DLN: 93493114009200 OMB No 1545-0047 Return of Organization Exempt From Income Tax 2018 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019 D Employer identification number B Check if applicable REGIONAL DISTRICT COUNCIL ☐ Address change 36-4633539 % MIKE RELYIN ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminate E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 208 EAST NEW YORK AVENUE ☐ Amended return ☐ Application pending (386) 734-0721 City or town, state or province, country, and ZIP or foreign postal code DELAND, FL $\,$ 32724 $\,$ G Gross receipts \$ 2,572,937 Name and address of principal officer H(a) Is this a group return for MIKE RELYIN □Yes ☑No subordinates? 208 EAST NEW YORK AVENUE H(b) Are all subordinates DELAND, FL 32724 ☐ Yes ☐No included? Tax-exempt status 501(c)(3) ✓ 501(c) (5) ◀ (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► http://wrdc.org L Year of formation 2008 M State of legal domicile FL K Form of organization ☐ Corporation ☐ Trust ☑ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities A LABOR ORGANIZATION, AFFILIATED WITH THE IABSORIW, ENGAGED IN ORGANIZING AND REPRESENTING WORKERS IN VARIOUS SEGMENTS OF THE IRON WORKING INDUSTRY Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) Total number of volunteers (estimate if necessary) . . . 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 b Net unrelated business taxable income from Form 990-T, line 34 7b **Current Year** 1,560,000 8 Contributions and grants (Part VIII, line 1h) . . 1,942,757 9 Program service revenue (Part VIII, line 2g) . . 877,702 885,469 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 1,149 9,644 97,424 117,824 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2,572,937 2,919,032 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3). 35,346 3,450 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 464,783 183,291 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 1,871,341 1,429,578 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 2,371,470 1,616,319 19 Revenue less expenses Subtract line 18 from line 12 . 547,562 956,618 Net Assets or Fund Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . 2,097,547 3,107,318 21 Total liabilities (Part X, line 26) . 119,937 238,235 22 Net assets or fund balances Subtract line 21 from line 20 . 2,869,083 1,977,610 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-04-21 Signature of officer Sign Here MIKE RELYIN PRESIDENT Type or print name and title Date Print/Type preparer's name Preparer's signature PTIN Check I If P00234075 Paid self-employed Firm's name ► WITHUMSMITHBROWNPC Firm's EIN ▶ Preparer Use Only Firm's address ► 4600 EAST WEST HWY 900 Phone no (301) 272-6000 BETHESDA, MD 208143423 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018) Cat No 11282Y

Form	990 (2018)				Page 2
Pa	t III Statement	of Program Service Acc	omplishments		_
	Check if Scho	edule O contains a response or	note to any line in this Part III		🗹
1	Briefly describe the	organization's mission			
SEE S	CHEDULE O				
2	Did the organization	ı undertake any sıgnıfıcant prog	ram services during the year which v	vere not listed on	
	the prior Form 990	or 990-EZ?			🗌 Yes 🗹 No
	If "Yes," describe th	ese new services on Schedule C)		
3	Did the organization	i cease conducting, or make sig	nificant changes in how it conducts, a	any program	
	services?				🗌 Yes 🗹 No
	If "Yes," describe th	ese changes on Schedule O			
4	Section 501(c)(3) a		olishments for each of its three large required to report the amount of grai rrvice reported		
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	See Additional Data				·
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	-				
	-				
4 c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	-				
4d		ices (Describe in Schedule O)			
	(Expenses \$	ıncludıng g	rants of \$	(Revenue \$)
4e	Total program ser	vice expenses >			

Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Nο 1 2 Yes Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆 . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates No 3 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? 4 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? Yes 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? No 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Nο 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 💆 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets? No R 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 No 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Nο permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🛸 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? Yes 11a Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total No 11h assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏 Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its Nο 11c total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 🕏 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported Nο 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🔧 11e Yes Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f Yes the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🥦 12a Did the organization obtain separate, independent audited financial statements for the tax year? 12a Yes b Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Nο If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏 Is the organization a school described in section 170(b)(1)(A)(u)? If "Yes," complete Schedule E 13 Nο 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a Nο **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 14h No Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Nο foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to Nο 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, No 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 Nο Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 Nο **20a** Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* . . . 20a No b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic Nο 21 government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 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

No

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Pai	tiv Checklist of Required Schedules (continued)			
			Yes	No
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? <i>If "Yes," complete Schedule J</i>	23		No
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 Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
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		No
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		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
	Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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? <i>If</i> "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		No

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

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

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V $\,$.

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

Yes

Yes

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No

38

82

0

1a

Part V

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

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

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

12a

13a

14a

14b

15

No

No

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12b

13b

13c

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Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 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	" resp	onse to i	lines 🗸
Se	ction A. Governing Body and Management			
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 8		Yes	No
	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 1b 8			
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	Yes	
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
	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	Yes	
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		V	
	The governing body?	8a	Yes	NI-
	Each committee with authority to act on behalf of the governing body?	8b		No
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	- \	No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Coae	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
	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	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
ь	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		No
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	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	12c		
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
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?			
	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	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		No
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?	4.51		
6-	ction C. Disclosure	16b		
<u> </u>	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
19	Own website 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			
20	policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records			
	►MIKE RELYIN 208 EAST NEW YORK AVENUE DELAND, FL 32724 (386) 734-0721		orm 00	n (2018)

Part VII

/E\

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, or 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

(A) Name and Title	(B) Average hours per week (list any hours for related	Position than on is b	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and						
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	MISC)	related organizations
(1) MICHAEL RELYIN PRESIDENT	5 0	х		x				0	0	0
	0 0 5 0				<u> </u>					
(2) DANIEL S PARKER PRESIDENT (FORMER)	0.0	Х		x				0	0	0
(3) BERNARD A EVERS	5 0									
VICE PRES/TRUSTEE	0 0	Х		Х				0	0	0
(4) DAVID GORNEWICZ VICE PRESIDENT (FORMER)	5 0 0 0	Х		x				0	0	0
(5) JOSEPH SIMPSON	5 0									
FIN SEC-TREAS/RECORDING SEC	0 0	Х		Х				0	0	0
(6) CARLOS ALDANA SERGEANT AT ARMS	5 0 0 0	Х		x				0	0	0
(7) JOSE MENDOZA TRUSTEE	10	Х		×				0	0	0
(8) JOHN FERRERA TRUSTEE	10	Х		x				0	0	0
(9) ERNESTO SOTO DELEGATE	10	х		х				0	0	0
(10) DYLAN DALTON DELEGATE	1 0	х		х				0	0	0
										Form 990 (2018)

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Part VII Section A. Officers, Dire	ctors, Trustees	s, Key	Emp	loye	es,	and I	High	nest Compensate	d Employees (co	ntinued)
(A) Name and Title	(B) Average hours per week (list any hours for related	than o	ne b	ox, u n off	t che inles ficer	and a	on	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee		key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

	4		at ed		

1b Sub-Total			*		

1b Sub-Total				•	▶ _			
c Total from continuation sheets to Pa	art VII , Section	Α			▶			
d Total (add lines 1b and 1s)					-	Λl	Δl	0

1b Sub-Total	-	 _	*		

1b Sub-Total				>			
c Total from continuation sheets to Pa	art VII , Section A	١		▶			
-						1	

Yes

3

4

5

(B)

Description of services

No

Nο

No

No

(C)

Compensation

Form 990 (2018)

Total number of individuals (including but not limited to those listed above) who received more than \$100,000

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for

from the organization Report compensation for the calendar year ending with or within the organization's tax year

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such

services rendered to the organization? If "Yes," complete Schedule J for such person .

(A)

Name and business address

Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on

of reportable compensation from the organization ▶ 0

Section B. Independent Contractors

compensation from the organization ▶ 0

line 1a? If "Yes," complete Schedule J for such individual .

2

3

4

5

		(2018)										Page 9
Part	VIII											
		Check if Schedul	e O contains a	a respo	onse or note to any	(A) revenue	(B Relate exer func reve	ed or npt	(C) Unrelated business revenue	(D) Reven excluded tax under s 512 - 5	ue from ections
s &	1a	Federated campaigi	ns	1a								
ant	ŀ	b Membership dues		1b								
S E	(c Fundraising events		1 c								
fts,	(d Related organizatio	ns	1d								
<u>i</u> i i i	•	e Government grants (co	ontributions)	1e								
Contributions, Gifts, Grants and Other Similar Amounts	f	f All other contributions, and similar amounts no			1.550.000							
uti her		above		1f	1,560,000							
돌동	9	9 Noncash contribution in lines 1a - 1f \$	ons included									
Cont	١,	h Total. Add lines 1a-	-1f		>							
					Business	Code	1,560,000					
Program Service Revenue	2a	WORKING ASSESSMENT	īS.		Dusiness		88	5,469	885,	469		
<u>د</u> √ ما						900099						
F.	b											
er vi	c d			_								
Š	e											
grar		All other program se	rvice revenue									
Pro	a.	Total. Add lines 2a-2	f		8	85,469						
		Investment income (ii			interest, and other	1						
	s	similar amounts) .		•	•	<u> </u>	9,644					9,644
		Income from investme					0					
	5 1	Royalties	(ı) Real		(II) Personal		0					
	6a	Gross rents	(I) Real		(II) Personal	1						
				12,028		1						
	b	Less rental expenses										
	c	: Rental income or		12,028	C	<u> </u>						
		(loss)	(1)			_	12,028					12.020
	a	Net rental income of	r (loss) (ı) Securit	•	(II) Other	<u> </u>	12,028					12,028
	7a	Gross amount	(I) Securit	162	(II) Other	1						
		from sales of assets other										
		than inventory										
	b	Less cost or other basis and										
	_	sales expenses				-						
		Gain or (loss) Net gain or (loss)			<u> </u>	1	0					
		Gross income from fu				1						
ne		(not including \$ contributions reporte		of								
γ .		See Part IV, line 18		а	0							
Re	b	Less direct expenses	s	b	0]						
Other Revenue		: Net income or (loss)		-	ents		0					
οq	9a	Gross income from g See Part IV, line 19	amıng actıvıtı	es								
				а	0							
		Less direct expenses		b	0							
		: Net income or (loss)		activit	ies >		0					
	106	Gross sales of invent returns and allowanc										
				а								
		Less cost of goods s		b			•					
	C	Net income or (loss) Miscellaneous		ınvent	Business Code		0					
	11	•aADMINISTRATIVE R		NTS	561000	1	99,660		99,660			
		ADMINISTRATIVE R	ETHOOK JEME				,		, -			
	b	MISCELLANEOUS IN	COME		900099	,	6,136					6,136
		MISCELLAINEOUS IN	COME				-,					,
	c	:										
	_											
	d	All other revenue .										
		Total. Add lines 11a			▶	1						
	12	: Total revenue. See	Instructions				105,796					
				•	• • • •		2,572,937		985,129		Form 990	27,808

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	nizations must com	plete column (A)	-
Check if Schedule O contains a response or note to any	line in this Part IX .			\square
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	3,450	·		
2 Grants and other assistance to domestic individuals See Part IV, line 22	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	0			
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	127,551			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	12,329			
9 Other employee benefits	33,572			
10 Payroll taxes	9,839			
11 Fees for services (non-employees)				
a Management	0			
b Legal	7,373			
c Accounting	50,727			
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	6,682			
L2 Advertising and promotion	0			
L3 Office expenses	61,915			
.4 Information technology	11,232			
L 5 Royalties	0			
L 6 Occupancy	28,975			
L 7 Travel	36,089			
L8 Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
L9 Conferences, conventions, and meetings	66,942			
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	16,995			
23 Insurance	10,115			
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 O)				
a STRIKERS ASSISTANCE COSTS	975,902			
L ODGANIZING COCTO	450.001			
b ORGANIZING COSTS	156,631			
c .				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	1,616,319			
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)				

Page **11**

0

238.235

2.869.083

2,869,083

3,107,318

Form **990** (2018)

0 0

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31

32

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34

119.937

1.977.610

1,977,610

2,097,547

0 28

0

Form 990 (2018)

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34

Net Assets or Fund Balances

		Check it schedule o contains a response of not	ce to uny	international array i	(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			2,030,888	1	3,054,666
	2	Savings and temporary cash investments .	0	2	0		
	3	Pledges and grants receivable, net			0	3	0
	4	Accounts receivable, net		[0	4	0
5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L					0	5	0
ts	6	Loans and other receivables from other disquali section 4958(f)(1)), persons described in section contributing employers and sponsoring organiza- voluntary employees' beneficiary organizations Part II of Schedule L)(3)(B), and section 501(c)(9) ructions) Complete	0	6	0	
Se	,	Notes and loans receivable, net		-			
Assets	8	Inventories for sale or use		-	0	8	0
`	9	Prepaid expenses and deferred charges			9,570	9	9,494
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	62,602			
	b	Less accumulated depreciation	10b	40,146	12,397	10c	22,456
	11	Investments—publicly traded securities .			0	11	0
	12	Investments—other securities See Part IV, line	11 .	[0	12	0
	13	Investments—program-related See Part IV, line	e 11 .		0	13	0
	14	Intangible assets		[0	14	0
	15	Other assets See Part IV, line 11		[44,692	15	20,702
	16	Total assets.Add lines 1 through 15 (must equ	ıal lıne 34)	2,097,547	16	3,107,318
	17	Accounts payable and accrued expenses			0	17	0
	18	Grants payable			0	18	0
	19	Deferred revenue			0	19	0
	20	Tax-exempt bond liabilities			0	20	0

	basis Complete Part VI of Schedule D	10a		62,602			
b	Less accumulated depreciation	10 b		40,146	12,397	10 c	22,456
11	Investments—publicly traded securities .				0	11	0
12	Investments—other securities See Part IV, line	11 .		•	0	12	0
13	Investments—program-related See Part IV, line	11 .	•		0	13	0
14	Intangible assets				0	14	0
15	Other assets See Part IV, line 11				44,692	15	20,702
16	Total assets.Add lines 1 through 15 (must equ	al line	34)		2,097,547	16	3,107,318

jab		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D	119,937	25	238,235

Escrow or custodial account liability Complete Part IV of Schedule D

Total liabilities. Add lines 17 through 25 . .

Unrestricted net assets

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . .

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and

Form	990 (2018)				Page 12
Pai	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>			
	Total revenue (must equal Part VIII, column (A), line 12)	1		7	E72 027
1	· · · · · · · · · · · · · · · · · · ·				,572,937
2	Total expenses (must equal Part IX, column (A), line 25)	2		1	,616,319
3	Revenue less expenses Subtract line 2 from line 1	3			956,618
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1	,977,610
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			-65,145
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		2	,869,083
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				✓
				Yes	No
1	MODIFIED				
	Accounting method used to prepare the Form 990				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
				ı	
Ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basıs,			
	✓ Separate basis				
С	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?		2c		No
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Su	nale			

3b

Form **990** (2018)

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Additional Data

Software ID:

THE ORGANIZATION IS AN INTERMEDIATE BODY OF THE IABSORIW, AFL-CIO (INTERNATIONAL UNION), CONSISTING OF REGIONAL LOCAL UNION 846 AND REGIONAL LOCAL UNION 847. THE ORGANIZATION COORDINATES BETWEEN THE TWO LOCAL UNIONS AND BETWEEN THE INTERNATIONLUNION AND LOCAL UNIONS.

Software Version: **EIN:** 36-4633539

Name: REGIONAL DISTRICT COUNCIL

Form 990 (2018)

Form 990, Part III, Line 4a:

efile GRAPHIC print - DO NOT PROCESS As Filed Data SCHEDULE C Political Campaign ar

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2018

DLN: 93493114009200

2018

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-

EZ)

► 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

Open to Public Inspection

• S • S • S • S • S • S • S	Section 501(c) (other than section 5 Section 527 organizations Complet corganization answered "Yes" or Section 501(c)(3) organizations that Section 501(c)(3) organizations that	n Form 990, Part IV, Line 4, or Form 9 thave filed Form 5768 (election under s thave NOT filed Form 5768 (election un n Form 990, Part IV, Line 5 (Proxy Tax s), then	90-EZ, Part VI, IIr ection 501(h)) Coder section 501(h	ne 47 (Lobbying Activities implete Part II-A Do not co)) Complete Part II-B Do r	mplete Part II-B not complete Part II-A
Nar	ne of the organization	1		Employer iden	tification number
REG	IONAL DISTRICT COUNCIL			26 4622520	
Do:	t I-A Complete if the orga	nization is exempt under sectio	n F01/c) or ic	36-4633539	ration
1	•	ization's direct and indirect political can	. ,		
2	Political campaign activities)	itures (see instructions)		•	\$
3	Volunteer hours for political camp	· ·		r	Ψ
Par	·	nization is exempt under sectio	n 501(c)(3).		
1	<u> </u>	ex incurred by the organization under se		>	 \$
2	<i>'</i>	ex incurred by organization managers ur		>	\$ \$
3	·	tion 4955 tax, did it file Form 4720 for t			☐ Yes ☐ No
4a	Was a correction made?				
					☐ Yes ☐ No
b Par	If "Yes," describe in Part IV t I-C Complete if the organ	nization is exempt under sectio	n 501(c), exce	ept section 501(c)(3)	•
1	Enter the amount directly expend	ed by the filing organization for section	527 exempt funct	ion activities	\$
2	Enter the amount of the filing org function activities	anization's funds contributed to other o	rganizations for se	ection 527 exempt	\$
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and or	Form 1120-POL,	line 17b ►	\$
4	Did the filing organization file For	m 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly delivere se (PAC) If additional space is needed,	ount paid from the ed to a separate p	filing organization's funds olitical organization, such a	Also enter the amount
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1					
2					
3					
4					
5					
6					

ь	Total lobbying expenditures to influence a legislative	body (direct lobbying)	
c	Total lobbying expenditures (add lines 1a and 1b)		
d	Other exempt purpose expenditures		
e	Total exempt purpose expenditures (add lines 1c and	i 1d)	
f	Lobbying nontaxable amount Enter the amount fron columns		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	
	Not over \$500,000	20% of the amount on line 1e	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
	Over \$17,000,000	\$1,000,000	
		 •	
g	Grassroots nontaxable amount (enter 25% of line 1f		
h	Subtract line 1g from line 1a If zero or less, enter -(

i Subtract line 1f from line 1c If zero or less, enter -0j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting ☐ Yes ☐ No section 4911 tax for this year? 4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) Total beginning in) 2a

Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e))

Total lobbying expenditures Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

activity

Volunteers?

Media advertisements?

Return Reference

1

b

(b)

Amount

(a)

No

Yes

Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? 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)? b If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 Yes 1 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Yes Did the organization agree to carry over lobbying and political expenditures from the prior year? Nο Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B 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." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year C Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Explanation

instructions), and Part II-B, line 1 Also, complete this part for any additional information

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

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

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

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.

OMB No 1545-0047

DLN: 93493114009200

Open to Public

Schedule D (Form 990) 2018

Department of the Treasury

(Form 990)

	nme of the organization	101 1		rese information	En En	ployer ic	dentification	number
REG	GIONAL DISTRICT COUNCIL				36	-4633539		
Pa	art I Organizations Maintaining Donor Advis	sed Funds or O	ther	Similar Fund				
	Complete if the organization answered "Ye							
		(a) Dono	r adv	ised funds		(b)Fun	ds and other	accounts
1	Total number at end of year							
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year)							
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor advisor organization's property, subject to the organization's ex			ets held in donor	· advised	funds are] Yes □ No
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?] Yes □ No
Pa	rt II Conservation Easements. Complete if th	ie organization a	nswe	ered "Yes" on F	orm 99	0, Part I	V, line 7.	
1	Purpose(s) of conservation easements held by the organ	nization (check all t	hat a	pply)				
	\square Preservation of land for public use (e g , recreation	n or education)		Preservation of	an histo	rically im	portant land	area
	Protection of natural habitat			Preservation of	a certifi	ed histori	c structure	
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservat	ion co	ontribution in the	form of		vation	of the Year
а	Total number of conservation easements				2a			
b	Total acreage restricted by conservation easements				2b			
c	Number of conservation easements on a certified historic	c structure included	l ın (a	a)	2c			
d	Number of conservation easements included in (c) acqui structure listed in the National Register	red after 7/25/06,	and r	ot on a historic	2d			
3	Number of conservation easements modified, transferre tax year ▶	d, released, exting	uishe	d, or terminated	by the o	rganızatıc	n during the	
4	Number of states where property subject to conservatio	n easement is loca	ted 🕨					
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds		ng, II	nspection, handli	ng of vic	lations,	☐ Yes	□ No
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of vi	olatic	ns, and enforcing	g conser	vation eas		
7	Amount of expenses incurred in monitoring, inspecting, \$ \\$	handling of violatio	ns, a	nd enforcing con	servatio	n easeme	nts during th	e year
8	Does each conservation easement reported on line 2(d) and section $170(h)(4)(B)(II)$?	above satisfy the r	equir	ements of section	n 170(h)	(4)(B)(ı)	☐ Yes	□ No
9	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the org						
Pai	Organizations Maintaining Collections Complete if the organization answered "Ye	of Art, Historic			ther S	imilar A	ssets.	
1a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide in Part XIII the text of the footpote to its finance.	6 (ASC 958), not to public exhibition, e	repo ducat	ort in its revenue tion, or research	ın furthe			

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 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

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

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

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

Par	t III	Organizations Maintaining Col	lections of Art,	Histor	ical Tr	eası	ıres, or	Other	Similar A	ssets (contin	ued)	
3		the organization's acquisition, accession (check all that apply)	n, and other record	s, check	any of	the fo	llowing t	hat are a	sıgnıfıcant	use of it	s colle	ction	
а		Public exhibition		d		Loan	or excha	inge prog	ırams				
b		Scholarly research		е		Othe	r						
С		Preservation for future generations											
4	Provid Part >	de a description of the organization's col KIII	lections and explair	n how th	ey furth	er the	e organız	ation's ex	kempt purp	ose ın			
5		g the year, did the organization solicit o s to be sold to raise funds rather than to							ular	□ Y €	es	□ N	0
Pa	rt IV	Escrow and Custodial Arrange Complete if the organization answ X, line 21.		orm 990), Part	IV, lı	ne 9, or	reporte	ed an amo	unt on	Form	990,	Part
1a		e organization an agent, trustee, custodi ded on Form 990, Part X?	an or other interme	diary foi	r contril	oution	s or othe	r assets	not	☐ Y	es	□ N	о
Ь	If "Y∈	es," explain the arrangement in Part XIII	and complete the	following	j table		ſ			Amount			_
С	Begin	ning balance					[1c					_
d	Addıt	ions during the year					[1 d					
е	Dıstrı	butions during the year						1e					_
f	Endın	g balance					Į	1f					_
2a	Did th	ne organization include an amount on Fo	rm 990, Part X, line	e 21, for	escrow	or cu	ıstodıal a	ccount lia	ability?	. 🗆 Y	es	□ N	o
b		s," explain the arrangement in Part XIII								_			
Pa	rt V	Endowment Funds. Complete if											
		·	(a)Current year	(b)F	rıor yeaı	-	(c)Two ye	ars back	(d)Three ye	ears back	(e) Fo	ur year	s back_
1 a	Beginn	ing of year balance											
b	Contrib	outions											
C	Net inv	estment earnings, gains, and losses											
d	Grants	or scholarships											
е		expenditures for facilities ograms											
f	Admını	strative expenses											
g	End of	year balance											
2	Provid	de the estimated percentage of the curre	ent year end balanc	e (line 1	g, colur	mn (a)) held as	5					
а	Board	d designated or quasi-endowment >											
b	Perm	anent endowment 🟲											
c	•	orarily restricted endowment >											
_	•	percentages on lines 2a, 2b, and 2c shou	·										
3a		nere endowment funds not in the posses nization by	sion of the organiza	ation tha	it are he	eld an	id admini	stered fo	r the		Г	Yes	No
	_	nrelated organizations								3	a(i)		
	(ii) re	elated organizations								3.	a(ii)		
b	If "Ye	s" on $3a(II)$, are the related organization	is listed as required	on Sch	edule R	٠.				. [3b		
4	Descr	tibe in Part XIII the intended uses of the		owment	funds								
Pa	rt VI	Land, Buildings, and Equipmer		000) Dowt	T\ /	no 115	Coo For	OOO D	owt V III	na 10		
	Descri	Complete if the organization answ ption of property (a) Cost or oth (investme	ner basis (b) Co	st or other	•				lepreciation			ok valu	e
	امدا												
	Land	as											
	Buildin	· -											
		old improvements				E 155			1 570				2 502
		nent			-	5,155			1,573				3,582
	Other Add		gual Form 900 Par	t Y cale		17,447			38,573				18,874
TOTA	ıı. Ada	lines 1a through 1e (Column (d) must e	quai roiiii 990, Par	LA, COIU	иш (<i>В),</i>	ıırı e .	10(C)) .	•		<u> </u>			22,456

Part VII Investments—Other Securities. Complete if the or See Form 990, Part X, line 12.	rganızatıon a	nswered "Yes" or	n Form 990, Part IV, line 11b.
(a) Description of security or category (including name of security)	(b) Boo valu	k Cos	(c) Method of valuation st 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. (Column (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form	n 990, Part IV	, line 11c. See F	form 990, Part X, line 13.
(a) Description of investment	(b) Book va	lue Cos	(c) Method of valuation st or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answered 'Yes	s' on Form 990	, Part IV, line 11d	See Form 990, Part X, line 15
(a) Description			(b) Book value
(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 answ See Form 990, Part X, line 25.	vered 'Yes' on	Form 990, Part	IV, line 11e or 11f.
1. (a) Description of liability	(b) Book value	
(1) Federal income taxes DUE TO AFFILIATES		238,235	_
(2)			
(3)			1
(4)			1
(5)			
(6)			1
(7)			1
(8)			1
(9)			1
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	>	238,235	
2. Liability for uncertain tax positions In Part XIII, provide the text of the organization's liability for uncertain tax positions under FIN 48 (ASC 740)			_

Page 4

-99,552

1,616,319

Schedule D (Form 990) 2018

е	Add lines 2a through 2d	•	 •	•		Ze	
3	Subtract line 2e from line 1					3	2,473,385
4	Amounts included on Form 990, Part VIII, line 12, but not on line ${f 1}$						
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a					
b	Other (Describe in Part XIII)	4b			99,55	2	
c	Add lines 4a and 4b					4c	99,552
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)					5	2,572,937

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.

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 1,516,767 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities 2a 2b

2c 2d -99,552 2e 3

c d

Schedule D (Form 990) 2018

Part XI

3

4 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 4b b Add lines **4a** and **4b** 4c

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 1.616.319

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 Return Reference Explanation

See Additional Data Table

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software ID:

Software Version:

EIN: 36-4633539

Name: REGIONAL DISTRICT COUNCIL

Explanation

Supplemental Information

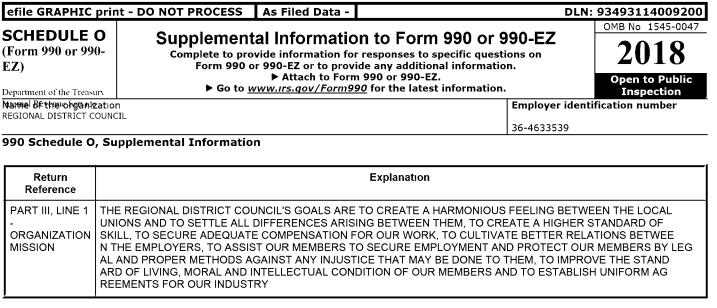
Return Reference

Recall Reference	Explanation
PART X, LINE 2 - FIN 48 FOOTNOTE - LIABILITY FOR UNCERTAIN TAX POSITIONS	Management annually evaluates tax positions taken to determine whether the District Counci I has taken an uncertain position that more likely than not would not be sustained upon ex amination by the Internal Revenue Service and any such uncertain tax position will be disc losed in the financial statements. Management has evaluated the tax positions taken by the District Council and concluded that as of June 30, 2019 there are no uncertain positions taken or expected to be taken that would require disclosure in the financial statements. The District Council is subject to routine audits by taxing jurisdictions, however, there a recurrently no audits for any tax periods in progress. In addition, there have been no tax related interest or penalties for periods presented in these financial statements. Should such penalties and interest be paid, the District Councils policy is to recognize them as part of general and administrative expenses on the statements of revenue, expenses and changes in net assets - modified cash basis.

pplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER EXPENSES INCLUDED ON RETURN BUT NOT BOOKS	\$99,552 ADMINISTRATIVE REIMBURSEMENTS NETTED ON FINANCIALS AGAINST EXPENSES

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER EXPENSES INCLUDED ON BOOKS BUT NOT RETURN	\$(99,552) ADMINISTRATIVE REIMBURSEMENTS NETTED ON FINANCIALS AGAINST EXPENSES

Sı



Return Reference	Explanation
LINE 2 - BUSINESS	BOARD MEMBERS/OFFICERS BERNARD A EVERS, DAVID GORNEWICZ (THROUGH DEPARTURE FROM BOARD), MI CHAEL REYLIN, AND DANIEL S PARKER (THROUGH DEPARTURE FROM BOARD), SERVE AS 3RD GENERAL VI CE PRESIDENT, ASSISTANT DIRECTOR OF ORGANIZING, GENERAL ORGANIZER, AND EXECUTIVE DIRECTOR OF DEPARTMENT OF REINFORCING OF THE INTERNATIONAL ASSOCIATION OF BRIDGE, STRUCTURAL, ORNAM ENTAL AND REINFORCING IRON WORKERS, RESPECTIVELY

Return Explanation
Reference

PART VI,
SECTION A,
LINE 6 MEMBERSHIP IN THIS COUNCIL SHALL INCLUDE THE FOLLOWING LOCAL UNIONS CHARTERED BY THE INTER
NATIONAL ASSOCIATION OF BRIDGE, STRUCTRUAL, ORNAMENTAL AND REINFORCING IRON WORKERS ("IABS
ORIW") MEMBERSHIP IN THIS COUNCIL SHALL BE COMPRISED OF DELEGATES OF SAID LOCAL UNIONS AN
MEMBERS OF
THE
OWITH THIS COUNCIL, REGIONAL LOCAL UNION NO 846 AND REGIONAL LOCAL UNION NO 847
ORGANIZATION

Return Reference	Explanation
PART VI, SECTION A, LINE 7A - ELECTION OF GOVERNING BODY MEMBERS	NOMINATION AND ELECTION OF OFFICERS SHALL BE HELD EVERY THREE YEARS AT THE REGULAR QUARTER LY MEETING OF THE REGIONAL DISTRICT COUNCIL IN THE MONTH OF OCTOBER THE NOMINATION AND EL ECTION SHALL BE HELD IN ACCORDANCE WITH THE ELECTION LAWS AS INCORPORATED IN THE INTERNATI ONAL CONSTITUITON OFFICERS TO THIS REGIONAL DISTRICT COUNCIL SHALL BE ELECTED FROM AMONG THE DELEGATES TO THE REGIONAL DISTRICT COUNCIL ANY DISTRICT REPRESENTATIVE, GENERAL ORGAN IZER OR GENERAL VICE PRESIDENT ASSIGNED TO SERVICE THE LOCAL UNIONS AFFILIATED WITH THIS R EGIONAL DISTRICT COUNCIL, BY VIRTUE OF HIS POSITION AND RESPONSIBILITIES, SHALL BE ELIGIBL E TO BE ELECTED TO ANY OFFICE OF THIS REGIONAL DISTRICT COUNCIL WITH ALL RIGHTS AND FULL V OTING PRIVILEGES DELEGATES SHALL BE ELECTED AT THE REGULAR ELECTION OF THEIR RESPECTIVE L OCAL UNIONS IN ACCORDANCE WITH THE ELECTION LAWS AS INCORPORATED IN THE INTERNATIONAL CONS TITUTION THEY SHALL SERVE FOR A TERM OF THREE YEARS IN THE EVENT OF RESIGNATION OR REMOV AL FROM OFFICE, THE PRESIDENT OF THE LOCAL UNION SHALL APPOINT A DELEGATE TO SERVE FOR THE UNEXPIRED TERM

990 Schedule O, Supplemental Information

Return
Reference

Explanation

PART VI,	REGIONAL DISTRICT COUNCIL HAS NO OTHER COMMITTEES THAT MAY ACT ON AUTHORITY OF THE GOVERNING
SECTION A,	BODY
LINE 8B -	
OTHER	
COMMITTEES	
WITH	

AUTHORITY

990 Schedule O, Supplemental Information Return Reference Explanation

PART VI,	THE FORM 990 IS REVIEWED BY THE PRESIDENT OF THE REGIONAL DISTRICT COUNCIL AND NOTIFIES TH
SECTION B,	E OUTSIDE ACCOUNTANTS THAT THE RETURN IS APPROVED FOR FILING
LINE 11B -	
REVIEW	
PROCESS	
OF FORM	
990	

Return Explanation
Reference

PART VI,
SECTION C,
LINE 19AVAILABILITY
OF
GOVERNING
DOCUMENTS AND FINANCIAL STATEMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC
STATEMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC STATEMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC STATEMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC STATEMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC STATEMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC STATEMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC STATEMENTS ARE NOT MADE AVAILABLE STATEMENTS ARE NOT MADE AVAILABLE STATEMENTS ARE NOT MADE AVA

Return Explanation

PART X,	DUE TO CHANGE IN ACCOUNTING PRINCIPLES, MANAGEMENT OF THE ORGANIZATION ADOPTED NEW ACCOUNT
LINES 27 -32	ING GUIDANCE IN ACCORDANCE WITH FASB ACCOUNTING STANDARDS 2016-14, PRESENTATION OF FINANCI
- NET	AL STATEMENTS OF NOT-FOR-PROFIT ENTITIES THE BOX FOR FOLLOWING SFAS 117 HAS BEEN CHECKED
ASSETS	AND NET ASSETS HAVE BEEN DENOTED ON LINES 27 - 29 AS APPLICABLE

Return

ntities

Reference	
LINE 1 -	The financial statements are prepared using the modified cash basis of accounting Revenue is recognized when received, rather than when earned, and expenses are recognized when paid, rather than when the obligation is incurred, except for the capitalization, amortization and depreciation of fixed assets, the recognition of assets and liabilities arising as a result of payroll processing, and the recognition of a liability for cash collected on behalf of related entities or an asset for expense reimbursements receivable from related e

Explanation