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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2017

Open to Public Inspection

A	For th	ne 2017 caleл	dar year, or tax year beginning , 2017, and ending		
В		f applicable	C C	D Employe	er identification number
		ldress change	INTERNATIONAL BROTHERHOOD OF ELECTRICAL	35-0	1782423
		те спапре	WORKERS LOCAL 1393	E Telephor	
	\vdash	•	3645 S. EAST STREET	·	
	\vdash	tial return	INDIANAPOLIS, IN 46227	317.	791.1362
	Fina	al return/terminated			
	An	nended return		G Gross re	
	Ap	plication pending	F 9	this a group return	□ ·•• □ ·••
			SAME AS C ABOVE	re all subordinates i 'No,' attach a list (included? Yes No
ī	Tax-e	exempt status	501(c)(3) X 501(c) (5) (insert no.) 4947(a)(1) or 527	ivo, attacina list (ace mandenomy
J	Web	bsite: > TB		roup exemption nur	mber ▶ 0064
ĸ	Form	of organization			ate of legal domicile IN
	rt I	Summar		<u> </u>	
		Briefly descri	pe the organization's mission or most significant activities BARGAINING AC	TENT CEEVI	NC DRODER
			CONDITIONS, PAY LEVELS, AND BENEFITS	ENT SEEVT	ING PROPER
õ		MOUTING	CONDITIONS, TAI LEVELS, AND DEMETIS		
퉏					
Governance	2	Check this bo	x If the organization discontinued its operations or disposed of more that		oot accate
õ			ting members of the governing body (Part VI, line 1a)	an 23 % or 115 r 1	3 18
			dependent voting members of the governing body (Part VI, line 1b)	}	4 18
es			of individuals employed in calendar year 2017 (Part V. line 2a)	}	5 31
Activities &	-		of volunteers (estimate if necessary)	<u> </u>	60
ट्ट	ſ		d business revenue from Part VIII, column (C), line 12		7a 0.
_			business taxable income from Form 990 1 400 4 1		7b 0.
			RECEIVED	Prior Year	Current Year
	8	Contributions	and grants (Part VIII, line 1h)	- 11101 1001	
e	l		ice revenue (Part VIII, line 2g)	2,806,1	57. 3,391,026.
e e			come (Part VIII, column (A), line 3, 4, and 7d)	1,3	
Revenue			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 119)	1,5	700:
	12	Total revenue	- add lines 8 through 11 (must equal Pare 4) Solume (A), line 12)	2,807,4	72. 3,391,734.
			milar amounts paid (Part IX, column (A), lines 1-3)	2,007,4	72. 3,331,734.
			to or for members (Part IX, column (A), line 4)	702 6	70 039 533
			 	792,6	
S			er compensation, employee benefits (Part IX, column (A), lines 5-10)	1,187,3	81. 1,355,078.
Expenses	16 a	Professional	fundraising fees (Part IX, column (A), line 11e)		
ĝ	b	Total fundrais	ing expenses (Part IX, column (D), line 25) ▶		
ú	17	Other expens	es (Part IX, column (A), lines 11a-11d, 11f-24e)	716,5	40. 844,007.
	18	Total expense	es Add lines 13-17 (must equal Part IX, column (A), line 25)	2,696,6	
			expenses Subtract line 18 from line 12	110,8	
አ 8				jinning of Current	
anc anc	20	Total assets (Part X, line 16)	1,249,2	
Assets or d Balances	21		s (Part X, line 26)	189,1	
Net A					
			fund balances Subtract line 21 from line 20	1,060,0	43. 1,314,169.
	rt II	Signatur			
Unde	er penalt plete De	ties of perjury, I de	clare that I have examined this return, including accompanying schedules and statements, and to the bes refuther than officer) is based on all phormation of which preparer has any knowledge	t of my knowledge a	and belief, it is true, correct, and
-		1. de la constitución de la cons	/ / / / /		-10/18
			e of officer	Data	5/7/10
Sig	jn	Signatu	1	Date	•
He	re	1		SINESS MG	R
		Type or	print name and title		
_		Print/Type p	reparer's name Preparer's signature Date	Check	If PTIN
Pa	id	JEFFRE	Y A. MULLEN, CPA JEFFREY A. MULTEN, CPA 5-1./8	self-employe	P00007660
	pare		The state of the s		
Us	e On	ly Firm's addre		Firm's EIN	02-0735385
		-	ZIONSVILLE, IN 46077-1549	Phone no	317-938-0309
May	, the II	DC discuss th	Is return with the preparer shown above? (see instructions)	T Home no	X Yes No

SCANNED AUG 07 2018

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

	990 (2			BROTHERHOOD OF ELECTRICAL 35-07824	23 Page 2
Par	t III		-	ervice Accomplishments	
	5 "			a response or note to any line in this Part III	
1	-		ibe the organization's mi	ssion: G_PROPER_WORKING_CONDITIONS, PAY LEVELS, AND BENEFI	·mc
	DAK	2WT 1/1	'NG WOENT SEEVIN	G FROPER WORKING CONDITIONS, PAI LEVELS, AND BENEFI	.12
2	Did the	e organ	zation undertake any sign	ficant program services during the year which were not listed on the prior	
	Form	990 or	990-EZ?		Yes X No
		-,	ribe these new services		_
3		_		g, or make significant changes in how it conducts, any program services?	Yes X No
_			ribe these changes on S		
4	Section and re	ibe the on 501(evenue	organization's program c)(3) and 501(c)(4) orga , if any, for each prograr	service accomplishments for each of its three largest program services, as measunizations are required to report the amount of grants and allocations to others, the service reported	red by expenses e total expenses,
4 a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	BAR	GAINI	NG AGENT SEEKIN	G PROPER WORKING CONDITIONS, PAY LEVELS, AND BENEFI	TS
		_			
					
		_			
		-			
		- 			
4 b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
					-
		-			
	(Code) (Expenses \$	including grants of \$) (Revenue \$	
40	Code) (Expenses \$_	(Nevertide 7	
		-			
			~		
	Othor	Drogra	m services (Describe in	Schodulo ()	
40	(Expe		m services (Describe in	including grants of \$) (Revenue \$)
4 e			n service expenses		<u>'</u>
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	103	Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6	İ	х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI	11 a	Х	
	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		Х
	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VIII	11 c		Х
1	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
	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	12 b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	<u></u>	X
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,'	19	[х

			Yes	No
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
ı	f 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20Ь		
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 17 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 ⁷ If 'Yes,' complete Schedule I, Parts I and III	22		х
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
ı	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
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	25 a		
1	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If '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
	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 current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
l	b 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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31	<u> </u>	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		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
	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
	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	ļ	X
١	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Х	
BAA	· ·	Form	1 990	(2017)

Form 990 (2017) INTERNATIONAL BROTHERHOOD OF ELECTRICAL 35-0782423 Page 5 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 Yes No 1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1 a 71 **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 b 31 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming X (gambling) winnings to prize winners? 1 c 2a 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 31 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Х 2 b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) $\overline{\mathbf{X}}$ 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 a **b** If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule 0. 3 b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4 a **b** If 'Yes,' enter the name of the foreign country 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? X 5 a X **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b 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 Х solicit any contributions that were not tax deductible as charitable contributions? 6 a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 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 a 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 Form 82827 7 c d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f 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 Form 1098-C7 7 h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring Х organization have excess business holdings at any time during the year? R 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9 a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 b 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10 a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11 b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? 13 a Note. See the instructions for additional information the organization must report on Schedule O **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

13c

14 a

X

Form 990 (2017) INTERNATIONAL BROTHERHOOD OF ELECTRICAL 35-0782423 Page 6 Part VI | Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 18 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are independent 18 1 h 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 Х 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 Did the organization make any significant changes to its governing documents Х since the prior Form 990 was filed? 4 X 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X 6 Did the organization have members or stockholders? 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х members of the governing body? 7 a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, Х stockholders, or persons other than the governing body? 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8 a b Each committee with authority to act on behalf of the governing body? 8 b X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a Did the organization have local chapters, branches, or affiliates? 10 a Х 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 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Х 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 X 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done 12 c X 13 13 Did the organization have a written whistleblower policy? X 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a Х 15b X **b** Other officers or key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16 a **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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > ΙN Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records

BARBARA HEDGE 3645 S. EAST STREET

INDIANAPOLIS IN 46202 317.791.1362

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (C) Position (do not check more than one box, unless person is both an officer and a (F) (A) (B) (E) Estimated amount of other Name and Title Reportable Reportable Average compensation from hours director/trustee) compensation from

	per			ectori				the organization	related organizations	compensation
	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	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) ROBERT FOX	40									
BUSINESS MGR/FS	0	X		X		ļ!		114,269.	0.	0.
(2) MICHAEL EDWARDS	30_]								
PRESIDENT	00	X		Χ				570.	0.	<u> </u>
(3) RONALD THOMPSON	20_									
VICE PRESIDENT	0	X		X				2,383.	0.	0.
(4) ROBERT MADDEN	20_]								
TREASURER	0	X		X				3,518.	0.	0.
(5) RICHARD BYRER	20]								
RECORDING SEC	0	X		X				1,746.	0.	0.
(6) JAMES ALEXANDER	10_									
EBOARD	0	X						615.	0.	0.
(7) KEVIN CRULL	10									
EBOARD	0	X			_			5,774.	0.	0.
(8) SCOTT ESTES	10									
EBOARD	0	X		1		ļ	L	705.	0.	0.
(9) GARY HENRY	10									
EBOARD	0	X			ĺ		ĺ	1,559.	0.	0.
(10) MARK KELLEY	10									
EBOARD	0	X]		2,733.	0.	0.
(11) ZACHARY KOLB	10				-					
EBOARD	0	X						5,244.	0.	0.
(12) BRENT LEWIS	10								1	
EBOARD	0	Х						5,871.	0.	0.
(13) TIMOTHY OVERMAN	10									
EBOARD	0	X						6,884.	0.	0.
(14) CHUCK OWENS	10									
		1 .,	1	I	1	1	l	1 007	_	_

BAA

EBOARD

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1,887.

Form 990 (2017)

Ture viii	Section A. Officers, Directors,		1				1		ponoutou zinp	1	5 (00/////	lucuj
	•	(B)			(C)							
	. (A)	Average	(do	not che	ositic	ore than	one	(D)	(E)		(F)	
	Name and title	hours per				on is bot ctor/trus		Reportable compensation from	Reportable compensation from		Estimated ount of other	
		week (list any	오 코	ᆵ	2 2	5 B I	균	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	co	mpensation from the	
		hours	Individual trustee or director	Institute	ney employed	is is	Former	(1, 2, 10)	(** 2 **** ****************************	or	ganizatio nd related	
		related organiza	Cto dia	[일]	႞ၘ	8 8	4				ganization	
		- tions below	įξ	ᇑ	8) g						
		dotted line)	stee	Institutional trustee	"	employee						
		,		0		g						
(15) DON	ALD SMALL	10			+	_				1		
EBO			X					1,959.	0.			0.
(16) WIL	LIAM WALKER	10										
EBO	ARD	0	Х					2,707.	0.			0.
(17) GAR	Y WINSTEAD	10										
EBO	ARD		X					1,401.	0.			0.
(18) SHA	NE JENKINS	10							-			
EBO			Х					2,654.	0.			0.
(19) ALE	X VANDONSELAAR	10										
MEM	BERSHIP DEVE	0	X					62,638.	0.	<u> </u>		0.
(20) COR	BIN BEAMER	10										
STE	WARD	70_	X		-	1		607.	0.	-		0.
(21) TRA	VIS BELL	10										
STE	WARD	0	Х					1,970.	0.			0.
(22) STE	VEN HAZLEWOOD	10										
	WARD	0	X		\perp			2,606.	0.	ļ		<u>0</u> .
	EY HORTON	10								}		
	WARD	0	X					742.	0.			0.
(24) SHA	WN LEEVER						li					
STE	WARD	0	X					810.	0.			0.
(25) DUA	NE MONROE	10_										
STE	WARD	0	Х					746.	0.			0.
1 b Sub-t							▶	232,598.	0.			0.
	from continuation sheets to Part VII, S	ection A					▶ .	37,162.	0.			0.
	(add lines 1b and 1c)						<u> </u>	269,760.	0.			0.
	number of individuals (including but not lin	nited to those I	ısted	above) who	o recei	ved	more than \$100,00	0 of reportable com	pensatio	on	
from	the organization 1								_			
										_	Yes	No
	ne organization list any former officer, o			key e	empl	oyee,	or h	iighest compensa	ted employee			
on lin	ne 1a ⁵ If 'Yes,' compléte Schedule J for	such individu	ial							3		<u> </u>
4 For a	ny individual listed on line 1a, is the sui	m of reportab	le co	mpen	satio	n _, and	oth	er compensation	from			
	rganization and related organizations gr <i>individual</i>	eater than \$1	50,00)07 If	'Yes	s,' con	nple	te Schedule J for		4		Х
	ny person listed on line 1a receive or a	coruo compor	scatio	n from	n		lata	d organization or	induidual	,		
for se	ervices rendered to the organization? If	'Yes,' comple	te So	chedu	n an le J	for su	ch p	erson	iriuiviuuai	5		Х
Section I	B. Independent Contractors	-										
1 Comp	plete this table for your five highest come ensation from the organization. Report con	pensated ind	epen	dent o	ontr	actors	tha	t received more t	han \$100,000 of		_	
COMP		iperisation for	trie C	aieriua	ır ye	ar endi	ng v				····	
	(A) Name and business	address						(B) Description (of services		(C) ensatio	on
PTITEMMA	ILLENWARTH DENNERLINE GROTH & TOWE, LLP 429 E. VERMONT STREET, SUIT LAW FIRM										151,	016
LIPPEMAY	KIII DENNEKLINE GROIN & TOWE, EL	F 425 E. V	EKNO	N1 3	LKEE	, , ,	111	LAW FIRM			131,	910.
												
								<u> </u>				
		· - ·							I			
2 Total	number of independent contractors (includ	ing but not lim	ited to	thos	e list	ed abo	ve) v	who received more	than			
	number of independent contractors (includ	9	ited to	thos	e list	ed abo	ve) '	who received more	than			

Form 990

Continuation Sheet for Form 990

OMB No 1545 0047

2017

Department of the Treasury , Internal Revenue Service

Name of the Organization

Employler Identification number

INTERNATIONAL BROTHERHOOD OF ELECTRICAL Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 35-0782423

(A)	(B)	oyees B) (C)						(D)	(E)	(F)
Name and Title		Posi	tion (allt	hat appl		Reportable	1	Estimated
	Average hours per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated omployee	Former	compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
MICHAEL MURPHY	$-\frac{10}{2}$. ,						2 215		0
STEWARD	0	Х						2,315.	0.	0
JAMIE ROCK		.,						660		0
STEWARD	0	X						660.	0.	0
DANIEL SHANKS	$-\frac{10}{2}$. ,						677		0
STEWARD	0	Х					_	677.	0.	0
JASON_SMITH	$-\frac{10}{2}$							264		•
STEWARD	0	Х						764.	0.	0
GREGORY THACKER	$-\frac{10}{2}$.,				1		000		•
STEWARD	0	Х			-	-		820.	0.	0
DANIEL_WOLF	$-\frac{10}{2}$.,								0
STEWARD HILLIAM ERICKSON	0	X						989.	0.	0
WILLIAM ERICKSON		. ,,						756		0
ALBAT SUB COMM	0	X						756.	0.	0
VIRGIL MASTERS	$-\frac{10}{2}$.,						2 024	0	0
ALBAT SUB COMM	0	Х				-	_	3,034.	0.	0
TERRY GARDINER	$-\frac{10}{2}$	v						2 226	0	0
RENEW COMM	0	X			<u> </u>			2,326.	0.	0
BENJAMIN KING	$-\frac{10}{2}$							2.762		0
RENEW COMM ROBERT LEWIS	10	Х		-	-			2,762.	0.	0
RENEW COMM		·						677.	0.	0
JARRETT ROSE	10	X					-	6//.	0.	0
RENEW COMM		X						1 016	0.	0
KYLE SHAKE	10	Λ.	_					1,816.	0.	
RENEW COMM		Х						1 000	0.	0
THOMAS BARRIGER	10	^			_			1,822.		
NEGO COMM								1 406	0.	0
JAMES FITZGERALD	10	Х						1,406.		0
EBOARD		X						428.	0.	0
ROBERT JINES, JR	10		_		-			420.		0
STEWARD		х			ì			180.	0.	0
WILLIAM PERRY	10	_^_						100.		0
ORGANIZING		Х						570.	0.	0
CLARENCE SIEVEKING	10					!		570.	0.	
AFS		Х						45.	0.	0
THOMAS MARONEY	10						\vdash	45.	U.	0
GRIEVANT		Х						45.	0.	0
CHUCK BEAVER	10	^	 		-	 		45.	U.	
NEGO COMM		Х					1	617.	0.	^
RON CARR	10	Λ.	_				-	01/.	U.	0
NEGO COMM		Х]			845.	0.	0
NEGO COMM	<u> </u>	Λ.			1	<u> </u>	<u>. </u>			orm 990 Cont 201

Form 990

Continuation Sheet for Form 990

OMB No 1545 0047

2017

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

INTERNATIONAL BROTHERHOOD OF ELECTRICAL 35-0782423
Part VII | Continuation: Officers, Directors, Trustees, Key Employees, and

(A)	(B)			(((D)	(E)	(F)
Name and Title	Average hours per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
KENNY DUNCAN	10	1						2 624		
NEGO COMM	0	X	<u> </u>				\vdash	2,624.	0.	
JOSEPH KRUML NEGO COMM		ļ		ļ				660	0	(
PATRICK OBRIAN	10	X	<u> </u>	_			\vdash	668.	0.	
NEGO COMM		↓						666.	0.	
GREG PEMBERTON	10	X					\vdash	000.	0.	
NEGO COMM	$ \frac{10}{0} -$	X						2,788.	0.	
GENEVA RAISOR	10	 ^	├—			 	\vdash	2,100.	U.	
NEGO COMM		Х				1		1,057.	0.	
RANDY RUSSELL	10		 				\vdash	1,057.		
NEGO COMM		x						656.	0.	
JOSHUA SALTS	10								· · · · · · · · · · · · · · · · · · ·	
NEGO COMM		l x						2,007.	0.	
JOHN SHELTON	10									
NEGO COMM		l x						2,315.	0.	
JERMEY WAITE	10									
NEGO COMM	0	X						827.	0.	
					_					
					j					
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rai		Check if Schedule O		onse or note to an	y line in this Part VI	H		П
					(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 Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, gismilar amounts not included Noncash contributions included Total. Add lines 1a-1f	grants, and above 1 f					
	-"	Total. Add lines 1a-11		Business Code				
Program Service Revenue	2 a	MEMBERSHIP DUES &	ASSESSMENTS		3,391,026.			3,391,026.
J.S.	е							
gra	f	All other program service	e revenue					
Pro		Total. Add lines 2a-2f	'	•	3,391,026.			
	3	Investment income (incother similar amounts) Income from investmen	_	•	708.			708.
	5	Royalties	() Parl					
	b	Gross rents Less rental expenses	(ı) Real	(II) Personal			i	
		Rental income or (loss) Net rental income or (lo						
) ((i) Securities	(ii) Other				
		Gross amount from sales of assets other than inventory Less cost or other basis	(y occurred	(ii) Galei				
		and sales expenses						
	d	Gain or (loss) Net gain or (loss)		•				
Other Revenue	8 a	Gross income from fund (not including \$ of contributions reported						
ت ت		See Part IV, line 18		a .				
the		Less direct expenses Net income or (loss) fro		b events				<u>-</u>
O		Gross income from gam See Part IV, line 19	_	a			1, 7	
	b	Less direct expenses		b				
	С	Net income or (loss) fro	m gaming activ	vities. ►		-		
		Gross sales of inventory and allowances		a				
		Less cost of goods sold		b				
		Net income or (loss) fro		Business Code				
	11 a b							
	C							
		All other revenue	 	<u> </u>	-			
		Total. Add lines 11a-11e Total revenue. See inst	-	-	2 201 724		<u> </u>	2 201 724
	<u></u>	Total Teveride, See IIISt	ructions		3,391,734.	0.	0.	3,391,734.

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 r	····			
Do 1 6b, 1	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			<u>-</u>	
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	938,523.			
5	Compensation of current officers, directors, trustees, and key employees	269,760.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	651,494.			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	239,787.			
9	Other employee benefits	119,439.			
10	Payroll taxes	74,598.			
11	Fees for services (non-employees)	-	· · · · · ·		
	Management				
	Legal	179,677.			
	Accounting	13,250.			
	Lobbying Professional fundraising services See Part IV, line 17		 -		
	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings	69,749.			
	Interest				
21	Payments to affiliates	50.636			
	Depreciation, depletion, and amortization Insurance	52,638.			
	Other expenses Itemize expenses not	19,261.			
	covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	OFFICE AND BUILDING EXPENSES	164,766.			
_	GRIEVANCE AND ARBITRATION	87,254.			
	ORGANIZING, FORM & NEGOTIATION	73,991.			
	AUTOMOBILE EXPENSE	45,200.			
	All other expenses	138,221.			
_	Total functional expenses. Add lines 1 through 24e	3,137,608.			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

32

33

34

BAA

32

33

34

1,314,169.

1,482,719.

1,060,043.

1,249,236.

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year Cash - non-interest-bearing 807,779. 1 569,657 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 Accounts receivable, net 4 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 Notes and loans receivable, net Inventories for sale or use 8 2,000 2,000. Prepaid expenses and deferred charges 10,184 9 11,986. Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10 a 1,210,446 10b b Less accumulated depreciation 10 c 549,532 667,355 660,914. Investments - publicly traded securities 11 40. 40 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 Other assets See Part IV, line 11 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34). 1,249,236 16 1,482,719. Accounts payable and accrued expenses 50,995 17 17 55,078 18 Grants payable 18 Deferred revenue 19 19 20 Tax-exempt bond liabilities 20 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 Secured mortgages and notes payable to unrelated third parties 23 27,000. 66,717. Unsecured notes and loans payable to unrelated third parties. 24 24 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. 71,481 25 86,472. 26 Total liabilities. Add lines 17 through 25 189,193 168,550. Organizations that follow SFAS 117 (ASC 958), check here and complete lines 27 through 29, and lines 33 and 34. Balance 27 27 Unrestricted net assets Temporarily restricted net assets 28 28 Permanently restricted net assets 29 or Fund Organizations that do not follow SFAS 117 (ASC 958), check here > X and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 1,060,043 1,314,169. Paid-in or capital surplus, or land, building, or equipment fund 31

Form **990** (2017)

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

Forr		0782423		Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,3	91,	734.
2	Total expenses (must equal Part IX, column (A), line 25).	2	3,1	37,	608.
3	Revenue less expenses Subtract line 2 from line 1	3	2	54,	126
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,0	60,0	043.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,3	14,	<u> 169.</u>
<u>Pa</u>	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviews separate basis, consolidated basis, or both Separate basis Both consolidated and separate basis	ed on a			
;	b Were the organization's financial statements audited by an independent accountant?		2 b	Х	
	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	ate			
					⁻
,	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	X	<u> </u>
	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
I	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit	ıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b		
BAA	L		Form	990	(2017)

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

INTERNATIONAL BROTHERHOOD OF ELECTRICAL

	WORKERS LOCAL 1393		35-0782423
Par	t Organizations Maintaining Don	or Advised Funds or Other Similar Fu	nds or Accounts.
	Complete if the organization and	swered 'Yes' on Form 990, Part IV, line (a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(c) some dates to the	(a) r division and since decodering
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 do are the organization's property, subject to the	onor advisors in writing that the assets held in d e organization's exclusive legal control?	donor advised funds Yes No
6		nors, and donor advisors in writing that grant fun fit of the donor or donor advisor, or for any othe	
Par			
		swered 'Yes' on Form 990, Part IV, line	e 7
1	Purpose(s) of conservation easements held I		
	Preservation of land for public use (e g ,	· I I	of a historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization last day of the tax year	held a qualified conservation contribution in the for	rm of a conservation easement on the
	last day of the tax year		Held at the End of the Tax Year
á	Total number of conservation easements		2a
i	Total acreage restricted by conservation eas	ements	2 b
	: Number of conservation easements on a cer		2 c
	Number of conservation easements included	Inn (c) acquired after 7/25/06, and not on a histo	
•	structure listed in the National Register	in (c) acquired after 7/25/00, and not on a first	2d
3	Number of conservation easements modified, tratax year ►	ansferred, released, extinguished, or terminated by	the organization during the
4	Number of states where property subject to cons	servation easement is located >	
5	Does the organization have a written policy r and enforcement of the conservation easeme	regarding the periodic monitoring, inspection, ha ents it holds?	andling of violations, Yes No
6	•	, inspecting, handling of violations, and enforcing co	
7	Amount of expenses incurred in monitoring, insp \$\$\\$\$	pecting, handling of violations, and enforcing conse	rvation easements during the year
8	Does each conservation easement reported and section 170(h)(4)(B)(ii)?	on line 2(d) above satisfy the requirements of so	ection 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization repor include, if applicable, the text of the footnote conservation easements	ts conservation easements in its revenue and expere to the organization's financial statements that	nse statement, and balance sheet, and describes the organization's accounting for
Par	t III Organizations Maintaining Coll	ections of Art, Historical Treasures, o swered 'Yes' on Form 990, Part IV, line	r Other Similar Assets.
1 8	If the organization elected, as permitted und	ler SFAS 116 (ASC 958), not to report in its reve held for public exhibition, education, or research in	enue statement and balance sheet works of
ŀ	If the organization elected, as permitted und historical treasures, or other similar assets held following amounts relating to these items	ler SFAS 116 (ASC 958), to report in its revenue for public exhibition, education, or research in furth	e statement and balance sheet works of art, nerance of public service, provide the
	(i) Revenue included on Form 990, Part VIII	I, line 1	► \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art, amounts required to be reported under SFAS	, historical treasures, or other similar assets for fina S 116 (ASC 958) relating to these items	
	Revenue included on Form 990, Part VIII, lin	ue 1	► \$
	Assets included in Form 990 Part Y		▶ ♦

Schedule D (Form 990) 2017 INTE				35-078	
3 Using the organization's acquisition					·
items (check all that apply)				•	
a Public exhibition b Scholarly research		H	or exchange programs		
c Preservation for future gener	rations	e Uther			
4 Provide a description of the organize Part XIII.		ns and explain how they	y further the organization's	s exempt purpose in	
5 During the year, did the organiza to be sold to raise funds rather t	ation solicit or r	eceive donations of ar	t, historical treasures, o	r other similar assets	Yes No
Part IV Escrow and Custodia	Arrangeme	ents. Complete if	the organization an	swered 'Yes' on Fo	
line 9, or reported an	amount on F	orm 990, Part X,	line 21.		
1 a Is the organization an agent, true on Form 990, Part X?	stee, custodian	or other intermediary	for contributions or other	er assets not included	Yes No
b If 'Yes,' explain the arrangement	t in Part XIII an	d complete the follow	ing table		
					Amount
c Beginning balance				1 c	
d Additions during the year				1 d	
e Distributions during the year				1 e	
f Ending balance				1f	
2a Did the organization include an a				,	Yes No
b If 'Yes,' explain the arrangement	t in Part XIII C	neck nere if the explai	nation has been provide	d on Part XIII	
Part V Endowment Funds. C	`omplete if th	ne organization ar	swered 'Yes' on Fo	orm 990 Part IV Jun	ne 10
Tart V Endownient unds. C	(a) Current y				(e) Four years back
1 a Beginning of year balance	(a) carrenty	(b) The year	(c) 140 years back	(u) Three years back	(O) Four yours Buon
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships	ļ				
Other expenditures for facilities and programs					1
f Administrative expenses	ļ		_		
q End of year balance					
2 Provide the estimated percentage	e of the curren	t vear end balance (lir	ne 1g. column (a)) held	as	
a Board designated or quasi-endowm		%	10 79, 00147111 (4), 11014	40	
b Permanent endowment ►	%				
c Temporarily restricted endowmen	nt ►	8			
The percentages on lines 2a, 2b, a		ual 100%			
3a Are there endowment funds not in	the possession o	of the organization that :	are held and administered	for the	
organization by	poodooo				Yes No
(i) unrelated organizations					3a(i)
(ii) related organizations.					3a(ii)
b If 'Yes' on line 3a(ii), are the rela	•	•			3b
4 Describe in Part XIII the intended			ent funds		
Part VI Land, Buildings, and					
Complete if the organ	ization answ	ered 'Yes' on For	m 990, Part IV, line	: 11a. See Form 99	0, Part X, line 10.
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land			63,240.	*	63,240.
b Buildings	L		730,065.	225,616.	504,449.
c Leasehold improvements	L		61,305.	61,305.	0.
d Equipment	L		284,504.	196,395.	88,109.
e Other			71,332.	66,216.	5,116.
Total. Add lines 1a through 1e (Colum	nn (d) must equ	ual Form 990, Part X,	column (B), line 10c)	>	660,914.
BAA				Sched	ule D (Form 990) 2017

Part VII	Investments – Other Securities.	'V-a' an Farm 000	N/A	000 Deet V June 12
(a) Desc	Complete if the organization answered cription of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-	
	cal derivatives	(b) Dook value	(C) Method of Valuation Cost of End-	
• •	y-held equity interests			
(3) Other	, mana aquing interests			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
<u>(1)</u>				
	mn (b) must equal Form 990, Part X, column (B) line 12)			
Part VIII	Investments – Program Related. Complete if the organization answered	'Yes' on Form 990	N/A Part IV Ine 11c See Form	990 Part X line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or en	
(1)	(-)	(4) 2 501. (4.65	(c) meaner of teneral control of	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
<u>(9)</u>				
(10)				
	mn (b) must equal Form 990, Part X, column (B) line 13	N /3		
Part IX	Other Assets. Complete if the organization answered	N/A Yes' on Form 990'), Part IV, line 11d, See Form	990. Part X. line 15.
	(a) Desc			(b) Book value
(1)				
(2)				
(3)				
(5)				
(6)			· · · · · · · · · · · · · · · · · · ·	
(7)				
(8)				
(9)				
(10)				
	olumn (b) must equal Form 990, Part X, column (B)) line 15)		<u> </u>
Part X	Other Liabilities. Complete if the organization answered 'Yes' on Fo	rm 990 Part IV line 11	e or 11f See Form 990 Part X line 2	5
	(a) Description of liability	(b) Book value	000 T 0111 000, T art X, Illie L	
(1) Fede	eral income taxes			
	RUED SALARIES, WAGES AND BENEFI			
	TO ESCROW FUND	29,82	6.	
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
	nn (b) must equal Form 990, Part X, column (B) line 25)	▶ 86,47		
	or uncertain tax positions. In Part XIII, provide the text of the foot under FIN 48 (ASC 740). Check here if the text of the footnote ha			s liability for uncertain

Schedule D (Form 990) 2017 INTERNATIONAL BROTHERHOOD OF I	ELECTRICAL	35-0782423	Page 4
Part XI Reconciliation of Revenue per Audited Financial Sta Complete if the organization answered 'Yes' on Form	tements With Reven		
1 Total revenue, gains, and other support per audited financial statements	11		
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			
c Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII)	2 d		
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		
b Other (Describe in Part XIII.)	4 b		
c Add lines 4a and 4b	4 c		
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, III	5		
Part XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' on Form	-	•	
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	2 a		
b Prior year adjustments	2 b		
c Other losses	2 c		
d Other (Describe in Part XIII.)	2 d		

Part XIII Supplemental Information.

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

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

e Add lines 2a through 2d3 Subtract line 2e from line 1

b Other (Describe in Part XIII)

c Add lines 4a and 4b

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 XI, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

4 b

BAA

Schedule **D** (Form 990) 2017

3

4 c

5

SCHEDULE O (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.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LOCAL 1393

Employer identification number 35-0782423

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

SEVERAL MEMBERS OF THE AUDIT COMMITTEE AND BOOKKEEPER REVIEW THE 990 PREPARED BY THE INDEPENDENT CPA FIRM.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE LOCAL UNION FILES IT FORM LM-2 LABOR ORGANIZATION ANNUAL REPORT VIA THE DEPARTMENT OF LABOR WEBSITE, WHICH IS AVAILABLE TO THE PUBLIC VIA THE DOL.