DLN: 93493079009230 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 Department of the ► Go to www.irs.gov/Form990 for instructions and the latest information. Treasury 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 666 ☐ Address change 54-0259020 ☐ 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) 1400 E NINE MILE RD ☐ Amended return ☐ Application pending (804) 353-9666 City or town, state or province, country, and ZIP or foreign postal code HIGHLAND SPRINGS, VA $\,$ 230752326 $\,$ G Gross receipts \$ 3,441,115 Name and address of principal officer H(a) Is this a group return for JASON D JENKINS □Yes ☑No subordinates? 1400 E NINE MILE RD H(b) Are all subordinates HIGHLAND SPRINGS, VA 230752326 ☐ Yes ☐No included? Tax-exempt status ☐ 501(c)(3) **☑** 501(c)(5) **◄** (insert no) □ 527 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW IBEWLOCAL666 COM L Year of formation 1910 M State of legal domicile VA K Form of organization ☐ Corporation ☐ Trust ☑ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LOCAL UNION 666 IS A LABOR ORGANIZATION THAT SERVES WORKERS IN THE ELECTRICAL CRAFT INDUSTRY OF THE RICHMOND, VIRGINIA AREA THE OBJECTIVE OF THIS LOCAL UNION SHALL BE TO PROMOTE BY ALL PROPER MEANS THE MATERIAL AND INTELLECTUAL WELFARE OF ITS MEMBERS, TO CARE FOR THE SICK, ASSIST IN THE BURIAL Activities & Governance OF THE DECEASED AND TO PROMOTE A BROTHERLY FEELING AMONG THE ELECTRICAL CRAFT Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 3 4 0 Number of independent voting members of the governing body (Part VI, line 1b) 5 43 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 6 0 Total number of volunteers (estimate if necessary) 0 Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 39 7b 0 **Current Year** 8 Contributions and grants (Part VIII, line 1h) . Ravenue 2,016,310 2,743,787 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 25,672 80.843 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 4,000 3,425 2,045,982 2,828,055 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 29,556 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 32.068 36,570 31,985 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) 716,037 808,835 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 982,488 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 894,382 1,679,057 1,852,864 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 . 366,925 975,191 Assets or d Balances End of Year Beginning of Current Year 6,648,981 20 Total assets (Part X, line 16) . 5,503,811 21 Total liabilities (Part X, line 26) . 113,865 201,309 5,389,946 Net assets or fund balances Subtract line 21 from line 20 . 6,447,672 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 2020-03-19 Signature of officer Date Sign Here LUTHER B DUNN FINANCIAL SECRETARY Type or print name and title Date 2020-03-09 Print/Type preparer's name Preparer's signature Check \square if P00360279 **Paid** self-employed NOVAK FRANCELLA LLC Firm's EIN ▶ 61-1436956 Firm's name Preparer Use Only Firm's address ► ONE PRESIDENTIAL BLVD SUITE 330 Phone no (610) 668-9400 BALA CYNWYD, PA 19004 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2019) Cat No 11282Y

Form	990 (2019)				Page 2
Pa	rt III Statemer	nt of Program Service Ac	complishments		
	Check if Sc	hedule O contains a response of	note to any line in this Part III		🗹
1		e organization's mission			
ELEC MEAI	TRICAL CRAFT INDU NS THE MATERIAL A	JSTRY OF THE RICHMOND, VIRG	ERS LOCAL UNION 666 IS A LABOR GINIA AREA THE OBJECTIVE OF THE TITS MEMBERS, TO CARE FOR THE CAL CRAFT	IS LOCAL UNION SHALL BE TO PF	ROMOTE BY ALL PROPER
2	Did the organization	on undertake any significant pro	gram services during the year whicl	n were not listed on	
	the prior Form 990	or 990-EZ?			☐ Yes 🗹 No
	If "Yes," describe t	hese new services on Schedule	0		
3	Did the organization	on cease conducting, or make si	gnificant changes in how it conducts	s, any program	
		:hese changes on Schedule O			☐ Yes ☑ No
4	Describe the organ Section 501(c)(3)	nization's program service accor	nplishments for each of its three lar required to report the amount of g service reported	gest program services, as measui rants and allocations to others, th	red by expenses ne total
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	See Addıtıonal Data			,	,
	-				
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4 c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program ser (Expenses \$	vices (Describe in Schedule O) including	grants of \$) (Revenue \$)
4e	Total program se	ervice expenses >			

11f

12a

12b

13

14a

14b

15

16

17

18

19

20a

20h

21

Yes

Yes

Nο

No

Nο

Nο

Nο

Nο

Nο

Nο

Nο

No

Nο

Form **990** (2019)

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)? . . . No Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates Nο 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 🛸 . .

5 6

Yes Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete No Did the organization receive or hold a conservation easement, including easements to preserve open space, 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 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 10

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 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 No 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 c 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 the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🥦

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

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete

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

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

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

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?

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

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

Form	990 (2019)			Page 4
Pa	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 2? 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		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	26		

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

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

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

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🕏

Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

Nο

No

37

38

1c

0

1a

1b

Yes

Yes

Form 990 (2019)

37

38

Part V

	990 (2019)			Page 5
Pai	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	<u> </u>
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	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 See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	4a		No
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		
	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		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
	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		
	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?	7 c		
	If "Yes," indicate the number of Forms 8282 filed during the year			1
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	,,,,,	7f		
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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.			
	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 a	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			1
	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	14-		N-
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		No
	If the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess	740		
	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
Раг	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "Na 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	" resp	onse to	lines 🔽
Se	ction A. Governing Body and Management			ı
1-	Enter the number of voting members of the governing body at the end of the tax year 1a 18		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	1		
	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	
Ь	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	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in	1.7		
	Schedule O how this was done Did the organization have a written whistleblower policy?	12c		No.
	-			No
14 15	Did the organization have a written document retention and destruction policy?	14		No
a	The organization's CEO, Executive Director, or top management official	15a		No
	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b		
	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	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 ►LUTHER B DUNN 1400 E NINE MILE RD HIGHLAND SPRINGS, VA 230752326 (804) 353-9666

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
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable co		m the o	organ	ızatı	ion a	and ar	ny re	elated organizations	S	
See instructions for the order in which to list the	•									
Check this box if neither the organization no (A) Name and title	r any related or (B) Average hours per week (list any hours	Positio tha pers	n (do an on on is	(C) not e bo both) t che ox, u n an		ore er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	(W-2/1099- MISC)		(W-2/1099- MISC)	organization and related organizations
(1) CHARLES SKELLY BUS MGR	40 00			х				85,538	0	31,465
(2) LUTHER B DUNN FIN SECRETARY	40 00			х				79,014	0	30,371
(3) JASON D JENKINS PRESIDENT	7 00			х				52,972	0	18,086
(4) THOMAS BEACH VICE-PRESIDENT	6 00			x				2,889	0	0
(5) CHRIS HORTON REC SECRETARY	5 00			×				2,034	0	0
(6) THOMAS F COX TREASURER	10 00			х				3,765	0	0
(7) CHRIS BALL EXEC BOARD	5 00			х				2,648	0	247
(8) ROGER DALY	5 00			v				2 486	0	20

		ों		160			
(1) CHARLES SKELLY BUS MGR	40 00		х		85,538	0	31,465
(2) LUTHER B DUNN FIN SECRETARY	40 00		х		79,014	0	30,371
(3) JASON D JENKINS PRESIDENT	7 00		х		52,972	0	18,086
(4) THOMAS BEACH VICE-PRESIDENT	6 00		х		2,889	0	0
(5) CHRIS HORTON REC SECRETARY	5 00		х		2,034	0	0
(6) THOMAS F COX TREASURER	10 00		х		3,765	0	0
(7) CHRIS BALL EXEC BOARD	5 00		х		2,648	0	247
(8) ROGER DALY EXEC BOARD	5 00		х		2,486	0	20
(9) REBECCA DICKERSON EXEC BOARD	5 00		х		6,570	0	1,963
(10) SHAWN FLEEK EXEC BOARD	5 00		х		2,448	0	121
(11) JOHN PUGH EXEC BOARD (P)	5 00		х		155	0	0
(12) CORBIN SMITH EXEC BOARD	5 00		х		2,382	0	69
(13) DEREK BRADBY EXAM BOARD	5 00		х		3,812	0	960
(14) TIM BOEHM EXAM BOARD	5 00		x		1,883	0	0
(15) JOHN EUBANKS EXAM BOARD	5 00		х		3,141	0	440
(16) CHRIS MCGUINN EXAM BOARD	5 00		х		3,658	0	798
(17) GORDON SHOBE EXAM BOARD	5 00		х		3,524	0	917

compensation from the organization ▶ 0

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) **(F)** Estimated

Page 8

		,,	-,	p ,		,		,	1		1	
	(A) Name and title	(B) Average hours per week (list any hours	than c	ne b	ox, ι n of	t cho unle: ficer	and a	son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F Estima amount of compen from	ated of other sation 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)	organizat relat organiz	ed
' '	TIMOTHY KELLEY	5 00			Х				1,730	0		182
EXEC	BOARD (P)	•••	••••		Ĺ				1,750			102
' '	WALTER GOREE	5 00			×				75,752	0		29,824
EXEC	BOARD		••••		<u> </u>				, 3,, 52			
' '	WILLIAM MERRIMAN	5 00			×				3,063	0		1,340
	BOARD		••••						,			
												_
-												
15.9	Sub-Total					•						
	Total from continuation sheets to Part V				•	,	-					
	Total (add lines 1b and 1c)	•				•	•		339,464	0		116,803
2	Total number of individuals (including but of reportable compensation from the orga		those li	sted a	abov	/e) v	vho re	ceive	ed more than \$100	,000		
											Yes	No
3	Did the organization list any former offic			key e	emp	loye	e, or h	nighe	est compensated er	nployee on		
	line 1a? If "Yes," complete Schedule J for	such individual		•	•	٠		•				No
4	For any individual listed on line 1a, is the organization and related organizations grandividual											Na
5	Did any person listed on line 1a receive o services rendered to the organization? If "								ganization or individ	dual for 5		No
							'					NO
1	Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.											
		(A)	•							(B)	_ (C	
	Name and b	usiness address							Descrip	tion of services	Compen	sation
											1	

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

		(2019)	of Dougnes						Page 9
Part	VIII	Statement Check if Scheo			ponse or note to any	/ line in this Part VIII			\square
		Check if Sched	dule o concan	13 6 163	porise of flote to ally	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a	Federated campa	aigns	1a			revenue		512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	Ь	Membership due:	s	1 b	İ				
9 2 3	c	: Fundraising even	its	1c					
Ę,	d	Related organiza	tions	1d					
ਤੂਂ ਦੂ	e	Government grants	(contributions)	1e	Ī				
Sin	f	All other contributio		s,					
uţi. Te fi		and similar amounts above		1f	<u> </u>				
흕횽	g	Noncash contribution lines 1a - 1f \$	ons included in	1g					
Son		n Total. Add lines	1a-1f		>				
					Business Code				
	2a	MEMBERSHIP DUES			900099	2,743,787	2,743,787		
ıl e									
Program Service Revenue	b								
ı Çξ	_								
rvic	С								
38	d								
gran	e								
Pro	-				_				
	f	All other program	service reven	ue					
		Total. Add lines 2			2,743,787	_	1	I	
		investment income imilar amounts) .	(including div		, interest, and other i	44,440			44,440
	4 I	ncome from invest	ment of tax-e	exempt	bond proceeds	•			
	5 R	Royalties				<u> </u>			
			(1)	Real	(II) Personal	_			
	6a	Gross rents	6a						
		Less rental expenses	6b						
	С	Rental Income							
		or (loss)	6c			_			
	u	Net rental income		curities	(II) Other				
	7a	Gross amount							
		from sales of assets other	7a	624,7	67				
		than inventory Less cost or							
	_	other basis and sales expenses	7b	588,3	64				
		·	<u> </u>			1			
		Gain or (loss) Net gain or (loss)	7c	36,4					36,403
		Gross income from fu			· · · · •				35,135
Other Revenue		(not including \$ contributions reporter		of					
≥v e		See Part IV, line 18		. 8	a				
r Re	b	Less direct expen	ses	. 81	b				
the	С	Net income or (los	ss) from fundr	aising e	events •				
		Gross income from		ies					
		See Part IV, line 19		9					
		Less direct expen							
	C	Net income or (los	ss) from gami	ng activ	Titles	1			
		Gross sales of inve							
		returns and allowa		10		_			
		Less cost of good		10	<u>- </u>	2,305	2,305		
		Net income or (los Miscellaneo	us Revenue	or mive	Business Code				
	11:	a MISCELLANEOUS	INCOME		90009	1,120	1,120		
	b								
	c								
		All of							
		All other revenue							
		Total. Add lines 1			•	1,120			
	12	Total revenue. S	ee instruction	S	· · · · •	2,828,055	2,747,212		0 80,843
									Form 990 (2019)

Р	art IX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations must of		_		
	Check if Schedule O contains a response or note to ar	ny line in this Part IX			<u> U</u>
7b,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	18,056			
2	Grants and other assistance to domestic individuals See Part IV, line 22	11,500			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members	31,985			
5	Compensation of current officers, directors, trustees, and key employees	454,151			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	219,049			
	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	39,408			
9	Other employee benefits	52,576			
10	Payroll taxes	43,651			
11	Fees for services (non-employees)				
a	Management				
Ŀ	Legal	2,289			
c	: Accounting	43,721			
c	l Lobbying [
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	5,330			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	5,706			
12	Advertising and promotion	67,043			
	Office expenses	91,969			
14	Information technology				
15	Royalties				
	Occupancy	124,458			
	Travel	17,454			
	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	44,304			
	Interest				
	Payments to affiliates	535,916			
	Depreciation, depletion, and amortization	17,827			
	Insurance	20,538			
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 ORGANIZING	5,033			
		,			
	b FLOWERS	900			
	c d				
	e All other expenses Total functional expenses. Add lines 1 through 24e	1,852,864			
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined	1,552,5554			
	educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				
	Check here ► ☐ If following SOP 98-2 (ASC 958-720)				Form 000 (2010)

Check if Schedule O contains a response or note to any

10a Land, buildings, and equipment cost or other

Investments-publicly traded securities .

Other assets See Part IV, line 11 . . .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

Deferred revenue . . .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Investments—other securities See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow FASB ASC 958, check here ▶

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

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

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

Investments-program-related See Part IV, line 11

or family member of any of these persons . . .

and other liabilities not included on lines 17 - 24)

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

basis Complete Part VI of Schedule D

b Less accumulated depreciation

Intangible assets .

Grants payable .

11

12

13

14

15

16

17

18

19

20

21

23

24

26

27

28

31

32

33

Liabilities 22

Fund Balances

ō 29

Assets 30

52,466

1,121,373

2,599,671

5,503,811

44,945

68.920

113.865

5.389,946

5,389,946

5,503,811

299.245

10c

11

12 13

14

15

16

17

18

19

20 21

22 23

24 0

25

26

27

28

29

30

31

32

33

Page **11**

23.206

39,689

36,664

1,257,646

322.531

2,984,900

6,648,981

51,935

73.119

76,255

201.309

6,447,672

6,447,672

6,648,981

Form 990 (2019)

line in this Part IX .														
		В	egır	(A nning	,	/ear				Е	•	B) of yea	ar	
_	1					728	,641	1					1,198,	308

1	Cash-non-interest-bearing	720,041		1,190,300
2	Savings and temporary cash investments	438,114	2	626,006
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	224,751	4	160,031
5	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		5	
6	Loans and other receivables from other disqualified persons (as defined under			

307,872

271,208

section 4958(f)(1)), and persons described in section 4958(c)(3)(B). 6 7 Notes and loans receivable, net Assets 12.312 Inventories for sale or use . . 8 Prepaid expenses and deferred charges . . . 27,238 9

10a

10b

3a

3b

No

Form 990 (2019)

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

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

Audit Act and OMB Circular A-133?

Additional Data

Software ID: Software Version:

EIN: 54-0259020

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LOCAL UNION 666

Form 990 (2019)

Form 990, Part III, Line 4a:

SECURED BETTER WAGES, HOURS, WORKING CONDITIONS, AND OTHER ECONOMIC ADVANTAGES FOR UNION MEMBERS THROUGH ORGANIZATION OF NON-UNION EMPLOYERS, CONTRACT NEGOTIATION AND ENFORCEMENT AND COLLECTIVE BARGAINING

Political Campaign and Lobbying Activities

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

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

OMB No 1545-0047

DLN: 93493079009230

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

EZ)

SCHEDULE C (Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

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 Name of the organization **Employer identification number** INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LOCAL UNION 666 54-0259020 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 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 1 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? 4a ☐ Yes ☐ No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 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 filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1				
2				
3				
4				
5				
6				
For Paperwork Reduction Act Notice, see t	the instructions for Form 990 or 990-EZ.	Cat	No 50084S Schedule C (Form 990 or 990-EZ) 2019

activity

1

(b)

Amount

(a)

Yes | No

а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), o	r sectio	'n		
-					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	Yes	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		No
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."	ÌIÍ-A			01 (c)(6)
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).					
a	Current year	2a				
b	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
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?					
5	Taxable amount of lobbying and political expenditures (see instructions)	5		—		
	Int IV Supplemental Information					
	Cappientental Information					

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

Explanation

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

Return Reference

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

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

SCHEDULE D

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

DLN: 93493079009230

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.

Open to Public

Schedule D (Form 990) 2019

Cat No 52283D

Department of the Treasury

(Form 990)

terna	al Revenue Service	► Go to <u>www.irs.gov/Form</u>	<u>1990</u> for instructions and the latest info	rmation.	Ins	spection
INT	me of the organ ERNATIONAL BROTH RKERS LOCAL UNIO	IERHOOD OF ELECTRICAL		Employer 54-025903	r identification	number
Pa	rt I Organi	zations Maintaining Donor Advi	sed Funds or Other Similar Funds o			
	Comple	te if the organization answered "Ye	s" on Form 990, Part IV, line 6.			
			(a) Donor advised funds	(b) F	unds and other	accounts
•	Total number at	,				
2		of contributions to (during year)				
1	55 5	of grants from (during year)				
ļ	Aggregate value	at end of year				
•		ation inform all donors and donor adviso iroperty, subject to the organization's ex	rs in writing that the assets held in donor ac clusive legal control?	lvised funds		Yes 🗌 No
i		oses and not for the benefit of the donor	onor advisors in writing that grant funds can or donor advisor, or for any other purpose o		npermissible	Yes 🗌 No
Pai	till Conser	vation Easements.				
	Comple	te if the organization answered "Ye	s" on Form 990, Part IV, line 7.			
	Purpose(s) of co	onservation easements held by the organ	nization (check all that apply)			
	☐ Preservati	on of land for public use (e g , recreation	n or education) \qed Preservation of an	historically	ımportant land a	irea
	☐ Protection	of natural habitat	Preservation of a o	certified histo	oric structure	
	Preservati	on of open space				
2	Complete lines i easement on th	2a through 2d if the organization held a e last day of the tax year	qualified conservation contribution in the for		ervation eld at the End o	f the Year
а	Total number of	conservation easements		2a		
b	Total acreage re	stricted by conservation easements		2b		
С	Number of cons	ervation easements on a certified histori	c structure included in (a)	2c		
d		ervation easements included in (c) acqui in the National Register	red after 7/25/06, and not on a historic	2d		
1	Number of cons tax year ►	ervation easements modified, transferre	d, released, extinguished, or terminated by	the organiza	ation during the	
ļ	Number of state	es where property subject to conservatio	n easement is located >			
i		ization have a written policy regarding that of the conservation easements it holds	ne periodic monitoring, inspection, handling	of violations,	, Yes	□ No
,	Staff and volunt	teer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing co	onservation (easements durin	g the year
,	Amount of expe	enses incurred in monitoring, inspecting,	handling of violations, and enforcing conser	vation easer	ments during the	: year
3			above satisfy the requirements of section 1	70(h)(4)(B)(` ' —	П.,
)	In Part XIII, des	scribe how the organization reports cons	ervation easements in its revenue and expe footnote to the organization's financial state		,	∐ No
ar	the organization	n's accounting for conservation easemen				
	Comple	te if the organization answered "Ye	s" on Form 990, Part IV, line 8.			
.a	art, historical tr	easures, or other similar assets held for	6 (ASC 958), not to report in its revenue stapublic exhibition, education, or research in ficial statements that describes these items			
b	historical treasu		6 (ASC 958), to report in its revenue statem ic exhibition, education, or research in furth			
(i) Revenue includ	led on Form 990, Part VIII, line 1		▶ \$	\$	
(i	i)Assets included	ın Form 990, Part X		▶ \$		
2		ion received or held works of art, historic nts required to be reported under SFAS	cal treasures, or other similar assets for fina 116 (ASC 958) relating to these items	ncial gain, p	rovide the	
а	Revenue include	ed on Form 990, Part VIII, line 1		▶ 9	\$	
b	Assets included	ın Form 990, Part X		•	\$	

Sche	edule D (Form 990) 20	19								Pa	age 2
Par	t III Organizati	ons Maintaining Co	llections of A	rt, Histori	cal Trea	sures, or	Other !	Similar As	sets (continued)	
3	Using the organization items (check all that	on's acquisition, accession apply)	on, and other reco	ords, check	any of the	following tl	hat are a	sıgnıfıcant u	se of its	collection	
а	Public exhibition	on		d	☐ Lo	an or excha	inge prog	rams			
b	☐ Scholarly rese	arch		е	☐ Ot	:her					
c	Preservation fo	or future generations									
4	Provide a description Part XIII	of the organization's co	ollections and exp	lain how the	y further	the organiz	atıon's ex	empt purpos	se in		
5	- , ,	the organization solicit raise funds rather than t		•				ılar	☐ Ye	s 🗆 No	
Pa		d Custodial Arrang the organization ans		Form 990	, Part IV	, line 9, or	reporte	d an amou	nt on F	Form 990, Pa	rt
1a	Is the organization a included on Form 99	n agent, trustee, custoo 0, Part X?	lian or other inter	rmediary for	contribut	ions or othe	r assets r	not	☐ Ye	s 🗌 No	
	-c					Г					
b		arrangement in Part XII	II and complete t	he following	table		4	Ai	mount		
С	Beginning balance						1c				
d	Additions during the	•					1d				
е	Distributions during	the year					1e				
f	Ending balance					L	1f				
2a	Did the organization	ınclude an amount on F	orm 990, Part X,	line 21, for	escrow or	custodial a	ccount lıa	bility?	☐ Ye	s 🗌 No	
b	If "Yes," explain the	arrangement in Part XII	I Check here if t	he explanatı	on has be	en provided	l ın Part X	(III			
Pa	rt V Endowmer										
	Complete if	the organization ans	wered "Yes" on (a) Current yea		<u>, Part IV</u> rior year	, line 10. (c) Two ye	are back	(d) Three yea	rc back	(e) Four years b	ack.
1a	Beginning of year bala	ince	(a) Current yea	a (D) F	nor year	(C) TWO YE	ears back	(u) Tillee yea	15 Dack	(e) rour years b	ack
	Contributions										—
	Net investment earnir	as asine and losses				+					—
						+			\longrightarrow		
	Grants or scholarships										
	Other expenditures fo and programs	•									
f	Administrative expens	es							\longrightarrow		
g	End of year balance										
2	Provide the estimate	d percentage of the cur	rent year end bal	ance (line 1	g, column	(a)) held as	5				
а	Board designated or	quası-endowment 🟲									
b	Permanent endowme	ent 🟲									
С	Temporarily restricte	d endowment >									
	The percentages on	ines 2a, 2b, and 2c sho	uld equal 100%								
3a	Are there endowmer organization by	t funds not in the posse	ession of the orga	nızatıon thal	are held	and admini	stered for	the the		Yes N	<u> </u>
	(i) unrelated organiz	ations							3	a(i)	
		tions								ı(ii)	_
b 4		the related organization	·							3b	
4		the intended uses of th		illuowment f	unus						
- (c)		lings, and Equipme the organization ans		Form 990	, Part IV	<u>, lın</u> e 11a.	See For	<u>m 9</u> 90, Par	rt X, lır	ne 10.	
	Description of proper		ther basis (b)	Cost or other				epreciation		d) Book value	
1 a	Land										
b	Buildings										
	Leasehold Improveme	nts									
-		<u> </u>									

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

36,664

139,829

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" on Form 990,	Part IV III	ne 111	See Form aan	Part X. line 12
	(a) Description of security or category (including name of security)	(b) Book value	11 11 11 11 11 11 11 11 11 11 11 11 11	(c) Meth	od of valuation f-year market value
(1) Financia	l derivatives				
(2) Closely-l (3)Other	held equity interests				
(A)					
(B)					
(C)					
(D) (E)					
(F)					
(G)					
(H)					
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 12)	•			
Part VIII	Investments—Program Related.	Doub IV do		. C F 000	Doub V. June 42
	Complete if the organization answered 'Yes' on Form 990, (a) Description of investment	Part IV, III	ne 110	(b) Book value	(c) Method of valuation Cost or end-of-year market
/1)					value
(1)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Columi	n (b) must equal Form 990, Part X, col (B) line 13)		•		
Part IX	Other Assets. Complete if the organization answered 'Yes' on Form 990,	Part IV, lın	e 11d	. See Form 990, Pa	art X. line 15
	(a) Description	•		•	(b) Book value
(1)INVESTM (2)ACCRUE	ENT IN SUBSIDIARY DINTEREST				1,834,505 9,195
	M BUILDING FUND				1,141,200
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colu	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities.				2,984,900
1.	Complete if the organization answered 'Yes' on Form 990, (a) Description of liability	Part IV, lın	e 11e	or 11f.See Form	n 990, Part X, line 25. (b) Book value
	income taxes				(D) DOOK TUILED
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
	n (b) must equal Form 990, Part X, col (B) line 25)			,	▶ 76,255
2. Liability fo	or uncertain tax positions In Part XIII, provide the text of the footnot			ion's financial stat	ements that reports the
organization	's liability for uncertain tax positions under FIN 48 (ASC 740) Check	here if the	text of	the footnote has b	peen provided in Part XIII

Schedule D (Form 990) 2019

	Complete if the organi	ization answered 'Yes' on Form 990, Pari	t IV, li	ine 12a.		
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			
c	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line 2e from line 1 .				3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1				
а	Investment expenses not include	d on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII) .		4b			
С	Add lines 4a and 4b		٠.		4c	
5	Total revenue Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12)			5	
Par		penses per Audited Financial Statem			Return	1.
1	Total expenses and losses per au-	ization answered 'Yes' on Form 990, Pari dited financial statements	t 1V, II	ine 12a.	1	
2	Amounts included on line 1 but no				-	
∠ a		ities	2a	I		
_			2a 2b		\dashv \mid	
b	, ,					
C	Other losses		2c		_	
d	Other (Describe in Part XIII) .		2d		┦╻┃	
e	•				2e	
3					3	
4	,	Part IX, line 25, but not on line 1:	1 -	ı		
a	•	d on Form 990, Part VIII, line 7b	4a		_	
Ь	,		4b		_	
С					4c	
5	_	4c. (This must equal Form 990, Part I, line 18) .		5	
	t XIII Supplemental Info					
Pro	vide the descriptions required for P lines 2d and 4b, and Part XII, lines	art II, lines 3, 5, and 9, Part III, lines 1a and s 2d and 4b Also complete this part to provide	4, Pari any a	t IV, lines 1b and 2b, Pa idditional information	rt V, line	4, Part X, line 2, Part
	Return Reference		Ex	planation		
See /	Addıtıonal Data Table					
					_	

Page 4

Page 5		chedule D (Form 990) 2019	Schedule D (F
	ormation (continued)	Part XIII Supplemental Info	Part XIII
	Explanation	Return Reference	Re

Schedule D (Form 990) 2019

Additional Data

Software Version:

Software ID:

FIN: 54-0259020

INTERNATIONAL BROTHERHOOD OF ELECTRICAL Name: WORKERS LOCAL UNION 666

Supplemental Information

Explanation

Return Reference

PART X, LINE 2 ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE MANAGEMEN

T TO EVALUATE TAX POSITIONS TAKEN BY THE LOCAL AND RECOGNIZE A TAX LIABILITY IF THE LOCAL HAS TAKEN AN UNCERTAIN POSITION THAT, MORE LIKELY THAN NOT, WOULD NOT BE SUSTAINED UPON EX AMINATION BY THE U.S. FEDERAL, STATE, OR LOCAL TAXING AUTHORITIES. THE LOCAL IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS, HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TA X PERIODS IN PROGRESS TYPICALLY, TAX YEARS WILL REMAIN OPEN FOR THREE YEARS, HOWEVER, THI S MAY DIFFER DEPENDING UPON THE CIRCUMSTANCES OF THE LOCAL

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -					DL	N: 934930790	09230
Note: To capture the full o	ontent of this d	ocument, please se	elect landscape mod	e (11" x 8.5") whe	en printing.				
Schedule I		Grants and	Other Assistan	oo to Organiz	ations		С	MB No 1545-004	17
(Form 990)			Other Assistan	_	-			2019	
			and Individual					4017	
D	Со	mplete if the organiza	ation answered "Yes," • Attach to Form		, line 21 or 22.			Open to Public	
Department of the Treasury Internal Revenue Service		► Go to <u>ww</u>	w.irs.gov/Form990 for		on.			Inspection	
Name of the organization	OF ELECTRICAL					Emplo	yer identific	ation number	
INTERNATIONAL BROTHERHOOD WORKERS LOCAL UNION 666	OF ELECTRICAL					54-02	259020		
	ation on Grants	and Assistance				•			
 Does the organization mainstrain the selection criteria used Describe in Part IV the organization 	to award the grants	or assistance?			for the grants or assistance	e, and		✓ Yes	□ No
			ind Domestic Governme ditional space is needed	ents. Complete if the o	rganızatıon answered "Yes"	on Form 990,	Part IV, line	21, for any recip	ient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descri noncash as		(h) Purpose o or assistance	f grant
(1)								SUPPORT	
2 Enter total number of sect 3 Enter total number of other	er organizations listed	d in the line 1 table .					-	edule I (Form 990	\ 2019

Schedule I (Form 990) 2019

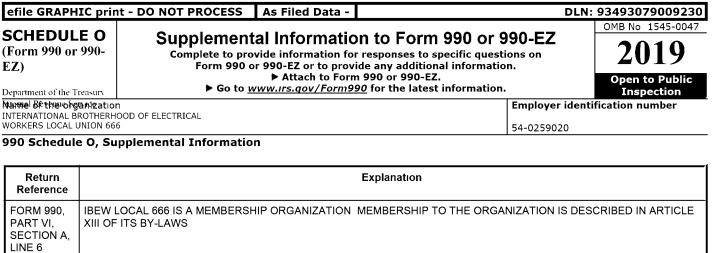
(7)

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



Return Explanation

FORM 990,	MEMBERS OF IBEW LOCAL 666 ELECT THE ORGANIZATION'S OFFICERS ELECTIONS ARE HELD EVERY THRE
PART VI,	E YEARS AND ARE DESCRIBED IN ARTICLE III OF THE ORGANZIATION'S BY-LAWS
SECTION A,	
LINE 7A	

Return Explanation
Reference

FORM 990,	THERE NEEDS TO A MAJORITY VOTE OF MEMBERS OF IBEW LOCAL 666 TO 1) AMEND THE LOCAL'S BYLA
PART VI,	WS AND 2) CHANGE THE AMOUNT OF DUES AND FEES ASSESSED MEMBERSHIP
SECTION A,	
LINE 7B	

Return Explanation
Reference

LINE 11B

FORM 990, PART VI, SECTION B.

Return Explanation
Reference

LINE 19

FORM 990, THE ORGANIZATION DOES NOT GENERALLY MAKE ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS PART VI, AVAILABLE TO THE PUBLIC SECTION C.

Return Explanation
Reference

LINE 9

FORM 990, PART XI,

Return Explanation

FORM 990, IBEW LOCAL 666'S GOVERNING BODY IS RESPONSIBLE FOR OVERSEEING THE FINANCIAL STATEMENT AUDI PART XI, T AND SELECTION OF THE INDEPENDENT ACCOUNTANT PERFORMING THE AUDIT LINE 2C

SCHEDULE R
(Form 990)

Related

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

Department of the Treasury

Internal Revenue Service

Name of the organization

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.

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

2019

Schedule R (Form 990) 2019

Employer identification number

DLN: 93493079009230OMB No 1545-0047

Open to Public Inspection

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LOCAL UNION 666 54												
Part I Identification of Disregarded Entities. Complet	e if the orgai	nization answ	ered "Yes	" on Form	990, Part	IV, line	33.					
(a) Name, address, and EIN (If applicable) of disregarded entity		(b) Primary ac	tivity	(c Legal domi or foreign	cile (state country)	(d) Total ind	come	(e) End-of-year as	sets	(1 Direct cc ent	f) introlling tity	
Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year		ete if the org	anızatıon	answered), Part I'	V, line 34 be	cause	e it had one or	more	
(a) Name, address, and EIN of related organization	Prim	(b) ary activity	Legal don	c) ncile (state n country)	(d Exempt Cod) de section	Public c	(e) narity status in 501(c)(3))	Dii	(f) rect controlling entity	Section (13) co	g) n 512(b) ontrolled tity?
(1)IBEW BUILDING CORPORATION 1400 E NINE MILE ROAD	HOLDING	COMPANY	,	/A	501(C)(2)						Yes	No No
HIGHLAND SPRINGS, VA 230752326 80-0019774												

Cat No 50135Y

(a)		(b)	(c)	(d)	(e)	(f)	(g)	1 4	h)	(i)	1	(j)	(
(a) Name, address, and EIN of related organization		Primary activity		Direct controlling entity	Predominant income(related unrelated, excluded from tax under sections 512-	Share of total income	Share of	Disprop	rtionate tions?	Code V-UB amount in b 20 of Schedule K- (Form 1065	[Gen ox mai pai	ieral or naging rtner?	Perce
					514)			Yes	No	1	Yes	s No	1
												+	
												+	
							-				+		
		1	1				1	1	1				
Identification of Related Organ because it had one or more related						nization ans	wered "Ye	s" on F	orm 9	990, Part I	V, lın	e 34	
		a corporati		st during th	(d) t controlling Ty entity (C o	(e)	(f) Share of total	Share	(g) of end- year assets	-of- Perc	V, lin (h) entage		(ı Section (13) coi
because it had one or more related (a) Name, address, and EIN of	d organizations treated as	c a corporati	(c) Legal	st during th	(d) t controlling Ty entity (C o	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- Perc	(h) entage	s ((I Section 13) cor enti Yes
because it had one or more related (a) Name, address, and EIN of	d organizations treated as	c a corporati	(c) Legal omicile or foreign	st during th	(d) t controlling Ty entity (C o	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- Perc	(h) entage	s ((ı Section (13) cor enti
because it had one or more related (a) Name, address, and EIN of	d organizations treated as	c a corporati	(c) Legal omicile or foreign	st during th	(d) t controlling Ty entity (C o	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- Perc	(h) entage	s ((ı Section (13) cor enti
because it had one or more related (a) Name, address, and EIN of	d organizations treated as	c a corporati	(c) Legal omicile or foreign	st during th	(d) t controlling Ty entity (C o	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- Perc	(h) entage	s ((ı Section (13) cor enti
because it had one or more related (a) Name, address, and EIN of	d organizations treated as	c a corporati	(c) Legal omicile or foreign	st during th	(d) t controlling Ty entity (C o	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- Perc	(h) entage	s ((ı Section (13) cor enti
because it had one or more related (a) Name, address, and EIN of	d organizations treated as	c a corporati	(c) Legal omicile or foreign	st during th	(d) t controlling Ty entity (C o	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- Perc	(h) entage	s ((ı Section (13) cor enti

Schedule R (Form 990) 2019									Pag	je 3
Part V Transactions With Related Organiza	tions. Complete if the organization and	swered "Yes" on I	Form 990, Par	: IV, line 34, 3	5b, or 3	6.				
Note. Complete line 1 if any entity is listed in Parts	II, III, or IV of this schedule								Yes	No
1 During the tax year, did the orgranization engage in a	y of the following transactions with one or r	more related organiz	ations listed in I	Parts II-IV?				П		
a Receipt of (i) interest, (ii) annuities, (iii) royalties,	or (iv) rent from a controlled entity							1a		No
b Gift, grant, or capital contribution to related organi	ation(s)							1 b		No
c Gift, grant, or capital contribution from related orga	nızatıon(s)							1c		No
d Loans or loan guarantees to or for related organiza	ion(s)							1d		No
e 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) .								1i		No
${f j}$ Lease of facilities, equipment, or other assets to rel	ted organization(s)					•		1j		No
k Lease of facilities, equipment, or other assets from	related organization(s)							1k	Yes	
l Performance of services or membership or fundraisi	ig solicitations for related organization(s) .							11		No
m Performance of services or membership or fundraisi								1m		No
n Sharing of facilities, equipment, mailing lists, or oth								1n	Yes	
o Sharing of paid employees with related organizatio	(s)							10	Yes	
p Reimbursement paid to related organization(s) for	expenses						•	1 p	Yes	
q Reimbursement paid by related organization(s) for								1 q		No

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
m	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	Yes	
О	Sharing of paid employees with related organization(s)	10	Yes	
р	Reimbursement paid to related organization(s) for expenses	1 p	Yes	
q	Reimbursement paid by related organization(s) for expenses	1 q		No
r	Other transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s		No
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			
	(5)			

Schedule R (Form 990) 2019

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

- See instructions regarding exclusion															
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)	section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(1) General or managing partner?		(k) Percentage ownership
			514)	Yes	No	<u> </u>		Yes	No		Yes	No			
Schedule R (Form 990) 201												0) 2019			

