643,8	99.	800,854.	
Revenue	9	9 Program service revenue (Part VIII, line 2005) . MAY it is in the control of th								31,791.					
Ver	10									12,191.					
<b>&amp;</b>	11					nes 5, 6d, 8c, 90						18,3		10,450.	
	12					must equal Pa			12) .			700,1		855,286.	
_	13					IX, column (A),					-		84.	5,389.	
	14			•	•										
	15									128	252,402.				
es			eries, other compensation, employee benefits (Part IX, column (A), lines 5-10)								720.	232,402.			
Expenses				-		• •								<del></del>	
, X		b Total fund	raising	expenses (F	Part IX, co	lumn (D), line 2	5) ►								
	17	Other expe	enses (	Part IX, colu	ımn (A), lı	nes 11a-11d, 11	lf-24e)					639,3		621,483.	
	18	Total expe	nses /	Add lines 13	-17 (must	equal Part IX, o	olumn (A), lıı	ne 25)				880,2		879,274.	
	19	Revenue I	ess exp	oenses Sub	tract line 1	18 from line 12		· · · · · ·	· <u>· · ·</u>	<u> </u> !		-180,1	37.	-23,988.	
8											Beginnii	ng of Curre	nt Year	End of Year	
Net Assets or Fund Balances	20		•									400,3	309.	545,151.	
A P	21	Total liabil	ities (P	art X, line 26	6)							6,2	266.	175,096.	
ŠŠ	22	Net assets	or fun	d balances	Subtract I	ine 21 from line	20					394,0	)43.	370,055.	
	rt II	Signa													
					nined this reti	um, includion accomi	nanving schedule	s and statemen	nts and	to the best	of my knov	viedge and b	elief it is	true correct and	
comp	olete I	Declaration of br	parer (o	ther than officer	) ur based on	urn, including accomaliunformation of wh	ich preparer has	any knowledge	,		,	,	1	,,	
_		X	Z	lach	16 %		<del></del>					5/10	113	7	
Sig	ın	A Sig	pature of	officer							Da	ate			
He	re	C.	Lark	A HEIM							FTANG	CIAL S	ECER	TARY ·	
				t name and title							1111				
	-	Print/Ty	pe prepa	rer's name	<del></del>	Preparer's sign	ature		Dat	te .		Check	X of	PTIN	
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US	e U	Firm's a						_	-0726783						
					ville	_ <del></del>		KY 402				Phone no	<u>(50</u>		
May	/ the	IRS discuss	this re	turn with the	e preparer	shown above?	(see instruct	ions)						. X Yes No	

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

TEEA0101 11/16/16

Form 990 (2016)

Par	rt III Statement of Program Service Accomplishments	01-0	038300	<u> </u>	age z
Lai					
	Check if Schedule O contains a response or note to any line in this Part III	• • • • •	· · · · · · ·	· · · · · ·	<u>.                                    </u>
1	- · · , · · · · · · · · · · · · · · · ·				
	PROVIDE A PROFESSIONAL BARGAINING UNIT TO REPRESENT THE INTEREST				
	UNION IN THE ARBITRATION PROCESS; TO IMPROVE OCCUPATIONAL HEALTH				
	FOSTER FELLOWSHIP OF ITS MEMBERS; TO IMPROVE THE TRADE IN EVERY	WAY PO	SSIBLE	C	
2	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	No
	If 'Yes,' describe these new services on Schedule O		ш		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	s?	🗀 ·	Yes X	No
_	If 'Yes,' describe these changes on Schedule O				
4	Describe the organization's program service accomplishments for each of its three largest program services,	as measu	red by ev	nancae	
,	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to cand revenue, if any, for each program service reported	others, the	total expe	enses,	
4 a	a (Code ) (Expenses \$ including grants of \$ ) (I	Revenue	\$		
	BARGAINING UNION TO REPRESENT THE INTERESTS OF THE UNION	1010	Ť <del></del>		
			<b></b>	<b>-</b> -	<b>-</b>
	MEMBERS IN THE ARBITRATION PROCESS; MAKE JOBS AVAILABLE FOR UNIC	<u> </u>			
	MEMBERS			. <b></b>	
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4 h	b (Code ) (Expenses \$ including grants of \$ ) (I	Revenue	S		
-7 L	) (Loode) (Expenses $\psi$ ) (i	Cevenue	Ÿ		—–′
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4.0	c (Code ) (Expenses \$ including grants of \$ ) (I	Revenue	\$		١
40	Cooke/(Expenses $$ /(i	Cevenue	Ÿ		<u> </u>
					_ <i>_</i>
			<b></b>	<b></b> .	
	d Other program services (Describe in Schedule O )				
40				١	
	(Expenses \$ including grants of \$ ) (Revenue \$		·		
	e Total program service expenses			Form 990	(2016)
BAA	TEEA0102 11/16/16			330	(20.0)

Form 990 (2016) INTERNATIONAL ASSOCIATION OF HEAT & 51 AWIA Page 3 61-6038500 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)? . . . . 2 2 Х 3 Χ 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 Х 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 Χ 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' X 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 Х q 10 X If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, 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 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total Х 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total Χ 11 c 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 11 d e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X. . . . 11e X 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 111 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII 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 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. . . . . . Х 13 Х 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, Х 14b Х 15 Х 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

17

18

Х

Х

Х

column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,'

			Yes	No
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
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 domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21_		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No, 'go to line 25a	24a		Х
Ł	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	İ	
c	Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year?	24d		
25 a	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		_
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?  If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	. ,	,	
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
ł	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		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		Х
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		Х
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		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
t	olf '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		х
38	Note. All Form 990 filers are required to complete Schedule O	38_	х	
BAA		Form	990 (2	2016)

	990 (2016) INTERNATIONAL ASSOCIATION OF HEAT & 51 AWIA 61-6038500	)		age 5
Par	t 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	· · ·	• • •	. X
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
þ	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		ı——-	ļ
	(gambling) winnings to prize winners?	1 c	Х	ļ
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-			
	ments, filed for the calendar year ending with or within the year covered by this return 2a		<del>- 17-</del> -	<b> </b>
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	<b> </b>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			ļ_ <u>.                                    </u>
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		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		
4 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 a		X
b	If 'Yes,' enter the name of the foreign country			ļ
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
C	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 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 a		Х
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were			
~	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).			
2	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 a		X
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			
	Form 8282?	7 c		X
d	If 'Yes,' indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
	as required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	_/ 13		<del> </del>
•	organization have excess business holdings at any time during the year?	8		
٥		<u> </u>		
9	4	 9 а		<b> </b> -
	Did the sponsoring organization make any taxable distributions under section 4966?	9 b		
	· · · · · · · · · · · · · · · · · · ·	30	<del> </del>	<del> </del>
	Section 501(c)(7) organizations. Enter			
	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			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) . `			
12.	against amounts due or received from them ) . `	12 a		
	1 1	12 d		<del> </del>
	· · · · · · · · · · · · · · · · · · ·			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	42-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			İ
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		[	
_	Enter the amount of reserves on hand			
		14a		<u> </u>
	Did the organization receive any payments for indoor tanning services during the tax year?		├	<del>  ^</del>
t	of Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b	l _	ł

Pa	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	n		
	Check if Schedule O contains a response or note to any line in this Part VI	<u>· · ·                                  </u>	• • •	. X
Sec	ction A. Governing Body and Management			
1 :	a Enter the number of voting members of the governing body at the end of the tax year		Yes	No
	authority to an executive committee or similar committee, explain in Schedule O			
	b Enter the number of voting members included in line 1a, above, who are independent			
	officer, director, trustee, or key employee?	2		X
	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	<u> </u>
-	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	
	b Are any governance decisions of the organization reserved to (or subject to approval by) members,			<del> </del>
	stockholders, or persons other than the governing body?	7 b	Х	<b> </b>
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	a The governing body?	8 a	X_	
	b Each committee with authority to act on behalf of the governing body?	8 b	X	ļ
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		Х
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode)	
			Yes	No
	a Did the organization have local chapters, branches, or affiliates? • • • • • • • • • • • • • • • • • • •	10 a		X
	b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	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	<u> </u>
	b 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
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b		
	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c		
13	· ·	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	a The organization's CEO, Executive Director, or top management official	15a		X
ļ	b Other officers or key employees of the organization	15 b		X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)	i		1
16	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		X
1	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?	16 b		
Sec	ction C. Disclosure			<del></del>
	List the states with which a copy of this Form 990 is required to be filed ►			
18			_	
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	02) 3	207.	0645
			1/ /-	<b>UU4</b> 3

Page 7

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

 $\mathbf{x}$ 

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

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

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

Check this box if neither the organization nor any rela	Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee									
	(C)									
(A) Name and Title		B) Position (do not check more than one box, unless person is both an officer and a director/trustee)				perso and a e)	n	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MICHAEL HICKEY	41.00									
BUSINESS MGR/RECORDING SEC				Х		Х		64,112.	0.	5,500.
(2) MICHAEL WINTER	41.00									
ORGANIZER				X				54,841.	0.	2,650.
(3) CLARK HEIM FIN SEC	11.00			Х				23,626.	0.	0.
(4) ASA GLENN	3.00									
PRESIDENT	]			Х				5,588.	0.	0.
(5) JASON LINTELMAN	2.00			v				_		
VICE PRESIDENT		_		X	<u> </u>		-	0.	0.	0.
(6) KEVIN KELLEY TRUSTEE	1.00	х						0.	0.	0.
(7) DAVID SCHULTEN	1.00									
TRUSTEE		X			<u> </u>			0.	0.	0.
(8) ROBERT MILES TRUSTEE	1.00	X						0.	0.	0.
(9) GLEN JONES E-BOARD	1.00	Х						0.	0.	0.
(10) BRIAN FINEGAN	1.00	X						0.	0.	
E-BOARD	1 700	<u>^</u>	-	_	-	<del> </del>	┢	ļ	ļ	0.
(11) JASON DREHER E-BOARD	1.00	x						О.	0.	0.
(12)										<u> </u>
(13)										
	<del> </del>					]				

				1
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual	3	1	X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes,' complete Schedule J for such individual	4	*	X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person	5	_ئد	 X
Sec	tion B. Independent Contractors			

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.								
(A) Name and business address	(B) Description of services	(C) Compensation						
		<del>                                     </del>						
2 Total number of independent contractors (including but not limited to those	I listed above) who received more than	1 -						

\$100,000 of compensation from the organization

61-6038500

Form 990 (2016) INTERNATIONAL ASSOCIATION OF HEAT & 51 AWIA

Part VIII | Statement of Revenue

		Check if Schedule O contains a re-	sponse or note to any lin	e in this Part VIII		<u> </u>	X
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ıts İts	1 a	Federated campaigns	1 a		-		
ra n	b	Membership dues	<b>1b</b> 800,854.	ľ	ì		1
٥ <u>٢</u>	С	Fundraising events	1 c				
r ts			1 d	1			
ভ ভ			1 e				
ns,	e	Government grants (contributions)	16				
iti e	f	All other contributions, gifts, grants, and similar amounts not included above.		l			
혈취			1f	ļ	ļ		
눌위	g	Noncash contributions included in lines 1a-1f	\$				
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f		8 <u>00</u> ,85 <u>4</u> .			
Le L		· · · · · · · · · · · · · · · · · · ·	Business Code				
듄	2 a						
e l	b	, <b></b>					-
8	c	_ <b></b>					
`≅	٦			<del></del>			<del></del>
يق	u -						<del></del>
Program Service Revenue	e	All other programs are seen as				<del></del>	
[2]	T	All other program service revenue .		31,791.	31,791.	0.	0.
_	g	Total. Add lines 2a-2f		31,791.		<u> </u>	
	3	Investment income (including dividen					
		other similar amounts)	L	12,191.	12,191.	<u> </u>	0.
	4	Income from investment of tax-exempt	· · · · · · · · · · · · · · · · · · ·				
	5	Royalties				<del></del>	
		(ı) Real	(II) Personal	}			!
1	6 a	Gross rents	10,450.				ļ
	b	Less rental expenses					
- 1	¢	Rental income or (loss)	10,450.				
	d	Net rental income or (loss)		10,450.	10,450.	0.	0.
		Gross amount from sales of (i) Securitie					
	, a	assels other than inventory					
		Less cost or other basis					}
	Ü	and sales expenses					
	c	Gain or (loss)					
		Net gain or (loss)					J
			r				
3	8 a	Gross income from fundraising event	s				
Other Reven		of contributions reported on line 1c)	<del></del>				İ
é							
r		See Part IV, line 18		ĺ			
뫍		Less direct expenses					
δ	C	Net income or (loss) from fundraising	events			<u></u>	<u> </u>
	9 a	Gross income from gaming activities See Part IV, line 19	. a				
	b	Less direct expenses		l	İ		1
		Net income or (loss) from gaming act	<del></del>			·	
			<u> </u>			<del></del>	
	iva	Gross sales of inventory, less returns and allowances	'. a				
	h	Less. cost of goods sold					
		Net income or (loss) from sales of inv					[ <i></i>
	_	Miscellaneous Revenue	Business Code			<del></del>	<del> </del>
	11 a		230,1000 0000		·		<i></i>
	ııa h					<del></del>	
	١	<i>′</i>					<del> </del>
	C	; 			<del></del>		
		All other revenue					ļ
		Total. Add lines 11a-11d	L				ļ
	12	Total revenue. See instructions	<u> </u>	<u>855,286.</u>	54,432.	0.	<u> </u>

## Part IX | Statement of Functional Expenses

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

Check if Schedule O contains a resi Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments		одреносо	general expenses	3.150.1000
See Part IV, line 21	4,830.	·		
Individuals See Part IV, line 22	559.			
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	148,167.			
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				
8 Pension plan accruals and contributions (include section 401(k) and 403(b)		. ——-		
employer contributions)	80,869.		<u> </u>	
9 Other employee benefits	8,350.			
0 Payroll taxes	15,016.		ļ	
1 Fees for services (non-employees)	}			
a Management			<del>  </del>	
<u>-</u>	2,150.			
c Accounting	15,175.	<del></del>	<del></del>	
d Lobbying	<del></del>	<del></del>	<del>                                     </del>	
e Professional fundraising services See Part IV, line 17 .				
g Other (If line 11g amount exceeds 10% of line 25, column	2,555.		<del>   </del>	
(A) amount, list line 11g expenses on Schedule O)		<del></del>		<del> </del>
2 Advertising and promotion	2,788.			
3 Office expenses	7,294.			
4 Information technology			<u> </u>	
5 Royalties		<del></del>		
6 Occupancy	66,240.			<del></del>
7 Travel	47,193.		ļ	
8 Payments of travel or entertainment expenses for any federal, state, or local public officials				
9 Conferences, conventions, and meetings	8,555.			
0 Interest	1,833.			
1 Payments to affiliates				
Depreciation, depletion, and amortization	6,643.		ļ	
Insurance	9,043.		<u> </u>	<del></del>
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)				
a LABOR ORGANIZATION TOOLS	8,193.			
MEMBER ACTIVITIES	8,213.			
C UNION TARGETED JOBS EXPENSE	238,502.			
d FEES & PER CAPITA	197,106.		ļ	
e All other expenses			ļ	
Total functional expenses. Add lines 1 through 24e	879,274.		<u> </u>	
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here				
SOP 98-2 (ASC 958-720)			<u> </u>	Form 990 (2

**Balance Sheet** 

Part X

(B) (A) Beginning of year End of year 1 7,670. 26,585. 2 103,701 2 33,882. 3 4 5 Loans and other receivables from current and former officers, directors trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . . . 6 7 8 Prepaid expenses and deferred charges . . . . . . . . . 9 10a 10b 10 c 39,197. 11,679 210,036. 11 277,259 11 274,648. 12 Investments - other securities See Part IV, line 11 . . . . . . . 12 Investments - program-related See Part IV, line 11 . . . . . . . 13 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . . . . . . . . . . . . . 400,309 16 545,151 17 17 Grants payable.................. 18 18 19 19 20 20 Escrow or custodial account liability Complete Part IV of Schedule D . . . . . . . . 21 21 Loans and other payables to current and former officers, directors, trustees, 22 22 Secured mortgages and notes payable to unrelated third parties . . . . . . . 23 168,800. 24 24 Other liabilities (including federal income tax, payables to related third parties 25 and other liabilities not included on lines 17-24) Complete Part X of Schedule D. 6,266 25 6,296. 6,266 26 Total liabilities. Add lines 17 through 25 . . . . . . . . . . . . . . . 175,096 Organizations that follow SFAS 117 (ASC 958), check here ► or Fund Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets....... 27 Temporarily restricted net assets . . . . . . . . . 28 29 Organizations that do not follow SFAS 117 (ASC 958), check here > X and complete lines 30 through 34. 30 Paid-in or capital surplus, or land, building, or equipment fund . . . . . . . . . . . . . . . . . . 31 31 32 32 Retained earnings, endowment, accumulated income, or other funds . . . . . . . . 394,043 370,055. 33 394,043 33 370,055. 34 400,309 34 545,151.

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Form 990 (2016)

rom	1990 (2016) INTERNATIONAL ASSOCIATION OF HEAT & 51 AWIA 61-603	8500		Pa	ige 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	<u></u>		$\cdot \square$
1	Total revenue (must equal Part VIII, column (A), line 12)		8.	55,2	86.
2	Total expenses (must equal Part IX, column (A), line 25)	J	8.	79,2	74.
3	Revenue less expenses Subtract line 2 from line 1	J		23,9	88.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	J	3	94,0	43.
5	Net unrealized gains (losses) on investments				
6	Donated services and use of facilities				
7	Investment expenses	1			
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain in Schedule O)				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	1			. = -
Da	column (B))	.1	3	/0,0	)55.
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	· · · ·	· · · .	· · ·	. X
			[	Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		ł		1
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain				
	ın Schedule O				
2 8	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	_X_	L
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a	i	}		1
	separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis				
			ł		1
1	Were the organization's financial statements audited by an independent accountant?		2 b	<u> </u>	<u> </u>
	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				
	Separate basis		1		
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,				
•	review, or compilation of its financial statements and selection of an independent accountant?		2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain				
	in Schedule O				
3 :	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		Х
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit		1		1
	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

OMB No 1545-0047

2016

Department of the Treasury Internal Revenue Service

► 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.

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

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

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2016

	ection 527 organizations Com				
if the	organization answered 'Yes,	,' on Form 990, Part IV, line 4, or Form 990	-EZ, Part VI, line 47 (	Lobbying Activities), th	ien
		that have filed Form 5768 (election under sec			
Р	art II-A	that have NOT filed Form 5768 (election und	,	•	•
if the (Prox	organization answered 'Yes, y Tax) (see separate instruct	,' on Form 990, Part IV, line 5 (Proxy Tax) ( tions), then	see separate instruc	tions) or Form 990-EZ,	Part V, line 35c
• s	ection 501(c)(4), (5), or (6) orga	anizations Complete Part III			
Name o	of organization			Employer identifica	ation number
		TION OF HEAT & 51 AWIA		61-603850	
Par	t I-A Complete if the or	rganization is exempt under section	on 501(c) or is a	section 527 organiz	zation.
1		ganization's direct and indirect political camp of 'political campaign activities')	aign activities in Part I	V	
2	Political campaign activity exp	enditures (see instructions)		▶ \$	
		impaign activities (see instructions)			
		rganization is exempt under section			<del> </del>
1	Enter the amount of any excise	e tax incurred by the organization under sect	ion 4955		
		e tax incurred by organization managers und			
3	If the organization incurred a s	section 4955 tax, did it file Form 4720 for this	year?		Yes No
4 a	Was a correction made?				· · · · Yes No
b	If 'Yes,' describe in Part IV				
Par	t I-C Complete if the or	rganization is exempt under section	on 501(c) , excep	t section 501(c)(3).	
		ended by the filing organization for section 52			
2	Enter the amount of the filing of function activities	organization's funds contributed to other orga	nizations for section 5	27 exempt	
3	Total exempt function expendine 17b	tures Add lines 1 and 2 Enter here and on F	Form 1120-POL,	<b>≻</b> \$	
4	Did the filing organization file F	Form 1120-POL for this year?			Yes No
5	organization made payments amount of political contribution	nd employer identification number (EIN) of al For each organization listed, enter the amouns received that were promptly and directly de action committee (PAC). If additional space is	nt paid from the filing elivered to a separate	organization's funds Also political organization, suc	enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)		<b></b>			

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

Schedule C (Form 990 or 990-EZ) 20	16 INTERNATIO	NAL ASSOCIATION O	F HEAT & 51_AWI	A 61-603	8500 Page 2
Part II-A Complete if section 501	the organization	on is exempt under se	ction 501(c)(3) and	filed Form 5768 (e	lection under
A Check ► If the filin	g organization belo	ongs to an affiliated group (and	d list in Part IV each affili	ated group member's nar	ne,
address,	EIN, expenses, an	d share of excess lobbying ex	(penditures)		
B Check ► I If the filin	ig organization che	cked box A and 'limited contro	ol' provisions apply		
(The term		ying Expenditures eans amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	res to influence put	olic opinion (grass roots lobby	ing)		
b Total lobbying expenditu	res to influence a le	egislative body (direct lobbying	g)		
c Total lobbying expenditu	res (add lines 1a ai	nd 1b)			
d Other exempt purpose ex	xpenditures				
e Total exempt purpose ex	penditures (add lin	es 1c and 1d)			
f Lobbying nontaxable am both columns	ount Enter the am	ount from the following table i	n 		
If the amount on line 1e, coli	umn (a) or (b) is	The lobbying nontaxable	amount is		
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1	000,000,1	\$100,000 plus 15% of the excess	s over \$500,000		
Over \$1,000,000 but not over \$	\$1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000		
Over \$1,500,000 but not over \$	\$17,000,000	\$225,000 plus 5% of the excess	over \$1,500,000		
Over \$17,000,000		\$1,000,000			
<del>-</del>	· · · · · · · · · · · · · · · · · · ·	of line 1f)			
<del>-</del>		enter -0			<del></del>
i Subtract line 1f from line	1c If zero or less,	enter -0		<u> </u>	· <del></del>
		ner line 1h or line 1i, did the or			Yes No
(Som		4-Year Averaging Period L nat made a section 501(h) el pelow. See the separate inst	ection do not have to c		
	Lot	obying Expenditures During	4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(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			<u> </u>		

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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)).

(circular dider section so (iii).					
		1)	(b)		
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	res	No	Am	ount	
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)?					
c Media advertisements?	$\neg$				
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?	$\neg$				
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?	$\neg$				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	$\neg$				
i Other activities?	$\neg$				
j Total Add lines 1c through 1i · · · · · · · · · · · · · · · · · ·	$\neg$	$\neg \neg$			
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	$\neg$				
b If 'Yes,' enter the amount of any tax incurred under section 4912	$\neg$				
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912	İ	ſ			
d if the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c section 501(c)(6).	)(5),	, or			
3000001 00 1(0)(0).			<del></del>	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1	+	X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				<del>                                     </del>	X
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year				<del>                                     </del>	$\frac{\lambda}{X}$
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c				01(c)	<u>^</u>
(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) Part answered 'Yes.'	art l	II-A,	line 3, is	01(0)	
1 Dues, assessments and similar amounts from members	$\overline{\cdot \cdot \cdot}$	1		320,89	)4.
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).	Ī				
a Current year		2 a	8	320,89	<b>34</b> .
b Carryover from last year		2 b			
c Total		2 c		320,89	4.
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
22 2	Ì	-			

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

5 Taxable amount of lobbying and political expenditures (see instructions)

4

820,894.

### 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.

2016

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

INTERNATIONAL ASSOCIATION OF HEAT & 51 AWIA 61-6038500 Parti Drganizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . . . . . . . . . Aggregate value of contributions to (during year) . . . Aggregate value of grants from (during year) . . . . . Aggregate value at end of year . . . . . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds 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? No Part II Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2 a 2 b c Number of conservation easements on a certified historic structure included in (a) . . . . . . . . 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, 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) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part 1118 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8. 1 a 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 2 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. . . ▶ S

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value	
1 a Land					
b Buildings	205,000.		1,971.	203,029.	
c Leasehold improvements					
d Equipment	44,233.		37,226.	7,007.	
e Other					
otal. Add lines 1a through 1e. (Column (d) must equa	ai Form 990, Part X, colur	nn (B), line 10c.)		210,036.	

BAA

Schedule D (Form 990) 2016

Part VII Investments - Other Securities.	Waster 5 000	Dort IV line 44h Con Form 000 F	2 and V 1 40
Complete if the organization answered ' (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-o	
(1) Financial derivatives		(C) Method of Valuation Cost of Cha-o	1-year market value
(2) Closely-held equity interests		<del> </del>	
(3) Other	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
(A)	· <del> </del>		
(B)			
(C)			
(D)			
(E)			· -
(F)		<u> </u>	
(G)	<u> </u>		
<u>(H)</u>	-}		·- <del></del>
(I) 	-		
Total (Column (b) must equal Form 990, Part X, column (B) line 12) >	· <u>1</u>	<u> </u>	
Part VIII Investments – Program Related. Complete if the organization answered	Yes' on Form 990	Part IV line 11c See Form 990 F	Part X line 13
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-	
(1)	1.,,===================================		
(2)	<del> </del>		· — - · · · · · · · · · · · · · · · · ·
(3)	T		<del></del>
(4)			
(5)			
(6)			
(7)			
(8)		<u> </u>	<del></del>
(9)			
(10)			
Total (Column (b) must equal Form 990, Part X, column (B) line 13).	· <u> </u>	<u> </u>	
Part IX Other Assets. Complete if the organization answered '	Yes' on Form 990.	Part IV. line 11d. See Form 990.	Part X. line 15.
	escription		(b) Book value
(1)			
(2)			ļ
(3)			
(4)			-
(6)			
(7)		<del></del>	<del> </del>
(8)			
(9)			
(10)	<del></del>	. <del></del>	<u> </u>
Total. (Column (b) must equal Form 990, Part X, column (B)	line 15) <u></u> . <u>.</u> .	<u></u>	<u> </u>
Part X Other Liabilities.	C 000 D IV II 1	11 116 C F 000 D-+ V E 25	
Complete if the organization answered 'Yes' on (a) Description of liability	(b) Book value		
(1) Federal income taxes	(b) Book value		
(2) PAYROLL WITHHOLDING TAX PAYABLE	6,29	96.	
(3) BREATH OF LIFE CHANCES		0.	
(4)			
(5)		<del> </del>	
(6)			
(7)		<del></del>	
(8)	<del></del>		
(10)		<del></del>	
(11)		<del> </del>	
Total (Column (b) must equal Form 990, Part X, column (B) line 25)	6,29	96.	
2. Liability for uncertain tax positions In Part XIII, provide the text of the foo			bility for uncertain
tax positions under FIN 48 (ASC 740) Check here if the text of the footnote			

chedule D·(Form 990) 2016 INTERNATIONAL ASSOCIATION OF HEAT & 51 AWIA 61-	6038500	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Ret	urn.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities	ı	
c Recoveries of prior year grants		
d Other (Describe in Part XIII )		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	ii ii	
b Other (Describe in Part XIII )	4	
c Add lines 4a and 4b	4 c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per R	eturn.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities		
b Prior year adjustments	Ĭ.	
c Other losses		
d Other (Describe in Part XIII )		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	
4 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 4a		
b Other (Describe in Part XIII )		

Part XIII Supplemental Information.

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

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

Department of the Treasury

Pt XII, Line 2c

Pt XII, Line 3b

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

financial statements.

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number 61-6038500 INTERNATIONAL ASSOCIATION OF HEAT & 51 AWIA Pt VI, Line 11b Officers of organization review Form 990. Pt VI, Line 19 Documents are available for inspection upon request. Pt VI, Line 7a Union members elect officers by vote. Limited decisions are reserved for the approval by members other than Pt VI, Line 7b the governing body. Column F includes reimbursements and weekly/biweekly expenses agreed to and recorded in the union bylaws and minutes. Pt VII, Col (F) Revenue includes dues, fees, assessments, per capita, rental income direcly related to union, misc reimbursements. Pt VIII The balance sheet includes assets, liabilities, and net assets direcetly Pt X related to the union. Pt V, Line 3b Organization had not unrelated business income. Pt VI, Line 6 Organization consits of union members. Pt VI, Line 8a Organization recording secretary records minutes of meetings. Pt VI, Line 8b Committee meetings are recorded. Pt XII, Line 1 Cash method of accounting used for all reporting purposes. Organization annually selects independent auditor for compilation of

Organization did not receive a federal reward.