EXTENDED TO NOVEMBER 15, 2019

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

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

<u>A</u>	For the	e 2018 calendar year, or tax year beginning an	d ending		
В	Check if	C Name of organization		D Employer identifi	cation number
	applicab	$^{\circ}$ INTL. ASSOC. OF HEAT & FROST INSULATE	ORS		
	Addre chang	ss Tarman Transmina Today 10			
Ē	Name chang	THAM C EDOCH THOU AMODO I	OCAL	19 39-0	137350
F	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/si		
F	Final	NOT WOOLEE DOINDY DRIVE	1100111701	•	548-9606
<u> </u>	return termir			G Gross receipts \$	1,631,113.
_	ated Amen	ded DEMAILER WT 52072			
┝	return Applic			H(a) Is this a group r	
_	⊥_ltiòn pendi	F Name and address of principal officer BREII DARGE	E 2 0	for subordinates	
_		" N27 W23155 ROUNDY DRIVE, PEWAUKEE, WI		72 H(b) Are all subordinates	
_	_	empt status 501(c)(3)X _501(c) (_5) ◀ (insert no.) 4947(a)(1) or	77 /	list (see instructions)
		te: NSULATORS19.COM	1	H(c) Group exemption	
		organization: X Corporation Trust Association Other	# LY	ear of formation: 1906 1	M State of legal domicile; WI
	art I	Summary	, DD 0140	me am prome	IM MIID
ě	1	Briefly describe the organization's mission or most significant activities TO			
Governance		INTERESTS OF ITS MEMBERSHIP BY PROVIDING			
er.	2	Check this box if the organization discontinued its operations or disp	osed of n	nore than 25% of its net a	_
Š	3	Number of voting members of the governing body (Part VI, line 1a)	1 1	RECEIVED 3	6
∞	4	Number of independent voting members of the governing body (Part VI, line 1b) I	4	0
es	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	C246	OCT of any	13
Ζŧ	6	Total number of volunteers (estimate if necessary)	131	QCT 21 2019 🔓	0
Activities	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		72	0.
•		Net unrelated business taxable income from Form 990-T, line 38		GDFN LIT 78	0.
				Prior Year-	Current Year
41	8	Contributions and grants (Part VIII, line 1h)		0.	0.
ž	9	Program service revenue (Part VIII, line 2g)		1,496,783.	1,414,870.
Revenue	10	investment income (Part VIII, column (A), lines 3, 4, and 7d)		38.	1,967.
┰╩	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		185,918.	174,927.
<u>4</u> 013	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,682,739.	1,591,764.
-		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	,	0.	0.
	1			0.	
-	14	Benefits paid to or for members (Part IX, column (A), line 4)	w	765,208.	
Sec.	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10	יי	705,208.	788,200.
Expense	16a	Professional fundraising fees (Part IX, column (A), line 11e)	^	<u>, </u>	0.
אַר	. p	Total fundraising expenses (Part IX, column (D), line 25)	0.	CCE 742	(50.360
ال	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		665,743.	
20 20 20 20		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,430,951.	1,446,634.
=	19	Revenue less expenses Subtract line 18 from line 12		251,788.	
	<u> </u>			Beginning of Current Year	End of Year
Assets of	20	Total assets (Part X, line 16)		2,693,653.	2,838,988.
¥,	21	Total liabilities (Part X, line 26)		4,696.	
Net	22	Net assets or fund balances. Subtract line 21 from line 20		2,688,957.	2,834,087.
_	art II	Signature Block			
		alties of perjury, I declare that I have examined this return, including accompanying schedi			ny knowledge and belief, it is
tru	e, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of	which prep	arer has any knowledge.	
		1,500			
Sig	gn	Sugnature of officer		Date	
He	re	BRETT LARGE, BUSINESS MANAGER			10-14-19
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check [PTIN
Pai	id	THOMAS M. POWERS, CPA Thomas m Power	s CPA	10-14-19 If sett-emplo	P00241729
	parer	Firm's name FREYBERG HINKLE ASHLAND POWERS		OWELL Firm's EIN	39-1531945
	e Only	Firm's address 15420 W. CAPITOL DR.	<u></u>		
-50	- 4.111	BROOKFIELD, WI 53005-2621		Phone no 26	27846210
N.4-	w the !	RS discuss this return with the preparer shown above? (see instructions)	_	11 110110 110.22 0	X Yes No
			tions		Form 990 (2018)
430	001 12-	siels – Eliza Foi Fabel work Reduction Act Notice, see the separate instruc	UUIIS.		1 (1111 555 (2010)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

4d Other program services (Describe in Schedule O)

Total program service expenses

(Expenses \$ including grants of \$

) (Revenue \$

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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		_X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
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_	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	_9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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	441		₩.
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> X</u>
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	44-		v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X _
	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	116		
•	the organization's disparate or constitution and the first tax year include a received that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	x	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		_X_
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		_X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	_	<u> </u>
	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	ا . ـ ا		v
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

AND ALLIED WORKERS LOCAL 19 39-0137350 Form 990 (2018) Page 4 Part IV Checklist of Required Schedules (continued) Yes No 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 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete X Schedule K If "No," go to line 25a 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L. Part I 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or 26 former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," X complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial 27 contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member X of any of these persons? If "Yes," complete Schedule L, Part III 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 instructions for applicable filing thresholds, conditions, and exceptions). X A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a **b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV X 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, X director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? X If "Yes," complete Schedule N. Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 32 Х Schedule N. Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Х Part V. line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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 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 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 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 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 8 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

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c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

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(gambling) winnings to prize winners?

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Par	t V. Statements Regarding Other IRS Filings and Tax Compliance (continued)				
				Yes	No
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	2a 13			i
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retuin	rns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		X
þ	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule	0	3b		
4a	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)?	4a		X
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 A	ccounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		L
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	ne organization solicit			
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ions or gifts	ľ		
	were not tax deductible?		6b		<u> </u>
	Organizations that may receive deductible contributions under section 170(c).				
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices provided to the payor?	7a		├
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	d	7b		\vdash
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required	- -		
	to file Form 8282?	7d	7c_		
	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		
e •	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribution of the personal benefit contribution.		7 f		
,	If the organization received a contribution of qualified intellectual property, did the organization file Fi		7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
	sponsoring organization have excess business holdings at any time during the year?	,	8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter	1 1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a]		
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	1 1			
	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1 1	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	ł		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		13a		 '
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O		134		
h	Enter the amount of reserves the organization is required to maintain by the states in which the				
U	organization is licensed to issue qualified health plans	13b			
•	Enter the amount of reserves on hand	13c	1		
_	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O	14b		
15	is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune				
-	excess parachute payment(s) during the year?		15		X
	If "Yes," see instructions and file Form 4720, Schedule N				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	it income?	16		X
	If "Yes," complete Form 4720, Schedule O				
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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 4a			
	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 0.]
b	Enter the number of voting members included in line 1a, above, who are independent 1b 0			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
	officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
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	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b_	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		-	
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		_X_
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14	X	<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		<u> </u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			1
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)	s only)	avalla	roie
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)	d & :		
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	ıınan	ual	
00	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	BRETT LARGE - 262-548-9606			
	N27 W23155 ROUNDY DRIVE, PEWAUKEE, WI 53072			

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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

- 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	on nor any related	orga	nıza	tion	cor	nper	nsat	1		·
(A)	(B)			(((D)	(E)	(F)
Name and Title	Average	(do		Posi heck		than (one	Reportable	Reportable	Estimated
	hours per	box,	, unle	ss pe	rson	is boti x/trus	h an	compensation	compensation	amount of
	week	\vdash		u a u	76010	77443	100)	from	from related	other
	(list any hours for	irect				L		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	eord	a			sated		(W-2/1099-MISC)	(***2/1099-141130)	organization
	organizations	ruste	F fus		e Je	шреп		(** 27 1000 141100)		and related
	below	duaft	lgo lg	l _	oldin	stco	_			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key e	Highest compensated employee				
(1) DARIN WOLF	1.00									
RECORDING SECRETARY/E-BOAR		Х	<u> </u>	X				2,655.	0.	99.
(2) ALEX LARGE	1.00									
SGT AT ARMS/ E-BOARD		Х		X	_			989.	0.	99.
(3) JEFF BURNS	1.00								_	•
E-BOARD / TRUSTEE	1 22	X			_			0.	0.	0.
(4) ELISEO ALEMAN	1.00	,,						202	0	00
E-BOARD / TRUSTEE	1 00	X				-		202.	0.	_99.
(5) TODD ANNICK	1.00	x					ŀ	817.	0.	755.
E-BOARD / TRUSTEE	1.00	Λ		-		1		01/.		755.
(6) JASON PARNAU	1.00	x					ĺ	177.	0.	0.
E-BOARD	40.00	Λ			-				0.	0.
(7) FRANK RODRIGUEZ PRESIDENT	40.00			x				84,570.	0.	88,807.
(8) BRETT LARGE	40.00			-	 	<u> </u>	\vdash	01/0/01		3373373
BUSINESS MANAGER		i		x				83,912.	0.	80,529.
(9) ROBERT POTTER	40.00								-	•
FIN SEC/BUS AGENT		1		X				76,779.	0.	79,390.
(10) GREG GOTTSACKER	1.00									
VICE PRESIDENT				X				3,564.	0.	1,232.
					l					
				<u> </u>	_					
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										Form 990 /2018

AND ALLIED WORKERS LOCAL 19

Part VII Section A. Officers, Di	rectors, Trustees, Key Em	ploy	ees,	, and	d Hi	ghes	st C	ompensated Employee	es (continued)				
(A)	(B)			((C)			(D)	(E)			(F)	
Name and title	Average	(do	not c	Pos heck			one	Reportable	Reportable		Es	tımate	ed
	hours per week	box	, unle cer an	ss pe	rson ı	s both	h an	compensation	compensation	1		ount o	of
·	(list any	-					Ė	from the	from related organizations			pensa	tion
	hours for	r direc				pa lee		organization	(W-2/1099-MIS			om th	
	related	stee 0	trustee			pensa		(W-2/1099-MISC)			_	anızat	
	organizations below	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee	_					i relati Inizati	
	line)	Individ	Institu	Officer	(еу еп	Higher	Янт				o.gc	ii ii Lati	0,10
			İ										-
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		-											
		+	-		-	\vdash							
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		+	<u> </u>		<u> </u>							_	
		1	•										
			<u> </u>										
		<u> </u>											
	 	4											
		╁	├							-			
		┪	ĺ										
1b Sub-total		1	<u>. </u>	l	<u> </u>		—	253,665.		0.	25	1,0	10.
c Total from continuation she	ets to Part VII, Section A							0.		0.			0.
d Total (add lines 1b and 1c)	·						<u> </u>	253,665.		0.	25	1,0	10.
2 Total number of individuals (in	ncluding but not limited to t	hose	liste	ed al	bove	e) wh	o re	eceived more than \$100	,000 of reportable	;			_
compensation from the organ	nization						_				ı		<u> </u>
										ı		Yes	No
3 Did the organization list any for			e, ke	y er	nplo	yee,	or	highest compensated e	mployee on				X
line 1a? If "Yes," complete Sc 4 For any individual listed on lin			omo	ones	ation	and	i oti	her compensation from	the organization		3		
and related organizations gre			-						ine organization		4	$\overline{\mathbf{x}}$	
5 Did any person listed on line									dual for services	Ì			
rendered to the organization?	•										5		X
Section B. Independent Contract	tors												
 Complete this table for your fi 	-									ens:	ation f	rom	
the organization Report com		year	endı	ng v	vith (or w	ıthır		<u>/ear</u>				
Name	(A) and business address	NT/	INC	7				(B) Description of s	ervices	С	(C ompe		n
		TA	OTAT	<u> </u>			\dashv						
							寸						
								·					
									1				
							\dashv						
	·						\dashv						
2 Total number of independent	contractors (including but i	not li	mite	d to	tho	se lis	sted	l above) who received m	ore than				
\$100,000 of compensation from			_	•)				_			
											Form !	990 (2018)

AND ALLIED WORKERS LOCAL 19

Pa	t VJI	II Statement of Rever	nue					
		Check if Schedule O cont	ains a response	or note to any lin	ne in this Part VIII			
		,			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ats st	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
S, G	c	Fundraising events	1c					'
a it		Related organizations	1d					
S,E		Government grants (contribut	tions) 1e					
P S		All other contributions, gifts, gran		_				
를		similar amounts not included abo	ve 1f					
d d	g	Noncash contributions included in lines	1a-1f \$					
<u>8</u> E	<u>h</u>	Total, Add lines 1a-1f		<u> </u>				
				Business Code				
8	2 a	DUES		900099	1,414,870.	1,414,870.		
Program Service Revenue	b							
Sen	c	:						
ev ev	d	l						
P. P.	е	·						
Δ.	f	All other program service reve	enue					
	g	Total. Add lines 2a-2f		<u> </u>	<u>1,414,870.</u>			
	3	Investment income (including	dividends, inter	est, and				600
		other similar amounts)		.	622.			622.
	4	Income from investment of ta	x-exempt bond p	oroceeds -				
	5	Royalties	<u></u>	, >				
			(i) Real	(ii) Personal				
	6 a		14,400.					
	b	Less rental expenses	39,349.					
	С	: Rental income or (loss)	-24,949.	·L		· 		
		Net rental income or (loss)			-24,949.			-24,949.
	7 a	Gross amount from sales of	(i) Securities	(II) Other	-			
		assets other than inventory		1,345.	-			
	b							
		and sales expenses	-	1,345.	-			
	C	Gain or (loss)		1,343.	1,345.			1,345.
		Net gain or (loss)			1,345.	-		1,343.
ē	8 а	Gross income from fundraisin	•					
Ş		including \$ contributions reported on line	of					
æ		•	•					
Other Revenue		Part IV, line 18 Less: direct expenses	a b		i			
ŏ		•	-					·
		 Net income or (loss) from fund Gross income from gaming ad 	=					
	9 4	Part IV, line 19						
		Less direct expenses	a b					
		: Net income or (loss) from garr	-					
		Gross sales of inventory, less	=			-		
	10 a	and allowances	a	3,213.				
	h	Less cost of goods sold	b					
		: Net income or (loss) from sale	-	D	3,213.	3,213.	<u> </u>	
ŀ		Miscellaneous Revenu		Business Code		7,223		
	11 2	REIMBURSEMENTS		900099	194,406.	194,406.		
	b			900099	2,257.			† · · · · · · · · · · · · · · · · · · ·
					=,==,			†
	4	All other revenue						1
	ب م	Total, Add lines 11a-11d		•	196,663.	T		
	12	Total revenue See instructions			1 591 764	1.614.746.	n .	-22,982.

Form **990** (2018)

AND ALLIED WORKERS LOCAL 19

Part IX | Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	er organizations must c	omplete column (A).	
	Check if Schedule O contains a respon	se or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21			_	
2	Grants and other assistance to domestic				
	ındıvıduals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members]
5	Compensation of current officers, directors,				
	trustees, and key employees	504,675.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	146,538.			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	81,381.			_
9	Other employee benefits	24,549.			
10	Payroll taxes	31,123.			
11	Fees for services (non-employees)				
а	Management	4 045	7		
b	Legal	4,915.			
С	Accounting	20,230.			
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees		=		
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	77 475			
12	Advertising and promotion	77,475. 63,622.			
13	Office expenses	03,022		***	
14	Information technology		-	-	
15	Royalties	7,896.	_		
16 17	Occupancy Travel	25,002.			
	Payments of travel or entertainment expenses	23,002.			
18	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	42,351.			
20	Interest	289.			
21	Payments to affiliates	315,787.			
22	Depreciation, depletion, and amortization	37,262.			
23	Insurance	12,291.			
24	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 0.)				
а	CONTRIBUTIONS	21,710.			
b	ORGANIZING AND MARKET R	13,597.			
С	MEMBERS DISABILITY	10,900.			
d	SCHOLARSHIPS	4,800.			
е	All other expenses	241.			
25	Total functional expenses Add lines 1 through 24e	1,446,634.			
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)				

AND ALLIED WORKERS LOCAL 19 39-0137350 Page 11 Form 990 (2018) Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) (A) End of year Beginning of year 1,803,897. 1,898,012. 1 1 Cash - non-interest-bearing $200, \overline{000}$. 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 4 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 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 instr) Complete Part II of Sch L 6 Assets 7 7 Notes and loans receivable, net 21,413. 21,587. 8 Inventories for sale or use 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 1,115,957. basis Complete Part VI of Schedule D 10a 774,228. 813,504. b Less accumulated depreciation 10b 302,453. 10c 11 11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 11 12 13 13 Investments - program-related See Part IV, line 11 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 2,693,653. 2,838,988. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 4,696. 4,901. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 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 Liabilities key employees, highest compensated employees, and disqualified persons 22 Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 4,696. 4,901. 26 Total liabilities. Add lines 17 through 25 complete lines 27 through 29, and lines 33 and 34. Vet Assets or Fund Balances 2,688,957. 2,834,087. 27 Unrestricted net assets 27 Temporarily restricted net assets 28 28 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund

> 2,838,988. Form 990 (2018)

2,834,087.

32

33

32

33

2,688,957.

2,693,653.

Total net assets or fund balances

Total liabilities and net assets/fund balances

Retained earnings, endowment, accumulated income, or other funds

review, or compilation of its financial statements and selection of an independent accountant?

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

Act and OMB Circular A-133?

X

Form 990 (2018)

X

2c

За

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations. Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

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

_	S				
	Section 501(c)(4), (5), or (6) organization		EDOCO TACILI	AMOD C Emi	oloyer identification number
INGI		SSOC. OF HEAT &		ATORS	39-0137350
D:	art I-A Complete if the or	JIED WORKERS LOCA ganization is exempt un	der section 501(c)	or is a section 527	organization
	onipiete ii tile or	gainzation is exempt an	der section ou i(o)	01 10 4 00011011 021	<u> </u>
	Donate and a decomption of the constant		!	in Dort IV	
	Provide a description of the organi		cai campaign activities	_	\$
	Political campaign activity expendi				Ψ <u></u>
3	Volunteer hours for political campa	iigh activities			
Pá	art I-B Complete if the or	ganization is exempt un	der section 501(c))(3).	
1	Enter the amount of any excise tax		•		\$
2	Enter the amount of any excise tax	incurred by organization manag	gers under section 495	5	\$
3	If the organization incurred a section	on 4955 tax, did it file Form 4720	o for this year?		Yes No
48	a Was a correction made?				Yes No
t	If "Yes," describe in Part IV				
Pa	art I-C Complete if the or	ganization is exempt un	der section 501(c)	, except section 501	(c)(3).
1	Enter the amount directly expende	d by the filing organization for se	ection 527 exempt fund	ction activities	\$
2	Enter the amount of the filing organ	nization's funds contributed to d	ther organizations for s	section 527	
	exempt function activities			•	\$
3	Total exempt function expenditure	s Add lines 1 and 2 Enter here	and on Form 1120-POL	- 1	
	line 17b			>	\$
4	Did the filing organization file Form	1120-POL for this year?			└ Yes └ No
5	Enter the names, addresses and e	mployer identification number (E	EIN) of all section 527 p	olitical organizations to wh	ich the filing organization
	made payments For each organiza	•			· · · · · · · · · · · · · · · · · · ·
	contributions received that were pr				rate segregated fund or a
	political action committee (PAC) If	additional space is needed, pro	vide information in Par	t IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	
				filing organization's	contributions received and promptly and directly
				funds If none, enter -0	delivered to a separate
					political organization
					If none, enter 0
		<u> </u>			-
		<u> </u>			
					_
					1

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

832041 11-08-18

INTL. ASSOC. OF HEAT & FROST INSULATORS

Schedule C (Form 990 or 990-EZ) 2018 2	AND ALI	LIED	WORKERS LOC	AL 19	39-	0137350 Page 2
Part II-A Complete if the orga	anization	is exe	mpt under sectio	n 501(c)(3) and file	ed Form 5768 (e	election under
section 501(h)).						
	=		- · · ·	Part IV each affiliated	group member's na	me, address, EIN,
expenses, and share		, ,	•			
B Check 🕨 💹 If the filing organizat	tion checked	box A a	nd "limited control" pro	ovisions apply		
	ts on Lobbyi litures" mea	_	nditures unts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence public	noinigo	(grass roots lobbying)			
b Total lobbying expenditures to influ			···	Ī		
c Total lobbying expenditures (add lir	_		, , , , , ,			
d Other exempt purpose expenditure		-,		Ţ		
e Total exempt purpose expenditures		c and 1	d)	Ī		
f Lobbying nontaxable amount Ente	•		•	h columns		
If the amount on line 1e, column (a) or			bying nontaxable am	1		-
Not over \$500,000	1.1.7.1.1		the amount on line 1e			
Over \$500,000 but not over \$1,000	0.000		00 plus 15% of the exc			~
Over \$1,000,000 but not over \$1,50			00 plus 10% of the exc	·		
Over \$1,500,000 but not over \$17,0			00 plus 5% of the exce			
Over \$17,000,000	,	\$1,000	_	, , , , , , , , , , , , , , , , , , ,		
	•					_
g Grassroots nontaxable amount (ent	ter 25% of lir	ne 1f)				
h Subtract line 1g from line 1a If zero				[
i Subtract line 1f from line 1c. If zero	or less, ente	er -0-				
j If there is an amount other than zer	ro on either li	ine 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this y						Yes No
(Some organizations th	nat made a s	section 5	eraging Period Under 501(h) election do not ate instructions for li	have to complete all o	of the five columns	below.
	Lobbyi	ng Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 20°	15	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a 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))						
6 Grandroots Johnwan avanaditura						
f Grassroots lobbying expenditures			<u> </u>	<u> </u>		<u> </u>

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 2018 AND ALLIED WORKERS LOCAL 19 39-0137350 Page 3

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)).

1 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? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total, Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? bif "Yes," enter the amount of any tax incurred by organization managers under section 4912 d if the filing organization incurred a section 4912 as, did it flee Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 1 Dues, assessments and similar amounts from members Section 1501(c)(6) and if either (a) BOTH Part IIII-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members Section 1501(c) (organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 4 Description and the description	or each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(t)
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? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 11 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred by organization managers under section 4912 d if the filming organization incurred a section 4912 tax, did if tille Form 4720 for this year? Part III-A] Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 1 Dues, assessments and similar amounts from members 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenses for which the section 527(f) tax was paid). 2 Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	the lobbying activity.	Yes	No	Amo	ount
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

Open to Public Inspection

OMB No 1545-0047

Name of the organization

INTL. ASSOC. OF HEAT & FROST INSULATORS

Employer identification number 39-0<u>137350</u>

Schedule D (Form 990) 2018

AND ALLIED WORKERS LOCAL 19 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds Total number at end of year Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Part II 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 2 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 a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

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

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INTL. ASSOC. OF HEAT & FROST INSULATORS

Sche		IED WORKER							<u> 37350</u>	
Par	t III Organizations Maintaining C	collections of Ar	rt, Hist	orical Tr	easures, c	r Other	Simil	ar Asse	ts (continu	ed)
3	Using the organization's acquisition, accessi	on, and other record	s, check	any of the	following that	t are a sigi	nificant	use of its	collection	items
	(check all that apply)									
а	Public exhibition	d	- 🔲 ι	_oan or exc	hange progra	ıms				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII									
5										
	to be sold to raise funds rather than to be ma	aintained as part of t	he orgar	nization's co	ollection?				Yes	No_
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the	organizatio	n answered "	Yes" on F	orm 990), Part IV,	lıne 9, or	
	reported an amount on Form 990, Par	rt X, line 21								
1a	Is the organization an agent, trustee, custodi	an or other intermed	lary for	contribution	ns or other as	sets not in	cluded			
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII.	and complete the fo	llowing t	able						
									Amount	
С	Beginning balance						1c			
	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for e	escrow or c	ustodial acco	unt liability	/?		Yes	□ No
b	If "Yes," explain the arrangement in Part XIII	Check here if the ex	olanatio	n has been	provided on	Part XIII				
Par)			
		(a) Current year	(b) P	rıor year	(c) Two year	s back (c) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions									
c	Net investment earnings, gains, and losses						•			
ď	Grants or scholarships									
e	Other expenditures for facilities									
_	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curi	rent vear end balanc	e (line 1	g, column (a	a)) held as.	•				
_	a Board designated or quasi-endowment ▶%									
ь	Permanent endowment	%								
_	c Temporarily restricted endowment \%									
·	The percentages on lines 2a, 2b, and 2c should equal 100%									
3a	Are there endowment funds not in the posse		ation tha	it are held a	and administe	red for the	organi	zation		
-	by						•		Γy	es No
	(j) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
h	b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?									
_	4 Describe in Part XIII the intended uses of the organization's endowment funds									
Part VI Land, Buildings, and Equipment.										
	Complete if the organization answere		D. Part IV	/. line 11a \$	See Form 990	, Part X, III	ne 10.			
	Description of property	(a) Cost or o			t or other		umulate	ed	(d) Book	value
	becompaint of property	basis (investr			(other)		eciation		,-,	
12	Land	,	-		4,210.				274	,210.
	Buildings				2,685.	2	50,9	58.		$\frac{727}{727}$.
	Leasehold improvements									
	Equipment		f	6	7,733.		39,2	96.	28	,437.
	Other	-			1,329.		$\frac{33}{12}, \frac{1}{12}$,130.
	Add lines 1a through 1e (Column (d) must e	agual Form 990 Part	Y colun				,_			.504.

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018 AND ALLIED W	ORKERS LOCA	L 19	39-0137350 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" or			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or	end-of-year market value
(1) Financial derivatives	···-		
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.		•	
Complete if the organization answered "Yes" o	n Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or	end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		-	
Part IX Other Assets.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, lin	e 11d See Form 990, Part X, line 15	
(a) D	escription		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line	15)		>
Part X Other Liabilities.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, lin	e 11e or 11f See Form 990, Part X, line	e 25
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2018

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(8) (9) INTL. ASSOC. OF HEAT & FROST INSULATORS

AND ALLIED WORKERS LOCAL 19 39-0137350 Page 4 Schedule D (Form 990) 2018 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a 1,631,113. 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. Net unrealized gains (losses) on investments 2a b Donated services and use of facilities 2b c Recoveries of prior year grants 2c 39,349 d Other (Describe in Part XIII) 2d 39,349. Add lines 2a through 2d 2e 1,591,764. Subtract line 2e from line 1 3 3 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 b Other (Describe in Part XIII) 0. c Add lines 4a and 4b 4c 591 764. Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1,485,983. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities 2a 2b **b** Prior year adjustments c Other losses 2c 39,349 2d d Other (Describe in Part XIII) 39,349. 2e e Add lines 2a through 2d 1,446,634. 3 Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIII) c Add lines 4a and 4b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4; Part X, line 2. Part XI. lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional information. PART X, LINE 2: U.S. GENERALLY ACCEPTED ACCOUNTING PRINCIPLES REQUIRE LOCAL MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE LOCAL AND RECOGNIZE A TAX LIABILITY (OR ASSET) IF THE LOCAL HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY THE INTERNAL REVENUE THE LOCAL IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS; HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS. PART XI, LINE 2D - OTHER ADJUSTMENTS: RENTAL EXPENSES NETTED WITH RENTAL INCOME PART XII, LINE 2D - OTHER ADJUSTMENTS:

Schedule D (Form 990) 2018

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SCHEDULE J. (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ➤ Attach to Form 990. 2018
Open to Public

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

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

INTL. ASSOC. OF HEAT & FROST INSULATORS

AND ALLIED WORKERS LOCAL 19

Employer identification number 39-0137350

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's		1	· .
	CEO/Executive Director. Check all that apply Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization.			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С		4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of			
а	The organization?	5a		
b	Any related organization?	5b		
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			
а	The organization?	_6a		
b	Any related organization?	6b		
	If "Yes" on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2018

Page 2

AND ALLIED WORKERS LOCAL 19

Schedule J (Form 990) 2018

39-0137350

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(I) (III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of	(B) Breakdown of W.2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Trtle	•	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)·(D)	in column (B) reported as deferred on prior Form 990
(1) FRANK RODRIGUEZ	Θ	84,570.	0	0.	0.	88,807.	173,377.	0.
- 52	(ii)	0	0	0	0	0	0	0
(2) BRETT LARGE	Ξ	83,912.		0.	0	80,529.	164,441.	0
BUSINESS MANAGER	(ii)	• 0		• 0	• 0	0	0.	0.
(3) ROBERT POTTER	Θ	.677,97		0.	0	79,390.	156,169.	0
٠,	(ii)	0.	0.	0.	• 0	0	0	0.
	Θ							
	(ii)							
	(1)							
	⊞							
	ε							
	Ξ							
	Ξ							
	(ii)							
	(i)							
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Schedule J (Form 990) 2018

INTL. ASSOC. OF HEAT & FROST INSULATORS AND ALLIED WORKERS LOCAL 19

Part III | Supplemental Information

Schedule J (Form 990) 2018

Schedule J (Form 990) 2018 Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information •

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

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.

Inspection

OMB No 1545-0047

Name of the organization

► Go to www.irs.gov/Form990 for the latest information. INTL. ASSOC. OF HEAT & FROST INSULATORS

Employer identification number

AND ALLIED WORKERS LOCAL 19 39-0137350
FORM 990, PART I, DOING BUSINESS AS:
HEAT & FROST INSULATORS LOCAL 19
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PLACEMENT AND ORGANIZING WORKERS TO JOIN THE UNION.
FORM 990, PART VI, SECTION A, LINE 2:
BRETT LARGE AND FRANK RODRIGUEZ HAVE A FAMILY RELATIONSHIP. BRETT LARGE
AND ALEX LARGE HAVE A FAMILY RELATIONSHIP.
DODY 000 DADE IVE GROWTON A LINE C.
FORM 990, PART VI, SECTION A, LINE 6:
THE MEMBERSHIP OF THE LOCAL IS MADE UP OF JOURNEYMEN, FOREMEN, APPRENTICES,
IMPROVERS, AND RETIREES.
FORM 990, PART VI, SECTION A, LINE 7A:
ONLY THE JOURNEYMEN AND FOREMEN ARE ELIGIBLE TO VOTE IN LOCAL ELECTIONS.
FORM 990, PART VI, SECTION A, LINE 7B:
ONLY THE JOURNEYMEN AND FOREMEN ARE ABLE TO APPROVE SIGNIFICANT DECISIONS
OF THE GOVERNING BODY.
FORM 990, PART VI, SECTION A, LINE 8B:
THE LOCAL HAS NO COMMITTEE WITH THE AUTHORITY TO ACT ON BEHALF OF THE
GOVERNING BODY.

FORM 990, PART VI, SECTION B, LINE 11B:

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

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization INTL. ASSOC. OF HEAT & FROST INSULATORS AND ALLIED WORKERS LOCAL 19	Employer identification number 39-0137350
THE FORM 990 IS PROVIDED TO THE BUSINESS MANAGER AND FINA	NCIAL SECRETARY TO
REVIEW AND APPROVE. THE BUSINESS MANAGER AND FINANCIAL S	ECRETARY PRESENT
THE FORM 990 TO THE REST OF THE EXECUTIVE BOARD AT THEIR	SUBSEQUENT
MEETING.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE BUSINESS MANAGER RECEIVES THE GENERAL FOREMAN WAGE RA	TE AT 40 HOURS PER
WEEK. THE FINANCIAL SECRETARY IS ALSO THE BUSINESS AGENT	AND RECEIVES THE
FOREMAN WAGE RATE AT 40 HOURS PER WEEK. COMPENSATION FOR	OFFICERS IS THE
SAME AS THE WAGE PACKAGE GIVEN TO THE LOCAL'S MEMBERS. A	NY CHANGES IN THE
COMPENSATION OF THE BUSINESS MANAGER, FINANCIAL SECRETARY	, OR OFFICERS IS
SUBJECT TO APPROVAL BY THE GENERAL MEMBERSHIP AND IS NOTE	D IN THE MINUTES
OF THE MEMBERSHIP MEETINGS.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE LOCAL MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STA	TEMENTS AVAILABLE
TO THE PUBLIC UPON REQUEST.	
FORM 990, PART XII, LINE 1:	
MODIFIED CASH BASIS OF ACCOUNTING	
	_
FORM 990, PART XII, LINE 2C:	<u> </u>
THE EXECUTIVE BOARD ASSUMES RESPONSIBILITY FOR OVERSIGHT	OF THE AUDIT
AND FOR THE SELECTION OF AN INDEPENDENT ACCOUNTANT.	
	