DLN: 93493100011180 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2019 , and ending 12-31-2019 C Name of organization D Employer identification number B Check if applicable INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LOCAL UNION NO 481 □ Address change 35-0289840 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 1828 N MERIDIAN STREET ☐ Amended return ☐ Application pending (317) 923-2596 City or town, state or province, country, and ZIP or foreign postal code INDIANAPOLIS, IN $\,$ 46202 $\,$ G Gross receipts \$ 8,548,336 Name and address of principal officer H(a) Is this a group return for JEFF WHEELER ☐Yes **☑**No subordinates? 1828 N MERIDIAN STREET H(b) Are all subordinates INDIANAPOLIS, IN 46202 ☐Yes ☐No ıncluded? 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 \triangleright Website: ► N/A L Year of formation 1906 **K** Form of organization \square Corporation \square Trust \square Association \square Other Summary 1 Briefly describe the organization's mission or most significant activities LABOR UNION Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 0 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 0 **6** Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 **b** Net unrelated business taxable income from Form 990-T, line 39 0 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . Ravenua 5,089,562 5,957,349 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 93,000 164,134 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 405,125 48,768 5,587,687 6,170,251 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 236,872 167,416 82,394 97,866 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 1,806,541 1,952,711 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 4,160,322 3,670,217 <u>6,28</u>6,129 5,888,210 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . -698,442 282,041 Assets or d Balances Beginning of Current Year End of Year 6,800,118 7,212,712 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 3,863 3,670 22 Net assets or fund balances Subtract line 21 from line 20 . 6,796,448 7,208,849 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 2020-04-09 Signature of officer Sign Here JEFF WHEELER FINANCIAL SECY-BUSINESS MANAGER Type or print name and title Print/Type preparer's name Preparer's signature Check | If P00841931 Paid self-employed Firm's name
LEGACY PROFESSIONALS LLP Firm's EIN ► 32-0043599 Preparer Use Only Firm's address ▶ 222 INDIANAPOLIS BLVD STE 103 Phone no (219) 836-1065 SCHERERVILLE, IN 46375 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2019)

Form	990 (2019)				Page 2						
Pa	statemen	t of Program Service Acc	complishments								
	Check if Sch	edule O contains a response or	note to any line in this Part III		🗆						
1	Briefly describe the	organization's mission									
LABC	R UNION										
2	Did the organization	n undertake any significant pro	gram services during the year which w	vere not listed on							
	the prior Form 990	or 990-EZ?			🗌 Yes 🗹 No						
	If "Yes," describe th	ese new services on Schedule	0								
3	Did the organization	Did the organization cease conducting, or make significant changes in how it conducts, any program									
	services?				🗌 Yes 🗹 No						
	If "Yes," describe th	ese changes on Schedule O									
4	Section $501(c)(3)$ a		plishments for each of its three larges required to report the amount of grar ervice 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	Other program serv	rices (Describe in Schedule O)									
	(Expenses \$	including	grants of \$	(Revenue \$)						
4e	Total program ser	rvice expenses >									

No

Nο

Nο

No

Nο

Nο

No

15

16

17

18

19

20a

20h

21

Yes

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Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Nο 1 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . Nο Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 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? If "Yes," complete Schedule C, Part III 🛸 . . Yes 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

6

to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete No 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? If "Yes," 8 Nο

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? If "Yes," complete Yes 11a b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Yes 11b 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 No 11c total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 😼

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported Yes 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? If "Yes," complete 12a Nο b Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Yes 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)(ii)? If "Yes," complete Schedule E 13 Nο 14a Nο

14a Did the organization maintain an office, employees, or agents outside of the United States? . . **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 14b

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

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

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

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

foreign organization? If "Yes," complete Schedule F, Parts II and IV

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

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

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Par	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2º If "Yes," complete Schedule I, Parts I and III	22	Yes	
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	Yes	
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	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? <i>If "Yes," complete Schedule L, Part I</i>	25b		
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L</i> ,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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	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? <i>If "Yes," complete Schedule N, Part II</i>	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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note.	38	Yes	

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	Statements Regarding Other IRS Filings and Tax Compliance (continued)							
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							
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes					
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No				
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b						
	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)? If "Yes," enter the name of the foreign country	4a		No				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	5a		No.				
Б Б	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No				
		5b						
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	V					
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes					
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes					
	Organizations that may receive deductible contributions under section 170(c).	_						
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No 				
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No				
	If "Yes," indicate the number of Forms 8282 filed during the year							
_	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f						
_	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?							
п	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 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						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter							
	Initiation fees and capital contributions included on Part VIII, line 12 10a							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b							
11	Section 501(c)(12) organizations. Enter							
-	Gross income from members or shareholders							
Б	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans							
	Enter the amount of reserves on hand							
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No				
	14b							
15	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?	15		No				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . If "Yes," complete Form 4720, Schedule O	16		No				
		_		_				

orm	990 (2019)			Page 6
Par	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	o" respo	onse to	lines
Se	ction A. Governing Body and Management			
	Enterthe court of the court of the court of the court of the transfer of the transfer of the court of the cou		Yes	No
14	Enter the number of voting members of the governing body at the end of the tax year 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 0			
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		No
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	
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	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b		No
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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
	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 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	Yes	
Ь	Other officers or key employees of the organization	15b	Yes	
	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
Ь	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?	4.5%		
Ç.	ction C. Disclosure	16b		<u> </u>
<u> </u>	List the states with which a copy of this Form 990 is required to be filed			
	IN			
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			
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ▶JEFF WHEELER 1828 N MERIDIAN STREET INDIANAPOLIS, IN 46202 (317) 923-2596			

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
- 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
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations

of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the See instructions for the order in which to list the persons above Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (A) (B) (C) (D) (E) (F) Name and title Position (do not check more Reportable Average Reportable Estimated hours per than one box, unless person compensation compensation amount of other is both an officer and a week (list from related from the compensation any hours director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Individual trustee or director employ Highest compensated organizations MISC) MISC) related Institutional below dotted organizations emplo: line) ě 9 Trustee 48 00 (1) STEVE MENSER Χ 103,348 0 55,567 FINL SECY-BUS MGR 1 25 48 00 (2) JEFF WHEELER Х 98.231 0 53.910 TREASURER/ASST BUS MGR 1 25 1 00 (3) CHRIS GRIDER Х 4.130 1,973 0 PRESIDENT 1 00 1 00 (4) ROGER BRUNK Х 831 0 367 VICE PRESIDENT 1 00 1 00 (5) BRIAN SECOR Х 1.870 0 594 RECORDING SECRETARY 1 00 1 00 (6) HENRY BURKS Χ 4,428 0 1,720 EXECUTIVE BOARD 1.00 1 00 (7) DOMINIC COLLINS Χ 5,311 2,154 0 EXECUTIVE BOARD 1 00 1 00 (8) GEORGE SAM HUNTER 2,681 0 699 EXECUTIVE BOARD 1 00 1 00 (9) CHAD ISON 3,632 1,368 EXECUTIVE BOARD 1 00 1 00 (10) GARY NEWCOM Χ 1,710 0 42 EXECUTIVE BOARD 1 00 1 00 (11) MIKE HOPKINS Χ 0 EXAM BOARD 1 00 1 00 (12) EVAN TAFFLINGER Х 390 0 220 EXAM BOARD 1 00 1 00 (13) JEFF MEANS Х 491 0 201 EXAM BOARD 1 00

Name and the	hours per week (list any hours	than one box, unless person is both an officer and a director/trustee)						compensation from the organization	compensation from related organizations	amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)	organization and related organizations

1b Sub-Total												
	d Total (add lines 1b and 1c)										118,815	
2	2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 1											
												N

1b 9	Sub-Total			•			▶							
с 7	Total from continuation sheets to Pa	art VII, Section	Α.				▶[
d 7	Total (add lines 1b and 1c)	<u> </u>		<u></u>			>		227,05	3		0		118,815
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 1										_				
													Yes	No
3	Did the organization list any former of line 1a? <i>If "Yes," complete Schedule 3</i>											2		No
	, ,													NO
4	For any individual listed on line 1a, is										the			

c T	otal from continuation sheets to Part VII, Section A									
d 1	Total (add lines 1b and 1c)	0		118,815						
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 1									
			Yes	No						
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on									
	line 1a? If "Yes," complete Schedule J for such individual	3		No						
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such									
	ındıvıdual	4	Yes							
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for									
	services rendered to the organization? If "Yes," complete Schedule J for such person	5		No						

2	of reportable compensation from the organization > 1			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual			
	munidal	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No
			•	

3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No				
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes					
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No				
Se	Section B. Independent Contractors							

4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No
Se	ction B. Independent Contractors			

	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No
Se				

	mundan	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No
S	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of confirm the organization. Report compensation for the calendar year ending with or within the organization is tax year.	mpensa	ation	

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

(B)

Description of services

(C) Compensation

Form **990** (2019)

(A)

Name and business address

compensation from the organization ▶ 0

Form 9 Part		(2019) Statement	of E	Povonuo						Page 9
Рап	VIII				a respo	onse or note to any	line in this Part VIII			🗆
							(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
10	1	a Federated campa	igns		1a		l	revenue		512 - 514
tributions, Gifts, Grants Other Similar Amounts		b Membership dues	s .		1 b					
<u>الله و</u>		c Fundraising even	its .	•	1 c					
ifts, ar A		d Related organiza	tions	5	1d					
s, e		e Government grants			1e					
io ii r Si		f All other contribution and similar amounts	ns, g s not	ıfts, grants, ıncluded	1f					
ibut		above g Noncash contributio	ns in	cluded in						
Contributions, and Other Sim		lines 1a - 1f \$			1 g					
ರ ಕ		h Total. Add lines	1a-1	f	•	>				
	_	MEMBERSHIP DUES/	A C M NI	ITC		Business Code	5,558,156	5,558,156		
<u> </u>	22	MEMBERSHIP DUES/A	ASMIN	115		900099		·		
Venu	Ь	REIMBURSEMENTS F	ROM	QC		900099	388,134	388,134		
3	c	ON BEHALF OF OTHE	RS			900099	11,059	11,059		
Program Service Revenue						900099				
<u>\$</u>	d	ı								
gran	e									
Ą	•									
		All other program								
		Total. Add lines 2 Investment income				5,957,349		Τ		
	9	sımılar amounts) .				•	128,97	7		128,977
		Income from invest Royalties		t of tax-exe		ond proceeds	-			
	,	Royaldes	П	(ı) Re		(II) Personal	1			
	6=	Gross rents	6a				7			
		Less rental	Ua				-			
		expenses	6b				_			
	С	Rental income or (loss)	6с							
	•	d Net rental income	or (]			
	7-	Gross amount		(ı) Secui	rities	(II) Other	4			
	76	from sales of assets other	7a	2,	413,242	2				
		than inventory					4			
	b	Less cost or other basis and sales expenses	7b	2,	378,085	5				
		·					1			
		Gain or (loss) d Net gain or (loss)	7c		35,157			7		35,157
•		Gross income from fu				· · · >	1			<u>'</u>
Other Revenue		(not including \$ contributions reported								
eve		See Part IV, line 18	•		8a					
er P		b Less direct expen c Net income or (los			8b	ents .	_			
Oth	•	a recember of the	,5, 11	om ranarai.	Sing ev	ents •	1			
	9a	Gross income from See Part IV, line 19			9a					
	ŀ	b Less direct expen	ses		9b		-			
	(c Net income or (los	s) fr	om gamıng	activit	les •				
	10	aGross sales of inve	entor	rv. less						
		returns and allowa			10a					
		Less cost of good			10b					
	_	Net income or (los Miscellaneo			invent	Business Code	T			
	11	Lamiscellaneous				90009	9 48,768	8		48,768
	ŀ	b								
	(C								
		d All other revenue								
		e Total. Add lines 1				▶				
	12	2 Total revenue. S	ee ir	nstructions			48,768			
							6,170,25	5,957,349)[0 212,902 Form 990 (2019)

Section Statement of Functional Expenses Section Static (1) and Stock(4) organizations must complete all columns. All other organizations must complete all columns. All other organizations must complete solumn (A) Check of Schedule Coords as a response or note to any line in this Part IX. Do not include amounter reported on lines 6b, 10%, 30%, 30%, 30%, 30%, 30%, 30%, 30%, 3	Statement of Functional Functional				Page IU
Check of Schedule Corollars a response or note to any line in this Part IX. Do not include amounts reported on lines 6b, 17b, 8b, 9b, and 10b of Part VIII. Corol segments (C) Do not include amounts reported on lines 6b, 17b, 8b, 9b, and 10b of Part VIII. Corol segments (C) Programs service and provided amounts of the corollary of corollary of the corollary of the corollary of the corollary of corollary of the corollary of the corollary of corollary of coro		complete all columns	All other organizati	ons must complete col	umn (A)
Do not include amounts reported on lines 6b, 76, 8b, 9b, 9c, 10 for Part VIII. 1 Grants and other assistance to domestic organizations and comestic organizations and concept organizations (for exposers). 2 Grants and other assistance to domestic individuals See Part VI. Ine 15 and 16. 3 Grants and other assistance to foreign organizations, foreign organizations, foreign organizations, foreign organizations, foreign organizations or concept and to a for members. 5 Compensation of current officers, directors, trustees, and every employees. 6 Compensation not included above, to disqualified persons (as defined under section 4950(c)(3)(8). 7 Other salanse and wayes. 8 Penson plan accruals and committee organizations and committee organization as a section 401 (x) and 402(b) employer committee organization and committee or			_		🗆
domestic governments. See Part IV, Ine 21. Grants and other assistance to domestic individuals. See Part IV, Ine 22. Grants and other assistance to foreign programations, foreign governments, and foreign individuals. See Part IV, Ine 15 and 15. Grants and other assistance to foreign programations, foreign governments, and foreign individuals. See Part IV, Ine 15 and 15. 4 Benefits paid to or for members. 5 Compensation of current officers, directors, trustees, and key employees. 6 Compensation of current officers, directors, trustees, and key employees. 7 Other salaries and wages. 9 Particular saction 4988(f)(1)) and persons described in section 498(6)(3) (8). 9 Penson plan accruals and contributions (include section 401 (8) and 402(b) employer contributions). 10 Payroll taxes. 9 Other employees. 10 Payroll taxes. 9 09.742. 11 Pees for services (non-employees). 1 Almantagement. 1 Legal.	Do not include amounts reported on lines 6b,	(A)	(B) Program service	Management and	Fundraising
Part IV, Ine 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, Ines 15 4 Benefits paid to or for members. 5 Compensation of current officers, directors, trustees, and sey employees included selvove, to disqualified persons (as section 493(0)(2)(8)) 6 Compensation not funded selvove, to disqualified persons (as section 493(0)(2)(8)) 7 Other salanes and wages 8 Parison plan accruals and contributions (include section 401 (kg) and 402(b) employer contributions) 9 Other employee benefits 9 Other employee benefits 10 Payrol taxes 10 Payrol taxes 10 Payrol taxes 11 Fees for services (non-employees) 12 Am Management 13 Legal 14 Caccuting 15 Contribution (If I in 11 a management fees 16 Other (If I in 11 a management fees 17 Investment management fees 19 Other (If I in 11 a management fees 10 Other (If I in 11 a management fees 10 Other (If I in 11 a management fees 11 Advertising and promotion 12 Advertising and promotion 15 Royalte 16 Occupancy 17 Travel 18 Payments to fitting a fitting and promotion 19 Payrol taxes 10 Conference, conventions, and meetings 11 Tituse 10 Conference, conventions, and meetings 11 Tituse 12 Payments to fitting and amountization 13 Insurance 14 Payments to fitting and amountization 15 Payments of fitting and amountization 16 Other expenses In Insurance expenses for any federal, state, or inocili public officials 17 Tituse 18 Payments to affiliates 19 Conference, conventions, and meetings 10 Interest 10 Other expenses In Insurance expenses for any federal, state, or inocili public officials 17 Tituse 18 Payments to affiliates 19 Conference, conventions, and meetings 10 Tituse Conference, conventions, and meetings 10 Conference, conventions, and meetings 10 Conference of the 25, Column (A) amount, list line 24e expenses on Schedule O 19 Payments to affiliates 19 Payments of filiates 19 Payments of filiates 19 Payments of filiates 19 Payments of filiates 19 Payments of fil		144,690			
governments, and foreign individuals. See Part IV, lines 15 and 15 or for members 97,866 9 4 Benefite paid to or for members 97,866 9 5 Compensation of current officers, directors, trustees, and key employees 9 6 Compensation of current officers, directors, trustees, and key employees 9 6 Compensation of current officers, directors, trustees, and key employees 9 7 Other salaries and wages 9 9 13,033 9 9		22,726			
5 Compensation of current officers, directors, trustees, and key imployees 6 Compensation red included above, to disqualified persons (as section 4958(c)(13)(8) 7 Other salarnes and wages 8 Pension plan accruais and contributions (include section 401 (x) and 403(b) employer contributions) 9 Other employee benefits 10 Payrol taxes 8 Pension plan accruais and contributions (include section 401 (x) and 403(b) employer contributions) 10 Payrol taxes 8 Pension plan accruais and contributions (include section 401 (x) and 403(b) employer contributions) 10 Payrol taxes 11 Pess for services (non-employees) 12 Advarting and fundratising services. See Part IV, line 17 13 Investment management fees 13 Other expenses 10 Other (If line 11g amount exceeds 10% of line 25, column (x) amount, bit line 11g sepsions on Schedule 0) 12 Advarting and promotion 13 Office expenses 14 Information technology 15 Royalttes 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 17 Payrol taxes 18 Payrol taxes 19 Payrol taxes 19 Payrol taxes 10 Payrol	governments, and foreign individuals See Part IV, lines 15				
key employees 6 Compensation not included above, to disqualified persons (at defined under section 4958(f)(1)) and persons described in section 4958(f)(1)) and 493(b) employer contributions (include section 401 (f) and 493(b) employer contributions) 9 Cher employee benefits 10 Payroll taxes 11 Fees for services (non-employees) 12 Management 13 Management 14 Legal 15 Caccounting 16 Lobbyring 17 Investment management fees 18 Japan 18 Other (filt in 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 19 Advertusing and promotion 19 Advertusing and promotion 19 Royaltes 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 11 Investmence 20 Interest 11 Payments to affiliates 12 Payments to affiliates 12 Payments to affiliates 13 Distribution of travel or entertainment expenses for any federal, state, or local public officials 19 Payments to shedule O) 19 Payments to shedule O) 10 Insurance 10 Insurance 11 Payments to shedule O) 11 Payments to shedule O) 12 Payments to shedule O) 13 Payments of Shedule O) 14 Payments of Shedule O) 15 Payments of Shedule O) 16 Payments of Shedule O) 17 Payments of Shedule O) 18 Payments to shedule O) 19 Payments of Shedule O) 10 Payments of Shedule O) 11 Payments of Shedule O) 12 Payments of Shedule O) 15 Payments of Shedule O) 16 Payments of Shedule O) 17 Payments of Shedule O) 18 Payments of Shedule O) 19 Payments of She	4 Benefits paid to or for members	97,866			
defined under section 4958(f)(1) and persons described in section 4958(f)(3)(8) 9 13,633 9 13,635		344,344			
### Sension plan accuracy and contributions (include section 401 (k) and 403(b) employer contributions) ### Posterior Contributions (include section 401 (k) and 403(b) employer contributions) ### Posterior Contributions (include section 401 (k) and 403(b) employer contributions) ### Posterior Contributions (include section 401 (k) and any accuracy and any accuracy and any accuracy accuracy and any accuracy accu	defined under section 4958(f)(1)) and persons described in				
(x) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) a Management b Legal 26,583 c Accounting 45,500 d Lobbying 45,500 e Professional fundraising services See Part IV, line 17 f Investment management fees 9 g Other (Fill in 11g amount secded 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion 573,881 13 Office expenses 28,977 14 Information technology 43,358 15 Royaltes 9 16 Occupancy 253,574 17 Travel 44,036 19 Payments of travel or entertainment expenses for any federal, state, or local public officials 79 10 Conferences, conventions, and meetings 171,821 10 Conferences, conventions, and meetings 171,821 10 Interest 1,205,707 11 Insurance 28,878 12 Depreciation, depletion, and amortization 29,878 12 Depreciation, depletion, and amortization 29,878 13 Insurance 1,205,001 14 Payments to affiliates 1,205,707 15 Insurance 2,201 Imm (A) amount, list line 24e expenses on Schedule O) 510,691 15 MEMBERS RECREATION 316,090 16 MEMBERS RECREATION 316,090 16 All other expenses 1 Imm 24e 1f line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 510,691 16 MEMBERS RECREATION 316,090 17 ARANS TO LEGISLATIVE FD 21,900 18 All other expenses 5 5 Total functional expenses, Add lines 1 through 24e 5 5,888,210 25 Total functional expenses, Add lines 1 through 24e 5 5,888,210 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campagin and fundraising solicitation	F	913,633			
10 Payroll taxes		354,730			
11 Fees for services (non-employees) a Management	9 Other employee benefits	250,262			
a Management	10 Payroll taxes	89,742			
b Legal	11 Fees for services (non-employees)				
C Accounting 45,500	a Management				
d Lobbyng e Professional fundraising services See Part IV, line 17 f Investment management fees 13,458 g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion 573,881	b Legal	26,583			
e Professional fundraising services See Part IV, line 17 f Investment management fees	c Accounting	45,500			
Filter Investment management fees 13,458	d Lobbying				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion	e Professional fundraising services See Part IV, line 17				
(A) amount, list line 11g expenses on Schedule O) 12. Advertising and promotion	f Investment management fees	13,458			
13 Office expenses 268,927					
14 Information technology	12 Advertising and promotion	573,881			
15 Royalties	13 Office expenses	268,927			
16 Occupancy 255,674 17 Travel 46,036 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 171,821 19 Conferences, conventions, and meetings 171,821 20 Interest 1,205,707 21 Payments to affiliates 1,205,707 22 Depreciation, depletion, and amortization 92,822 23 Insurance 28,978 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) 510,691 a PROMOTIONAL EXPS TARGET 510,691 b MEMBERS RECREATION 316,090 c UNION SPONSORED ACTIVIT 48,791 d TRANS TO LEGISLATIVE FD 21,900 e All other expenses 21,900 25 Total functional expenses. Add lines 1 through 24e 5,888,210 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation 5,888,210	14 Information technology	43,358			
17 Travel	15 Royalties				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . 19 Conferences, conventions, and meetings	16 Occupancy	255,674			
federal, state, or local public officials 19 Conferences, conventions, and meetings 171,821 20 Interest 1,205,707 21 Payments to affiliates 1,205,707 22 Depreciation, depletion, and amortization 92,822 23 Insurance 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 PROMOTIONAL EXPS TARGET 510,691 b MEMBERS RECREATION 316,090 c UNION SPONSORED ACTIVIT 48,791 d TRANS TO LEGISLATIVE FD 21,900 e All other expenses Total functional expenses. Add lines 1 through 24e 5,888,210 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	17 Travel	46,036			
20 Interest					
21 Payments to affiliates	19 Conferences, conventions, and meetings	171,821			
22 Depreciation, depletion, and amortization	20 Interest				
23 Insurance	21 Payments to affiliates	1,205,707			
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 PROMOTIONAL EXPS TARGET 510,691 b MEMBERS RECREATION c UNION SPONSORED ACTIVIT d TRANS TO LEGISLATIVE FD e All other expenses 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	22 Depreciation, depletion, and amortization	92,822			
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 PROMOTIONAL EXPS TARGET 510,691 b MEMBERS RECREATION c UNION SPONSORED ACTIVIT d TRANS TO LEGISLATIVE FD e All other expenses 7 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	23 Insurance	28,978			
a PROMOTIONAL EXPS TARGET b MEMBERS RECREATION c UNION SPONSORED ACTIVIT d TRANS TO LEGISLATIVE FD e All other expenses Total functional expenses. Add lines 1 through 24e 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e				
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d TRANS TO LEGISLATIVE FD e All other expenses Total functional expenses. Add lines 1 through 24e 5,888,210 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	b MEMBERS RECREATION	316,090			
e All other expenses Total functional expenses. Add lines 1 through 24e 5,888,210 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	c UNION SPONSORED ACTIVIT	48,791			
Total functional expenses. Add lines 1 through 24e 5,888,210 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	d TRANS TO LEGISLATIVE FD	21,900			
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	e All other expenses				
reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	25 Total functional expenses. Add lines 1 through 24e	5,888,210			
Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)	reported in column (B) joint costs from a combined				
	<u> </u>				

Form 990 (2019)

1

2

32

33

(B)

End of year

Page **11**

332,940

404,635

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

Cash-non-interest-bearing	472,674	1	
Savings and temporary cash investments	382,813	2	
Pledges and grants receivable, net		κ	
A secondary reserve letter uset		_	

Beginning of year

6,796,448

6,800,118

32

33

7,208,849

7.212.712

Form 990 (2019)

3 Accounts receivable, net Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled 5 entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under

section 4958(f)(1), and persons described in section 4958(c)(3)(B). 6 7 Notes and loans receivable, net . . . Assets 8 Inventories for sale or use . Prepaid expenses and deferred charges . 9 10a Land, buildings, and equipment cost or other 10a 646,476 basis Complete Part VI of Schedule D 10b 461,111 178,408 10c b Less accumulated depreciation

185,365 11 3,996,678 11 4,443,546 Investments—publicly traded securities . 425.651 437.903 12 Investments—other securities See Part IV, line 11 . 12 13 13 Investments—program-related See Part IV, line 11 14 14 Intangible assets . 1,343,894 15 1,408,323 15 Other assets See Part IV, line 11 . . . 6,800,118 7,212,712 16 Total assets. Add lines 1 through 15 (must equal line 34) . 16 17 Accounts payable and accrued expenses 17 18 18 Grants payable . 19 19 Deferred revenue . . 20 Tax-exempt bond liabilities . 20 21 21

Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties 3.670 25 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

Liabilities 3.670 26 Total liabilities. Add lines 17 through 25 . . 26

3.863 3.863 Organizations that follow FASB ASC 958, check here ▶ complete lines 27, 28, 32, and 33. 27 6.796,448 27 7,208,849 Net assets without donor restrictions

28 28 Net assets with donor restrictions .

Fund Balances Organizations that do not follow FASB ASC 958, check here ▶

complete lines 29 through 33.

ō 29 29 Capital stock or trust principal, or current funds

Assets 30 30 Paid-in or capital surplus, or land, building or equipment fund 31 31

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

Audit Act and OMB Circular A-133? 3a

3b

Form 990 (2019)

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

Form 990, Part III, Line 4a:

Form 990 (2019)

Software ID: Software Version:

THE OBJECTIVE OF THE ORGANIZATION SHALL BE TO PROMOTE BY ALL PROPER MEANS THE MATERIAL AND INTELLECTUAL WELFARE OF ITS MEMBERS

EIN: 35-0289840

WORKERS LOCAL UNION NO 481

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL

Political Campaign and Lobbying Activities

OMB No 1545-0047

DLN: 93493100011180

Employer identification number

☐ Yes

contributions received

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

EZ)

1

2

SCHEDULE C (Form 990 or 990-

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 • Section 501(c)(4), (5), or (6) organizations Complete Part III

Part I-A	Complete if the organization is exempt under section 501(c) or is a section	n 527 organization.
WORKERS LO	OCAL UNION NO 481	35-0289840
	NAL BROTHERHOOD OF ELECTRICAL	

				_	
1	Provide a description of the organization "political campaign activities")	's direct and indirect politica	ıl campaıgn activities in Part	IV (see instructions for definition	of
	political campaign activities /				

\$ _____ Political campaign activity expenditures (see instructions)

Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3).

- Enter the amount of any excise tax incurred by the organization under section 4955
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3
 - If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes
 - Was a correction made?
- b If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).
- Enter the amount directly expended by the filing organization for section 527 exempt function activities 1
 - Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing
- organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated
- fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political

funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-1828 N MERIDIAN STREET 27-3917449 21.900 ÌBÉW 481 LEGISLATIVE CAMPAIGN INDIANAPOLIS, IN 46202 ACCOUNT 5

filing organization's

(a) (b) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity Yes | No Amount During the year, did the filing organization attempt to influence foreign, national, state or local legislation, 1 including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? d 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)? 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 1 1 Were substantially all (90% or more) dues received nondeductible by members? Yes 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Yes 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? No 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." 1 Dues, assessments and similar amounts from members 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b b Carryover from last year 2c c Total 3 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 political expenditure next year? 4

Taxable amount of lobbying and political expenditures (see instructions) Part IV

5

PART I-A, LINE 1

Supplemental Information

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

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

Return Reference

AND LOCAL POLITICAL CANDIDATES. POLITICAL ORGANIZATIONS AND CAUSES WHICH SHALL BE IN THE UNION'S BEST INTEREST Schedule C (Form 990 or 990EZ) 2019

Explanation THE LOCAL HAS ESTABLISHED A LEGISLATIVE FUND TO PROVIDE CONTRIBUTIONS TO STATE, COUNTY

5

SCHEDULE D

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

DLN: 93493100011180

OMB No 1545-0047

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.

(Form 990)

•		Attach to Form 990.				n to Public
	al Revenue Service	1990 for instructions and	the latest infor			spection
	me of the organization ERNATIONAL BROTHERHOOD OF ELECTRICAL			Employer i	dentificatior	number
WO	RKERS LOCAL UNION NO 481			35-0289840		
Pa	Organizations Maintaining Donor Advis			r Accounts	•	
	Complete if the organization answered "Ye	s" on Form 990, Part IV, (a) Donor advised		(b) Fur	nds and other	accounts
1	Total number at end of year	(a) Donor advised	Turius	(D) Tu	ids and other	accounts
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5						
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?				or	
Pa	rt II Conservation Easements. Complete if the organization answered "Ye	s" on Form 990, Part IV,	line 7.			
1	Purpose(s) of conservation easements held by the organ	nization (check all that apply				
	\square Preservation of land for public use (e g , recreation	n or education) 🔲 Pr	eservation of an	historically im	portant land	area
	Protection of natural habitat	☐ Pr	eservation of a c	ertified histori	c structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a	qualified conservation contri	bution in the fori	m of a conser	vation	
	easement on the last day of the tax year	,			at the End	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 in (a)		2c		
d	Number of conservation easements included in (c) acquistructure listed in the National Register		L	2d		
3	Number of conservation easements modified, transferre tax year ▶	d, released, extinguished, oi	r terminated by t	he organization	on during the	
4	Number of states where property subject to conservatio	n easement is located 🕨				
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds		ection, handling o	of violations,	☐ Yes	□ No
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations,	and enforcing co	nservation ea		
0	<u> </u>					
7	Amount of expenses incurred in monitoring, inspecting, \$	handling of violations, and e	enforcing conserv	ation easeme	nts during the	e year
8	Does each conservation easement reported on line $2(d)$ and section $170(h)(4)(B)(ii)$?	above satisfy the requireme	ents of section 17	'0(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 organization	venue and exper 's financial state	se statement ments that de	, and	
Par	Organizations Maintaining Collections Complete if the organization answered "Ye	of Art, Historical Treas	sures, or Othe line 8.	er Similar 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 footnote to its finan	public exhibition, education,	or research in fu			
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for publical following amounts relating to these items					
((i) Revenue included on Form 990, Part VIII, line 1			▶ \$		
(1	ii)Assets included in Form 990, Part X			▶ \$		
2	If the organization received or held works of art, historic following amounts required to be reported under SFAS			ncıal gaın, pro		
а	Revenue included on Form 990, Part VIII, line 1			▶ \$		
b	Assets included in Form 990 Part X			-		

Cat No 52283D

Schedule D (Form 990) 2019

Sche	dule D (Form 990) 2019									Page 2
Par	t IIII Organizations Maintaining Co	lections o	f Art, Histo	rical Tr	easur	es, or Other	Similar As	sets (conti	nued)	
3	Using the organization's acquisition, accession items (check all that apply)	n, and other	records, check	any of t	he follo	owing that are a	sıgnıfıcant u	se of its coll	ection	
а	Public exhibition		d		Loan o	r exchange prog	ırams			
b	Scholarly research		е		Other					
c	Preservation for future generations									
4	Provide a description of the organization's co Part XIII	llections and	explain how th	ney furth	er the	organization's ex	empt purpos	se in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than to						ılar	☐ Yes	□ N-	o
Pa	Escrow and Custodial Arrange Complete if the organization answ X, line 21.		' on Form 99	0, Part	IV, lın	e 9, or reporte	d an amou	nt on Form	າ 990,	Part
1a	Is the organization an agent, trustee, custodi included on Form 990, Part X?	an or other	ntermediary fo	r contrib	utions	or other assets	not	☐ Yes	□ N	о
ь	If "Yes," explain the arrangement in Part XII:	and comple	te the followin	a table			Δı	nount		_
c	Beginning balance	and comple	ite the followin	g table		1c				_
d	Additions during the year					1d				_
е	Distributions during the year					1e				_
f	Ending balance					1f				_
	•	000 B						п.,		_
2a	Did the organization include an amount on Fo						•	_	⊔ N	0
	If "Yes," explain the arrangement in Part XIII	Check here	if the explana	tion has	been p	rovided in Part)	KIII	Ш		
Pa	rt V Endowment Funds. Complete if the organization answ	varad "Vac	on Form 00	Λ Part	T\/ lun	0.10				
	Complete if the organization ansv	(a) Currer		Prior year		:) Two years back	(d) Three yea	rs back (e)	Four year	rs back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance									
2 a	Provide the estimated percentage of the curr Board designated or quasi-endowment	ent year end	balance (line	1g, colur	nn (a))	held as		-		
b	Permanent endowment ▶									
С	Temporarily restricted endowment ▶									
	The percentages on lines 2a, 2b, and 2c shou	ıld equal 100)%							
3 a	Are there endowment funds not in the posses organization by	ssion of the o	organization th	at are he	ld and	administered fo	r the		Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)	\sqcup	
	If "Yes" on 3a(II), are the related organization		•		٠			3b		
4	Describe in Part XIII the intended uses of the		n's endowment	runas						
Рa	t VI Land, Buildings, and Equipme Complete if the organization answ		' on Form 99	0 Part	TV lin	e 11a See For	m 990 Par	t X line 1	Λ	
	Description of property (a) Cost or ot (investment)	her basıs	(b) Cost or other			(c) Accumulated of			ook value	e
1a	Land									
	Buildings									
	Leasehold improvements									
	Equipment			38	7,175		342,980			44,195

259,301

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) .

141,170

185,365

118,131

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" on Fe	orm 990 Part IV II-	ne 11h	Saa Form 000 I	Part V line 12
	(a) Description of security or category (including name of security)	(b) Book value	uc 110	(c) Metho	d of valuation -year market value
	ll derivatives				
(3) Other _	held equity interests				
(A) AFL-CIO (B)	HOUSING INVESTMENT TRUST	437,903			С
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					_
	The second form 2000 Book V and 400 loss 420	427.003			
Part VIII	In (b) must equal Form 990, Part X, col (B) line 12) Investments—Program Related.	· · ·			
	Complete if the organization answered 'Yes' on Fo	orm 990, Part IV, lır	ne 11c	See Form 990, (b) Book value	Part X, line 13. (c) Method of valuation
	(a) Beschption of investment			(B) Book Value	Cost or end-of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col (B) line 13)				
Part IX	Other Assets.		<u> </u>		
	Complete if the organization answered 'Yes' on Fo (a) Description	orm 990, Part IV, lin	e 11d.	See Form 990, Par	t X, line 15 (b) Book value
(1)INVESTN (2)	MENT IN LOCAL UNION NO 481 IBEW BUILDING CORP				1,408,323
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Part X	omn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities.			<u> ▶</u>	1,408,323
1.	Complete if the organization answered 'Yes' on Fo		e 11e	or 11f.See Form	990, Part X, line 25. (b) Book value
	income taxes				(5) 255 (15)
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col (B) line 25)			•	3,863
	or uncertain tax positions In Part XIII, provide the text of 's liability for uncertain tax positions under FIN 48 (ASC 7-				_
	, , , , , , , , , , , , , , , , , , , ,	,	. • •		

Schedule D (Form 990) 2019

Page 4

1	Total revenue, gains, and other s	upport per audited financial statements			1	
2	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on i	nvestments	2a			
b	Donated services and use of facili	ities	2b]	
С	Recoveries of prior year grants		2c]	
d	Other (Describe in Part XIII) .		2d		1	
е	Add lines 2a through 2d				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1				
а	Investment expenses not included	d on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII) .		4b			
c	Add lines 4a and 4b				4c	
5	Total revenue Add lines 3 and 40	c. (This must equal Form 990, Part I, line 12)			5	
Par		penses per Audited Financial Statem zation answered 'Yes' on Form 990, Part			Returi	n.
1	·	dited financial statements			1	
2	Amounts included on line 1 but no	ot on Form 990, Part IX, line 25				
а	Donated services and use of facili	ities	2a			
b	Prior year adjustments		2b		1	
С	Other losses		2c			
d	Other (Describe in Part XIII) $\ .$		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	
4	Amounts included on Form 990, F	Part IX, line 25, but not on line 1:				
а	Investment expenses not included	d on Form 990, Part VIII, line 7b	4a]	
b	Other (Describe in Part XIII) .		4b]	
C	Add lines 4a and 4b				4c	
5		4c. (This must equal Form 990, Part I, line 18) .		5	
	t XIII Supplemental Info					
		art II, lines 3, 5, and 9, Part III, lines 1a and ϵ s 2d and 4b Also complete this part to provide			V, line	4, Part X, line 2, Part
	Return Reference		Exp	lanation		
See /	Additional Data Table					
						·

Page 5		chedule D (Form 990) 2019	
	ormation (continued)	Part XIII Supplemental Info	Part XIII
	Explanation	Return Reference	Re
	<u> </u>		

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

EIN: 35-0289840

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL

WORKERS LOCAL UNION NO 481

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE LOCAL IS REQUIRED TO EVALUATE ITS TAX POSITIONS AND DISCLOSE THE AMOUNT OF TAX LIABILI TIES IF THE LOCAL HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE S USTAINED UPON EXAMINATION BY TAX AUTHORITIES THE LOCAL IS SUBJECT TO ROUTINE AUDITS BY TA XING JURISDICTIONS, HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS

DLN: 93493100011180 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number INTERNATIONAL BROTHERHOOD OF ELECTRICAL 35-0289840 WORKERS LOCAL UNION NO 481 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete If the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2019

Page 2

Schedule I (Form 990) 2019

(6)

(7)

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Schedule I (Form 990) 2019

Part III

(3)

(4)

(5)

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Part IV

Explanation

Return Reference THE EXECUTIVE BOARD CAREFULLY REVIEWS ALL REQUESTS FOR DONATIONS AND GRANTS PRIOR TO THEIR APPROVAL AND DISBURSEMENT APPROVAL IS

PART I, LINE 2 GRANTED ONLY TO REPUTABLE ORGANIZATIONS WHICH HAVE SATISFIED THE BOARDS DUE DILIGENCE THE BOARD PERFORMS NO SUBSEQUENT MONITORING OF THE USE OF DONATIONS AND GRANTS. ALL RECORDS REGARDING DISBURSEMENT OF FUNDS ARE MAINTAINED AT THE LOCAL UNION OFFICE

Additional Data

HEARTS AND HANDS OF

GIRLS ON THE RUN CENTRAL

337 N WARMAN AVE INDIANAPOLIS, IN 46222

INDIANA

INDIANA PO BOX 104 FISHERS, IN 46038

Software ID: Software Version:

27-0497482

27-4418367

EIN: 35-0289840

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL

8,000

WORKERS LOCAL UNION NO 481

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section

	organization or government		ıf applicable	grant	cash assistance	(book, FMV, appraisal, other)	
--	-------------------------------	--	---------------	-------	--------------------	----------------------------------	--

organization	 if applicable	grant	cash	(book, FMV, appraisal,
or government			assistance	other)

(d) Amount of cash (e) Amount of non- (f) Method of valuation

6,555 COST

COST

SUPPLIES

N/A

(q) Description of non-cash assistance

(h) Purpose of grant

or assistance

CONTRIBUTONS

CONTRIBUTION

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 23-7450322 12.034 COST IN/A CONTRIBUTION FRANKLIN TOWNSHIP YOUTH FOOTBALL PO BOX 39034 INDIANAPOLIS, IN 46239

COST

IN/A

I CONTRIBUTION

8.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

30-0710112

GC ATHIFTICS

805 BROADWAY GREENFIELD, IN 46140

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance ELECTRICAL WORKERS 35-0851694 10.000 COST IN/A CONTRIBUTION BENEFIT TRUST FUND 1000 NI MEDIDIANI CEDEET

SUITE 103 INDIANAPOLIS, IN 46202					
FRANKLIN TOWNSHIP EDUCATIONAL FOUNDATION 6141 S FRANKLIN ROAD	35-2000204	6,000	COST	N/A	CONTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

INDIANAPOLIS, IN 46259

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (d) Amount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (b) EIN (c) IRC section organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance TOP NOTCH 10.500 COST IN/A 31-1118717 CONTRIBUTIONS 1828 N MERIDIAN STREET SUITE 121 INDIANAPOLIS, IN 46202

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Dat	a -	DLN: 93	49310	0011	180		
Sch	edule J	Coi	mpensat	ion Information	0	MB No	1545-0	0047		
(For	n 990)	For certain Officers		rustees, Key Employees, and Hig	hest					
		Complete if the organ		ated Employees vered "Yes" on Form 990, Part IV	, line 23.	20	119)		
_	a	_	▶ Attach	to Form 990. instructions and the latest infori		Open to Public				
•	tment of the Treasury al Revenue Service	Go to <u>www.irs.gov</u>	<u> </u>	instructions and the latest infor	mation.		ectio			
	ne of the organiza	ation ERHOOD OF ELECTRICAL			Employer identifica	tion nu	ımber			
	RKERS LOCAL UNION				35-0289840					
Pa	rt I Questi	ons Regarding Compensati	on							
							Yes	No		
1a				f the following to or for a person liste by relevant information regarding the						
		or charter travel		Housing allowance or residence for	•					
		companions		Payments for business use of perso						
		nification and gross-up payments	H	Health or social club dues or initiati Personal services (e g , maid, chau						
	□ Discretion	ary spending account		Personal services (e g , maid, chau	meur, cher)					
b				follow a written policy regarding pay ve? If "No," complete Part III to expl		1b				
2				or allowing expenses incurred by all r, regarding the items checked on Lii	no 123	2				
	unectors, truste	es, officers, including the CEO/EX	ecutive Directo	r, regarding the items checked on th	ile Ia.					
3		if any, of the following the filing of EO/Executive Director Check all t		ed to establish the compensation of t	he					
				CEO/Executive Director, but explain	ın Part III					
	☐ Compens	ation committee	П	Written employment contract						
		ent compensation consultant		Compensation survey or study						
		of other organizations		Approval by the board or compensa	ation committee					
4	During the year related organiza		0, Part VII, Se	ction A, line 1a, with respect to the f	iling organization or a					
а	_	ance payment or change-of-contro	ol payment?			4a		No		
ь		r receive payment from, a suppler		ified retirement plan?		4b		No		
c	Participate in, o	r receive payment from, an equity	-based comper	nsation arrangement?		4c		No		
	If "Yes" to any o	of lines 4a-c, list the persons and p	provide the app	olicable amounts for each item in Par	t III					
	Only 501(c)(3), 501(c)(4), and 501(c)(29) o	raanizatione	must complete lines 5-9						
5			_	the organization pay or accrue any						
		ontingent on the revenues of		, , , , ,						
а	The organization	1 [?]				5a				
b	Any related orga					5b				
	•	5a or 5b, describe in Part III								
6		ed on Form 990, Part VII, Section ontingent on the net earnings of	A, line 1a, did	the organization pay or accrue any						
a	The organization					6a				
Ь	Any related orga					6b				
7	•	6a or 6b, describe in Part III	A lunc 1 = d. d	the organization provide any nanture	d					
7	payments not d	escribed in lines 5 and 6? If "Yes,"	describe in Pa		eu	7				
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe	8				
9	If "Yes" on line 3 53 4958-6(c)?	8, did the organization also follow	the rebuttable	presumption procedure described in	Regulations section	9				
For F	Panerwork Redu	iction Act Notice, see the Instr	uctions for Fo	orm 990. Cat No. !	50053T Schedule	(Forn	1 990)	2019		

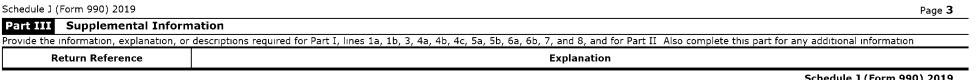
Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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 are not 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

Note. The sum of column	ıs (B)(i)- (iii) for each listed inc	lividual must equal the to	tal amount of Form 990,	n 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individu						
(A) Name and Title		(B) Breakdown (i) Base compensation	of W-2 and/or 1099-MIS (ii) Bonus & incentive compensation	C compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990			
1 STEVE MENSER	(i)	102,586	0	762	35,412	20,155	158,915	0			
FINL SECY-BUS MGR	(ii)	0	0	0	0	0	0	0			
2 JEFF WHEELER TREASURER/ASST BUS MGR	(i)	97,469	0	762	33,755	20,155	152,141	0			
	(ii)	0	0	0	0	0	0	0			
		1									
_											
							Schedule	J (Form 990) 2019			



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SCHEDUL (Form 990 or EZ)	990- Complete to pro Form 990	ons on n.	2019 Open to Public Inspection					
Name Brthe ofg INTERNATIONAL B WORKERS LOCAL I	ងកាំខation ROTHERHOOD OF ELECTRICAL	on		Employer identi 35-0289840	fication number			
Return Reference	Explanation							
FORM 990, PART VI, SECTION A, LINE 6	THE LOCAL UNION'S GENERAL NEW APPLICATION FOR MEMBERS ACCEPTED INTO THE LOCAL							

Return Explanation
Reference

LINE 7A

FORM 990, MEMBERS WITH VOTING RIGHTS AND CURRENT IN THEIR DUES PAYMENTS ARE ELIGIBLE TO VOTE FOR IND PART VI, IVIDUALS WHICH COMPRISE THE EXECUTIVE BOARD (GOVERNING BODY) OF THE LOCAL UNION SECTION A,

Return Explanation
Reference

FORM 990, PART VI, DECISIONS MADE BY THE EXECUTIVE BOARD OF THE LOCAL UNION (GOVERNING BODY) AT PERIODIC MEMB
SECTION A, LINE 7B

THE GENERAL MEMBERSHIP APPROVES CHANGES TO THE GOVERNING DOCUMENTS ALONG WITH SIGNIFICANT DECISIONS MADE BY THE EXECUTIVE BOARD OF THE LOCAL UNION (GOVERNING BODY) AT PERIODIC MEMB
SECTION A, LINE 7B

Return Explanation

LINE 8B

FORM 990, PART VI, SECTION A,

Return Explanation

LINE 11B

FORM 990, THE FORM 990 HAS BEEN PROVIDED TO THE EXECUTIVE BOARD (GOVERNING BODY) FOR THEIR REVIEW T
PART VI, HE SIGNING OFFICER OF THE LOCAL UNION REVIEWS THE FORM 990 BEFORE SIGNING AND FILING THE R
SECTION B. ETURN

Return Explanation
Reference

FORM 990,	SALARY POLICIES ARE SET IN ACCORDANCE WITH THE BYLAWS WHICH ARE REVIEWED AND APPROVED BY T
PART VI,	HE MEMBERSHIP SALARIES ARE ANNUALLY REVIEWED AND APPROVED BY THE EXECUTIVE BOARD
SECTION B,	
LINE 15	

Return Explanation

Reference

FORM 990,
PART VI,
SECTION C,
LINE 19

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Reference

FORM 990, PART XI, LINE 9

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(Form 990)

Department of the Treasury

Name of the organization

INTERNATIONAL BROTHERHOOD OF ELECTRICAL

Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

ne 33, 34, 35b, 36, or 37.

2019
Open to Public

DLN: 93493100011180

OMB No 1545-0047

Inspection
Employer identification number

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

WORKERS LOCAL UNION NO 481 35-0289840 Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (a) (b) (c) (d) (e) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (a)
Name, address, and EIN of related organization (b) (c) (e) (f) (g) Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No TO HOLD TITLE TO PROPERTY (1)LOCAL UNION NO 481 IBEW BUILDING CORP IN 501(C)2 Yes 1828 N MERIDIAN STREET USED BY LOCAL UNION INDIANAPOLIS, IN 46202 35-1911009 (2) IBEW 481 LEGISLATIVE CAMPAIGN ACCOUNT IN CONTRIBUTIONS FOR 527 No 1828 N MERIDIAN STREET POLITICAL CANDIDATES AND POLITICAL ORGANIZATIONS INDIANAPOLIS, IN 46202 27-3917449 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50135Y Schedule R (Form 990) 2019

(a)		(b)	(c)	(d)	(e)	(f)	(g)	0	h)	(i)	1	(j)	(
(a) Name, address, and EIN of related organization		Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Predominant income(related unrelated, excluded from tax under sections 512-	Share of total income	Share of	Disprop	rtionate itions?	Code V-UE amount in b 20 of Schedule K (Form 106	ox ma	eneral or anaging artner?	Perce
					514)			Yes	No	1	Ye	es No	1
											+		
											+		
		+										- 1	
Identification of Related Organi because it had one or more related						nization ans	swered "Ye	s" on F	orm 9	990, Part	IV, lı	ne 34	
		a corporati		st during th	(d) controlling Tylentity (Co	(e)	(f) Share of total	Share	(g) e of end- year assets	-of- Per	(h) centag	ie !	Section (13) co ent
because it had one or more related (a) Name, address, and EIN of	organizations treated as	c a corporati	on or tru: (c) .egal	st during th	(d) controlling Tylentity (Co	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h)	ie !	() Section (13) co
because it had one or more related (a) Name, address, and EIN of	organizations treated as	c a corporati	on or tru: (c) .egal .micile or foreign	st during th	(d) controlling Tylentity (Co	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h)	ie !	Section (13) co ent
because it had one or more related (a) Name, address, and EIN of	organizations treated as	c a corporati	on or tru: (c) .egal .micile or foreign	st during th	(d) controlling Tylentity (Co	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h)	ie !	Section (13) co ent
because it had one or more related (a) Name, address, and EIN of	organizations treated as	c a corporati	on or tru: (c) .egal .micile or foreign	st during th	(d) controlling Tylentity (Co	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h)	ie !	Section (13) co ent
because it had one or more related (a) Name, address, and EIN of	organizations treated as	c a corporati	on or tru: (c) .egal .micile or foreign	st during th	(d) controlling Tylentity (Co	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h)	ie !	Section (13) co ent
because it had one or more related (a) Name, address, and EIN of	organizations treated as	c a corporati	on or tru: (c) .egal .micile or foreign	st during th	(d) controlling Tylentity (Co	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Per	(h)	ie !	Section (13) co ent

Reimbursement paid to related organization(s) for expenses .

Reimbursement paid by related organization(s) for expenses .

r Other transfer of cash or property to related organization(s) . . .

(1)LOCAL UNION NO 481 IBEW BUILDING CORP

(2)LOCAL UNION NO 481 IBEW BUILDING CORP

(3)LOCAL UNION NO 481 IBEW BUILDING CORP

(a)
Name of related organization

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	Y 1a	Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.		res N
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	
	1a	
		No
b Gift, grant, or capital contribution to related organization(s)	1 b	No
c Gift, grant, or capital contribution from related organization(s)	1c	No
d Loans or loan guarantees to or for related organization(s)	1 d	No
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1 f	No
g Sale of assets to related organization(s)	1 g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
	1j	

е	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1f		No
g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1 i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
İ				
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	Yes	
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
n	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
О	Sharing of paid employees with related organization(s)	10	Yes	

(b)

Transaction

type (a-s)

S

S

(c)

Amount involved

252,795

65,931

64,429

CASH PAID

CASH RECEIVED

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

No

No

No

1r

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(d)

Method of determining amount involved

INCREASE IN EQUITY OF BLDG CORP

1s Yes

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	domicilo	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) The all partners section 501(c)(3) Trganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ite	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General d managin partner ⁷	,	(k) Percentage ownership
			514)	Yes	No			Yes	No	1	Yes	No	
<u> </u>										Schedul	e R (Form	1 990	0) 2019

