- 990 Form

(Rev. January 2020)

**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

20**19** 

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public.

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

Open to Public

Ā	En- 44-	2018 ania-	dar year, or tax year beginning , 2019, and ending			mspection				
<u> </u>				A	7	, 20				
В		applicable:	C Name of organization_IREN_LOCAL_UNION_NO. 596		_	eyer identification number				
닏		ൻമാളം	Doing business as			341809				
$\Box$	<b>Мате</b> с	_		Room/suite E Telephone number						
	initial re		1001 NORTH 12TH STREET	<del></del>	(304)	622-0151				
	Final ret	um/terminated	City or town, state or province, country, and ZIP or foreign postal code							
	Amenda	ed return	CLARKSBURG, WV 26302		Q Gross	receipts \$ 994,712.				
	Applicat	tion pending	F Name and address of principal officer:	H(a) is this a	group return k	or subordinates? 🗌 Yes 🗵 No				
			SHANE FLANAGAN, 1001 NORTH 12TH ST, CLARKSBURG, WV 263	01 H(b) Are all	<b>subord</b> inat	es included? 🔲 Yes 🔲 No				
1	Tax-exe	mpt status:	501(c)(3)	If "No,"	attech e li	st. (see instructions)				
1		× ► N/A		H(c) Group	exemption	number >				
Κ.	Form of	organization: 🗵	Corporation ☐ Trust ☐ Association ☐ Other ►	tion: 1990	O M State	of legal demicile: WV				
Р	art I	Summa	ry							
	1	Briefly des	cribe the organization's mission or most significant activities: COLLE	CTION OF	DUES TO	PROMOTE BETTER				
8			VIRONMENTS AND ADEQUATE PAY							
Š	1		77 TO 1941 INCOME IN	**********						
Activities & Governance	2	Check this	box ▶ ☐ If the organization discontinued its operations or disposed	of more than	n 25% of	its net assets.				
క్ల	3		voting members of the governing body (Part VI, line 1a)		3	5				
4	4		independent voting members of the governing body (Part VI, line 1b)	)		5				
8	5		ber of Individuals employed in calendar year 2019 (Part V, line 2a)		5	12				
Ī	6		ber of volunteers (estimate if necessary)		6	0				
ş	7a		ated business revenue from Part VIII, column (C), line 12		7a	0.				
•	Ь		ted business taxable income from Form 990-T, line 39		7b	0.				
			The basic control is a second training of the	Prior Ye		Current Year				
_	8	Contributio	ons and grants (Part VIII, line 1h)			Odiron Tear				
Revenue	9		and a series of the Admit His of A	1,755.	066 301					
5	10				966,291.					
æ	11			577.	27,479.					
	12		nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		4,473.	942.				
	13		nue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)		9,805.	994,712.				
	14		d similar amounts paid (Part IX, column (A), lines 1-3)	4 (	6,620.	42,367.				
	1		aid to or for members (Part IX, column (A), line 4)							
8	15		ther compensation, employee benefits (Part IX, column (A), lines 5–10)	55	2,248.	554,396.				
—ਵੱ	16a		all fundraising fees (Part IX, column (A), line 11e)	- www.ushe wildingha	موالملحدية أدارة بالمعاطات	Treat de selectories de la constante de la con				
_ Expenses	p_	lotal fund	raising expenses (Part IX, column (D), line 25)	<u> </u>		ANTA ad malle Alexandral dalining and the first mand - Assessment and				
-	17	Other exp	enses (Part IX, column (A), lines 11a-11d, 11f-246 ECETTED		B,657.	470,224.				
	18		nses. Add lines 13-17 (must equal Part IX solumn (A), line 25)	75.7	7,525.	1,066,987.				
	19	Revenue II	ess expenses. Subtract line 18 from line 120		7,720.	-72,275.				
2 2				Reginning of Co						
Assets or Retonate	20		ts (Part X, fine 16) OGDEN, UT		3,347.	2,479,260.				
Net A	21		ities (Fart A, inte 20)		9,066.	32,554.				
			or fund balances. Subtract line 21 from line 20	2,40	4,281.	2,446,706.				
	art II		ire Block							
Ur	der peni	aitles of perjury	, I declare that I have examined this return, including accompanying schedules and stat	tements, and to	he best of	my knowledge and belief, it is				
-	e, cone	at, and complet	te. Declaration of preparer (other than officer) is based on all information of which prepare	er nas any know	reage.					
			the open		5-/	3-2020				
Si	-	Signal	ture of officer	D	ate					
He	re	SHA	NE FERGUSON, FINANCIAL SECRETARY							
		Турес	or print name and title							
D-	id	Print/Type		Date	Check	K) # PTIN				
		Jenni	fer Barill, CPA Humple Tarellet	5-12-20	self-em	ployed 234-27-8195				
	epan	Firm's an		Fin	n's EIN ▶	47-4410104				
US	se On	1V	dress > 3179 Penn Ave #206, PITTSBURGH, PA 15201			104) 906-6334				
Ma	y the 1		this return with the preparer shown above? (see instructions)			Yes No				

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

REV 04/21/20 PRO

Form 990 (2019)

Chack If Schedule O contains a response or note to any line in this Part III   Briefly describe the organization's mission: COLLECTION OF DUSS TO, PROMOTE BETTER WORK ENVIRONMENTS AND ADEQUATE PAY  2 Did the organization undartake any significant program services during the year which were not listed on the prior Form 99 or 990-E27.   If "Yes," describe these new services on Schedule O.  3 Did the organization cease conducting, or make significant changes in how it conducts, any program services services?  If "Yes," describe these changes on Schedule O.  4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(6)(9) and 501(6)(9) organizations are required to report the amount of grents and allocations to other the total expenses, and revenue, if any, for each program service reported.  4 (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )  BYA  4 (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )  Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )  Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )  Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )	om 99	2019) Pa	1ge <b>2</b>
1 Birefly describe the organization's mission:  COLLECTION OF DUSS. TO PROMOTE BETTER  WORK ENVIRONMENTS AND ADEQUATE PAY.  2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 900 or 990-E27 if "Yes," describe these new services on Schedule O.  3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  If "Yes," describe the organization's program service accomplishments for each of its three largest program services, as measured be expenses. Section 501(c)3 and 501(c)4) and	Part l		
COLLECTION OF DUES TO PROMOTE BETTER WORK ENVIRONMENTS AND ADEQUATE PAY    Did the organization undertake any significant program services during the year which were not listed on the prior Form 930 or 990-E27	1		
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O.  3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  If "Yes," describe these changes on Schedule O.  Describe the organization's program service accomplishments for each of its three largest program services, as measured be expenses. Section 501(c)(d) and 501(c)(d) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.  4a (Code:) (Expenses \$	•	OLLECTION OF DUES TO PROMOTE BETTER	<b>-</b> -
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	4d		
	4e		

Part IV	Checkli	st of	Requ	uired	Schedul	es

			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		×
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		×
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		×
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	×	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		×
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	-	×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			 
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	×	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		×
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		×
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		×
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	×	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		×
14a	Did the organization maintain an office, employees, or agents outside of the United States?	144		<u>×</u>
b	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		×
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		×
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		×
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		×
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		×
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		×
<b>20</b> a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		×
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	<u> </u>	<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	×	

Part I	V 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		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		×
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		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 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_		×
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? If "Yes," complete Schedule L, Part III	27		×
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		×
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		×
С	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		×
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		×
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		×
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		×
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		×
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	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		×
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	×	
Part				
	Check if Schedule O contains a response or note to any line in this Part V	· · ·	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		l

	2013)			raye •
Part	V 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 12		Yes	No
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	X	1.32.
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	7 7 2 1		F - 4
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		×
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	1		
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	en aur z	X
b	If "Yes," enter the name of the foreign country	M		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		S.A.	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		×
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		×
C	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	- JC		-
6а	organization solicit any contributions that were not tax deductible as charitable contributions?	6a_		×
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		PROPERTY.	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			200
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	100		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
9	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	10 38 A	Sec. 10
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	X1 4	<u> </u>
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:	ALT.	1	
a_	Initiation fees and capital contributions included on Part VIII, line 12			17 (0.00
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]		2	No.
11	Section 501(c)(12) organizations. Enter:		1. 2	
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	17	1	
100	against amounts due or received from them.)	12a	<b>10.3.3</b>	NO.
12a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	122	2". AG	<b>X</b>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	03800.47	MAAR: AA
	Note: See the instructions for additional information the organization must report on Schedule O.	37,373	R-32	
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	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	78000M	1.55.281.1
40	If "Yes," see instructions and file Form 4720, Schedule N.	10		
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	Wed.	× em
	n 100, complete i dilli Tred, delleggio di	102.1 - 70.5	13 1000010	Pr 02504 F

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 to response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change				
	Check if Schedule O contains a response or note to any line in this Part VI				×
Section	on A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	<b>1a</b> 5		300	3
	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 on Schedule O.			A L	
b	Enter the number of voting members included on line 1a, above, who are independent .	<b>1b</b> 5		9	
2	Did any officer, director, trustee, or key employee have a family relationship or a business any other officer, director, trustee, or key employee?		2		×
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, trustees, or key employees to a management company or o		3		×
4	Did the organization make any significant changes to its governing documents since the prior For		4		×
5	Did the organization become aware during the year of a significant diversion of the organization	on's assets? .	5		×
6	Did the organization have members or stockholders?		6		×
7a	Did the organization have members, stockholders, or other persons who had the power to one or more members of the governing body?		7a		×
b	Are any governance decisions of the organization reserved to (or subject to approva	l by) members,			İ
	stockholders, or persons other than the governing body?		7b	(000000	X
8	Did the organization contemporaneously document the meetings held or written actions ur	ndertaken during			
_	the year by the following:		-		
a	The governing body?		8a 8b	×	$\vdash$
р 9	Each committee with authority to act on behalf of the governing body?		OD		$\vdash$
_	the organization's mailing address? If "Yes," provide the names and addresses on Schedule	0	9	1 - 1	×
Secti	on B. Policies (This Section B requests information about policies not required by the	e internal Reven	ue C	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a	163	×
b	If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exemption of the control of t		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body bef		11a	×	$\vdash$
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990				E. 12
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	×	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	ve rise to conflicts?	12b	×	
c	Did the organization regularly and consistently monitor and enforce compliance with the describe in Schedule O how this was done	policy? If "Yes,"	12c	×	
13	Did the organization have a written whistleblower policy?		13	×	
14	Did the organization have a written document retention and destruction policy?		14	×	
15	Did the process for determining compensation of the following persons include a review independent persons, comparability data, and contemporaneous substantiation of the deliberation				
а	The organization's CEO, Executive Director, or top management official		15a	×	
b	Other officers or key employees of the organization		15b	×	
16a	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 sim	ilar arrangement			
	with a taxable entity during the year?		16a		×
b	If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps organization's exempt status with respect to such arrangements?	to safeguard the			
Secti	on C. Disclosure		16b	<u></u>	Ш
17	List the states with which a copy of this Form 990 is required to be filed	<del>.</del>	-		
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable	e) 990 and 990-			
10	(3)s only) available for public inspection. Indicate how you made these available. Check all that Own website   Another's website   Upon request   Other (explain on Section 1024-A, in applicable).	at apply.	. ,060		JU 1(U)
19	Describe on Schedule O whether (and if so, how) the organization made its governing doc and financial statements available to the public during the tax year.	uments, conflict o	f inte	rest p	olicy,
20	State the name, address, and telephone number of the person who possesses the organization of the person of the person who possesses the organization of the person		cords	<b>•</b>	

Pan	۵	7
ray	8	

•	<u>,                                     </u>								_
Part VII	Compensation of Officers, Directors, Trustees, Key Employees Independent Contractors	s, Highes	t Com	pens	ated	Emp	loyee	s, an	(
	Check if Schedule O contains a response or note to any line in this Pa	art VII						. [	- =
Castian A	Officers Directors Trustees Key Employees and Highest Co	omnonco	tod En	anlow	1000	-			Τ

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

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

☐ Check this box if neither the organization no	r any relate	d org	aniz	atic	n c	ompe	ensa	ted any current	officer, director,	or trustee.
(A) Name and title	(B) Average hours	box,	unles er and	Pos neck ss pe	rson Irect	e than o	n an	(D)  Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) SHANE FLANAGAN	6.00		Ĭ							
PRESIDENT		ļ		×		<u> </u>	_	5,059.	0.	0.
(2) CHAD DORSEY VICE-PRESIDENT	6.00			×				0.	0.	0.
(3) DAVID FRIEND TREASURER	6.00			×				2,380.	0.	0.
(4) BRYCE REYNOLDS RECORDING SECRETARY	6.00			×				0.	0.	0.
(5) SHANE FERGUSON FIN. SEC./BUS. MANG	40.00			×		×		115,566.	0.	0.
(6)										
(7)				,						
(8)										
(9)								-		
(10)								-		
(11)							-			
(12)	<u> </u>									
(13)										
(14)			$\vdash$		$\vdash$	1		-		

Part	VII Section A. Officers, Directors,	Trustees,	Key I	Em	plo	yee	s, an	d H	lighest Compe	nsated	Emplo	yees (	ontir	nued)
	(A) Name and title	(B) Average hours per week	box,	unles er and	Pos neck ss pe	erson	e than o is both or/trust	n an	(D)  Reportable compensation from the	(E) Report compens from rel	able sation	(F) Estimated amoun of other compensation		
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organiza (W-2/1099	ations	fr	om the zation	and
(15)														
(16)			ļ		-	-								
(17)														
(18)														
(19)											_			
(20)														-
(21)														
(22)													-	
(23)										_				
(24)														
(25)														
1b	Subtotal		٠	•	•			<b>&gt;</b>	123,005.		0.			0.
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Section		•	:		 	<b>&gt;</b>	123,005.		0.			0.
2	Total number of individuals (including bur reportable compensation from the organ	t not limited	d to th	nose	e lis	ted	above	e) w		e than \$1	00,000	of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete	officer, dire										3	Yes	No 
4	For any individual listed on line 1a, is the organization and related organizations individual	e sum of re greater th	porta an \$	ble 150,	con ,000	npe )? <i>I</i>	nsatio	on a s,"	and other compe	nsation fr	om the	,		×
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue co	ompe	nsa	tion	fro	m any	/ un	related organiza				-	×
Secti	on B. Independent Contractors	· · · · · · · · · · · · · · · · · · ·												
1	Complete this table for your five high compensation from the organization. Rep													
	(A) Name and business add	iress							(B) Description of ser	vices	,	(C) Compens	ation	
	Total number of independent contractor	ors (includi	na hi	ıt n	not	limi	ted to	th	nose listed above	re) who				
	received more than \$100,000 of compens							- 11	0	-, 17110				

Part	VIII	Statement of Rev Check if Schedule			esnor	se or note to an	v line in this Pa	art VIII		
		Onder in Contraction	0 00	maino a r	<u> </u>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts ts	1a	Federated campaig	ns .		1a	1				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues			1b					
Ω E	С	Fundraising events			1c					
ifts r A	d	Related organizatio	ns .		1d					
ia Bia	е	Government grants	(conf	tributions)	1e					
Sin	f	All other contribution	ns, gi	fts, grants,						
utic ie		and similar amounts no	ot incl	uded above	1f					
g P	g	Noncash contribution						ļ		
ont nd		lines 1a-1f			1g	\$				
S E	h	Total. Add lines 1a-	<u>-1f .</u>			<u> ▶</u>				
4						Business Code				
Program Service Revenue	2a	ASSESSMENTS				900099	790,327.	790,327.	0.	0.
en ue	b	DUES				900099	175,964.	175,964.	0.	0.
gram Sen Revenue	C .									
lrar Rev	d							***		-
rog I	e	All alban mus ann an								· · · · · · · · · · · · · · · · · · ·
٥	f	All other program se					966,291.			
	9	Total, Add lines 2:4-					900,291.	1 1 4 7 2	lar (ni	
	3	Investment income other similar amoun					27,479.	27,479.	٥.	0.
	4	Income from investr					21,413.	21,413.	0.	<u> </u>
	5				•	ona proceeds				
		noyanies	<u> </u>	(i) Rea		(ii) Personal				
	6a	Gross rents	6a	(7:11	-	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	ь	Less: rental expenses	6b	<u> </u>						
	C	Rental income or (loss)								
	ď	Net rental income of		s)						
	7a	Gross amount from		(i) Secur		(ii) Other				
	14	sales of assets								
		other than inventory	7a						ļ	
9	ь	Less: cost or other basis					1			
enne		and sales expenses .	7b	l			j			
	С	Gain or (loss)	7c							
F	ď	Net gain or (loss)				<u>►</u>				
Other Rev	8a	Gross income fro		ındraising						
0		events (not including								
		of contributions re			_					
		1c). See Part IV, line			8a					
	b	Less: direct expens			8b					-
	C	Net income or (loss	•		ig eve	ents ▶				
	9a	Gross income activities. See Part			00					
	ь	Less: direct expens			9a 9b					
	C	Net income or (loss			$\overline{}$	es <b>&gt;</b>				
		Gross sales of in			Cuviu	<del>63 •</del>				
	IVA	returns and allowar		ory, less	10a					1
	ь	Less: cost of goods			10b		1			
	c	Net income or (loss								<u> </u>
s			,			Business Code			···	
, o	11a	SALE OF LOGO	SUP	PLIES		900099	170.	170.	0.	0.
Miscellaneous Revenue	ь	OTHER				900099	772.	772.	ő.	0.
	С									
<u>း</u>	d	All other revenue								
≥	е	Total. Add lines 11a	<u>a–11</u> 0	d		>	942.			
	12	Total revenue. See	instr	ructions		<del>•</del>	994,712.	994,712.	0.	0

## Form 990 (2019) Part IX Statement of Functional Expenses

Statement of Functional Expenses								
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).								
Check if Schedule O contains a response or note to any line in this Part IX								
Do not include amounts reported on lines 6b, 7b, 8b. 9b. and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				

	t include amounts reported on lines 6b, 7b, , 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 .	42,367.	. "		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	123,005.		723-126 FA GARAGE	BANKER LATERATE REF
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	123,003.			
7	Other salaries and wages	256,126.			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	56,976.			
9	Other employee benefits	85,552.			
10	Payroll taxes	32,737.			
11	Fees for services (nonemployees):				
а	Management				
b	Legal	553.			
C	Accounting	11,904.			
d	Lobbying		TO ANY DEFINISHENCE THAT A PER .	pers description of approx	
e	Professional fundraising services. See Part IV, line 17	0.500	Mary Mary Control of the Control of	THE WORK TO SERVE THE SERV	
f	Investment management fees	8,598.			
g	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	1,500.			<del></del>
13	Office expenses	22,191.			
14	Information technology	1,765.			
15	Royalties				
16	_Occupancy	28,853.			
17	Travel	17,259.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	51,839.			
20	Interest				
21	Payments to affiliates	71,954.		_	·
22	Depreciation, depletion, and amortization .	21,216.	<u> </u>		
23	Insurance	7,164.	ME SENT PROCESSOR SUPER NA	AND THE REST OF SECURITY AND	PATE SON ECONO
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column				
_	(A) amount, list line 24e expenses on Schedule O.)	A. T. M. T.	医哪点肾管点面具侧侧侧侧	一种工作性的。12. 45 do	WHAT WAR MANY
a	PER CAPITA TAX	161,162.		<del> </del>	
b	ADMINISTRATIVE	29,006. 19,522.			
c d	WEBSITE PROMOTIONAL ITEMS	7,369.		-	
e	All other expenses	8,369.	-		
25	Total functional expenses. Add lines 1 through 24e	1,066,987.			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				
	•	REV 04/21/20 PRO			Form <b>990</b> (2019)

Part X Balance Sheet

		Check if Schedule O contains a response or	note to any line in this Pa	rt X		🗆
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		184,315.	1	215,927.
	2	Savings and temporary cash investments		1,464,406.	2	1,265,330.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any current of	or former officer, director,			
		trustee, key employee, creator or founder, subst		in more in a stranger to the	1	เลาการแบบ เลาการ เการ์ เการ์ เการ์ เการ์ เการ์
		controlled entity or family member of any of thes		5		
	6	Loans and other receivables from other disqua under section 4958(f)(1)), and persons described		productive and the second	6	Marking to the state of the sta
2	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
¥	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other		A TOP OF THE PARTY	1	E STORY OF THE STORY
		basis, Complete Part VI of Schedule D		्र केर्नावित्वस्थाति स्वीति क्षेत्रस्थाति । भारतिस्थानितिस्या स्थानिति वित्वस्थानिति स्थानिति		The Kind of China
	b	Less: accumulated depreciation	<b>10b</b> 565,958.	133,159.	10c	120,363.
	11	Investments—publicly traded securities		646,686.	11	877,640.
	12	Investments—other securities. See Part IV, line 1			12	
	13	Investments-program-related. See Part IV, line			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		4,781.	15	
	16	Total assets. Add lines 1 through 15 (must equa		2,433,347.	16	2,479,260.
	17	Accounts payable and accrued expenses		29,066.	17	32,554.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete I		FOR BUT THE SAFETY OF THE SECOND SECONDS	21	SAF TENNE TO AND LOCATION
Liabilities	22	Loans and other payables to any current or		A STATE OF THE STA		Paral of the same
<u>≣</u>		trustee, key employee, creator or founder, subst controlled entity or family member of any of thes		margo St. Scillarda Barret R.	22	Charles and Aller A
Ē	23	Secured mortgages and notes payable to unrela	=		23	
_	24	Unsecured notes and loans payable to unrelated	•		24	
	25	Other liabilities (including federal income tax,	*	-	<del>-</del>	
	23	parties, and other liabilities not included on lines				
		of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		29,066.	26	32,554.
S		Organizations that follow FASB ASC 958, che	ck here ▶ □	10 60 FB	3436	10000000000000000000000000000000000000
ည္		and complete lines 27, 28, 32, and 33.	_	The second second	2	
alai	27	Net assets without donor restrictions			27	
8	28	Net assets with donor restrictions			28	
5		Organizations that do not follow FASB ASC 9	58, check here ▶ 🗵	THE PROPERTY OF THE PARTY OF TH		
Ē		and complete lines 29 through 33.				20 To 1
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds			29	
Set	30	Paid-in or capital surplus, or land, building, or ed	• •		30	
As	31	Retained earnings, endowment, accumulated in		2,404,281.	31	2,446,706.
<u>e</u>	32			2,404,281.	32	2,446,706.
z	33	Total liabilities and net assets/fund balances .	<u> </u>	2,433,347.	33	2,479,260.

Page	1	2

OITH 9	, (2019)			rag	Je 12
Par	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	9:	94,7	12.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,0	66,9	87.
3	Revenue less expenses. Subtract line 2 from line 1	3		72,2	75.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,4	04,2	81.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	2,3	32,0	06.
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>×</u>
				Yes	No
1	Accounting method used to prepare the Form 990:  Cash Cash Counting Method used to prepare the Form 990:  Cash Cash Cash Cash Cash Cash Cash Cash				
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain in			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		×
	If "Yes," check a box below to indicate whether the financial statements for the year were cor	npiled or			
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	D.Cottonia
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	· · · · · · · · · · · · · · · · · · ·			,	
	the audit, review, or compilation of its financial statements and selection of an independent accounts		2c	×	0.0001369
	If the organization changed either its oversight process or selection process during the tax year, e. Schedule O.	kplain on			
20	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in the	200239	841.254	24771137
Jä	Single Audit Act and OMB Circular A-133?		3a		×
b		lergo the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a		3b		
				000	

#### SCHEDULE C (Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

୭⋒**4** 

OMB No 1545-0047
2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

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

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

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

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

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

Name o	of organization			Employer ide	ntification number
IBEW	LOCAL UNION NO.			55-0341	
Part	-A Complete if the	e organization is exempt unde	er section 501(c	c) or is a section 527	organization.
1 2	definition of "political can Political campaign activit	y expenditures (see instructions) .		· · · · · · · · • ·	t IV. (see instructions for
3		cal campaign activities (see instruc			
Part		e organization is exempt und			<u> </u>
1	_	excise tax incurred by the organiza excise tax incurred by organization			ø
2 3		ed a section 4955 tax, did it file For			Yes No
4a b					Yes No
Part	-C Complete if the	e organization is exempt unde	er section 501(d	c), except section 50	1(c)(3).
1	activities	ly expended by the filing organiz			\$
2	527 exempt function acti	filing organization's funds contributies			B
3	line 17b	expenditures. Add lines 1 and 2			<b>3</b>
5	Enter the names, address organization made payme the amount of political co	ses and employer identification nur ents. For each organization listed, on ontributions received that were pro- fund or a political action committed	nber (EIN) of all se enter the amount property and directly	ection 527 political orgar paid from the filing orgar delivered to a separate	nization's funds. Also enter political organization, such
	(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)					

	(						
Pa	rt II-A	Complete if the organiza section 501(h)).	tion is exempt u	inder section 50	01(c)(3) and filed	l Form 5768 (ele	ection under
A	Check ▶	if the filing organization be address, EIN, expenses, a				iated group memb	per's name,
В	Check ▶	if the filing organization ch	ecked box A and "	limited control" pr	ovisions apply.		
	-	Limits on L	obbying Expendite	ıres		(a) Filing	(b) Affiliated
		(The term "expenditures"			)	organization's totals	group totals
1	a Total le	obbying expenditures to influe	nce public opinion	(grassroots lobbyi	ng)		
	<b>b</b> Total le	obbying expenditures to influe	nce a legislative bo	dy (direct lobbying	9)		
		obbying expenditures (add line	-				
		exempt purpose expenditures	•		· · · · · ·		
		exempt purpose expenditures (		d)			-
		ing nontaxable amount. Ent					
	If the a	mount on line 1e, column (a) or (b	) is: The lobbying	nontaxable amoun	t is:		The state of the s
		er \$500,000		nount on line 1e.			and a second
	1	500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000.	2 2 2	A ST STATE OF THE PARTY OF THE
		,000,000 but not over \$1,500,000		10% of the excess		The state of	
		,500,000 but not over \$17,000,000		5% of the excess o			
	_	7,000,000	\$1,000,000.				The second of
		roots nontaxable amount (ente					
	_	act line 1g from line 1a. If zero	•				
		act line 1f from line 1c. If zero o					,
		e is an amount other than z		1h or line 1i, did	I the organization	file Form 4720	
	-	ng section 4911 tax for this ye				•	🗌 Yes 🔲 No
	(Som	ne organizations that made a	-Year Averaging I section 501(h) ele the separate instr	ection do not hav	e to complete all	of the five colum	ns below.
		Lobby	ring Expenditures	During 4-Year Av	veraging Period		
	Cale	endar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) Total
2	a Lobby	ing nontaxable amount	`				
		ing ceiling amount of line 2a, column (e))				Comment of the second	
	c Total I	obbying expenditures					
	d Grassi	roots nontaxable amount					
		roots ceiling amount of line 2d, column (e))			THE WATER		
	f Grassi	roots lobbying expenditures					

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	iled	Form	57 <del>6</del> 8		-
For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(6	a)		(b)	
	iption of the lobbying activity.	Yes	No	Aı	nount	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:		A Control of the Cont			
а	Volunteers?			下 菜	***	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			-	14	
C	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?		3.07 360			
j	Total. Add lines 1c through 1i	2.2	X,2%	* Programme		E + 200
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	14.4	F345. 6	8 20	44	
b	If "Yes," enter the amount of any tax incurred under section 4912	100				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .	K THE	TT-	45 .7		uter ecreel
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	\		1744	ar b. 1 H	- A
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).	)(၁), (	or se	ction	,	
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		•	1	×	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		×
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the		_			×
	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Ol answered "Yes."		Part		ine 3	, is
1	Dues, assessments and similar amounts from members	•	1	ļ		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of			•	
а	Current year	•	2a			
þ	Carryover from last year	•	2b	<u> </u>		
	Total	<u></u>	2c			
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb	the	3	-		
	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Par				1		
Provid	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro instructions); and Part II-B, line 1. Also, complete this part for any additional information.	up lis	t); Pa	rt II-A, I	ines 1	and
			· <b></b>			
:						
	. ,		·			
			·			

Schedule C (For	m 990 or 990-EZ) 2019	Page <b>4</b>
Part IV	Supplemental Information (continued)	
	•••••••••••••••••••••••••••••••••••••••	
<b></b>		
	•	
		•

#### SCHEDULE D (Form 990)

**Supplemental Financial Statements** 

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

▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047 2019

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

**Employer identification number** 

Name of the organization IBEW LOCAL UNION NO. 596 55-0341809 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . . . . . . 1 2 Aggregate value of contributions to (during year) . 3 Aggregate value of grants from (during year) . . Aggregate value at end of year . . . . . . . 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . . Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b 2c Number of conservation easements on a certified historic structure included in (a) . . . . Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ☐ Yes ☐ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: 

**b** Assets included in Form 990, Part X . . . . .

Pag	е	2

Part	Organizations Maintaining	Collections of A	Art, Hist	orical T	reasures,	or Otl	her Similar A	ssets (cor	tinued)
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and oth	ner recor	ds, check	any of the	e follow	ing that make	significant	use of its
а	☐ Public exhibition		ď	_ Loan c	or exchange	e progra	am		
b	☐ Scholarly research		e	Other					
С	☐ Preservation for future generations								
4	Provide a description of the organizat XIII.	ion's collections a	nd expla	in how th	ey further	the org	anization's exe	mpt purpos	se in Part
5	During the year, did the organization	solicit or receive of	donation	s of art, h	nistorical tre	easures	s, or other simi	lar	
	assets to be sold to raise funds rather								i □ No
Part									
	Complete if the organization 990, Part X, line 21.	answered "Yes"	on For	m 990, P	art IV, line	9, or 1	reported an a	mount on	Form 
18	Is the organization an agent, trustee, included on Form 990, Part X?								i □ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	te the fo	llowing ta	ble:		<b>-</b>		
							, A	\mount	
С	Beginning balance					1c	+		
d	Additions during the year					1d			
е .	Distributions during the year					1e			
f	Ending balance					1f	L.		
2a	Did the organization include an amour								
	If "Yes," explain the arrangement in Pa	art XIII. Check here	if the ex	planation	has been	provide	ed on Part XIII .	<u> </u>	
Par	V Endowment Funds.					4.0			
	Complete if the organization	1		1	_				<del></del>
_		(a) Current year	(b) Pro	or year	(c) Two year	s back	(d) Three years bad	ck (e) Four y	rears back
1a	Beginning of year balance	<u></u>							<del></del>
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of t		d balanc	e (line 1g,	, column (a)	)) held a	as:		
а	Board designated or quasi-endowmer		%						
b	Permanent endowment ▶	%							
C	Term endowment ▶%								
	The percentages on lines 2a, 2b, and	•							
3a	Are there endowment funds not in the organization by:	possession of the	e organi	zation tha	t are held	and ad	ministered for t		res No
	(i) Unrelated organizations							3a(i)	100 110
	illia a di							3a(ii)	<del></del>
ь	If "Yes" on line 3a(ii), are the related or							3b	-
4	Describe in Part XIII the intended uses	-	•					_ <u> </u>	
Pari			ii 3 Chac	WITHCHE IC					
ıaı	Complete if the organization		on For	m 990 P	art IV line	11a !	See Form 990	Part X li	ne 10
	Description of property	(a) Cost or oth			r other basis		Accumulated	(d) Book	
	Description of property	(investme		(ot	her)		preciation		
1a	Land		0.		26,452.				6,452.
b	Buildings			54	44,402.		463,660.	8	0,742.
c	Leasehold improvements								
đ	Equipment			11	15,467.		102,298.	1	3,169.
е	Other	·	20.5 ::		(D) " 15	\_ \ <u></u>			0 262
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 99	iu, Part )	k, çolumn	( <i>B), line</i> 10	<i>IC.)</i>	<u> </u>	12	0,363.

Part VII	Investments—Other Securities.	000 D-+ IV lin	- 11h C F	000 Part V line 10
-	Complete if the organization answered "Yes" on For			
	(a) Description of security or category (including name of security)	(b) Book value	, , ,	hod of valuation: -of-year market value
(1) Financial				
	neld equity interests			
(3) Other				
<u>(A)</u>				
				<del> </del>
		-		<u> </u>
		-		· <del></del>
(G)		-	-	
(H)	mn (b) must equal Form 990, Part X, col. (B) line 12.) . •	-		
Part VIII	Investments—Program Related.	<u>l</u>		<u></u>
T GIT VIII	Complete if the organization answered "Yes" on Fo	rm 990. Part IV. lin	e 11c. See Form	990. Part X. line 13.
	(a) Description of investment	(b) Book value	(c) Met	hod of valuation
(4)	····		Cost or end	-of-year market value
<u>(1)</u> (2)				
(3)				
(4)				<u></u>
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colu	mn (b) must equal Form 990, Part X, col. (B) line 13.) .			
Part IX	Other Assets.  Complete if the organization answered "Yes" on For	rm 990. Part IV. lin	e 11d. See Form	990. Part X. line 15.
	(a) Description	,		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	(1) 15 000 5 17 1 (5) (1)			
Part X	mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.	<u> </u>	<u> ▶</u>	<u> </u>
	Complete if the organization answered "Yes" on Folline 25.	rm 990, Part IV, lin	e 11e or 11f. See	e Form 990, Part X,
1.	(a) Description of liability			(b) Book value
(1) Federal in	ncome taxes			
(2)				
(3)				
(4)				
(5)				· <u>-</u> .
(6)			<del> </del>	
<u>(7)</u>		<u> </u>		
(8)		<del></del>	<del></del>	
(9)	mn (h) must oqual Form 000 Port V cal (D) line 05 \			
	mn (b) must equal Form 990, Part X, col. (B) line 25.) runcertain tax positions. In Part XIII, provide the text of the footn			ente that reports the
	s liability for uncertain tax positions under FASB ASC 740. Chec			

Part	- ·		Return	•
	Complete if the organization answered "Yes" on Form 990,			
1	Total revenue, gains, and other support per audited financial statements		1	1,109,412.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	114 700		
a	Net unrealized gains (losses) on investments	2a 114,700.	-	
b	Donated services and use of facilities	<del></del>	- 1	
٦ 0	Recoveries of prior year grants	2c	1 1	
d	Other (Describe in Part XIII.)		2е	114,700.
е 3	Subtract line 2e from line 1		3	994,712.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		<del>                                     </del>	994,712.
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-
ь	Other (Describe in Part XIII.)	4b	1	
	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5	994,712.
Part			er Retu	
	Complete if the organization answered "Yes" on Form 990,			
1	Total expenses and losses per audited financial statements		1	1,066,987.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			,
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b	]	
C	Other losses	2c	]	
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	w-
3	Subtract line <b>2e</b> from line <b>1</b>		3	1,066,987.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	•		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1 1	
b	Other (Describe in Part XIII.)			
	Add lines 4a and 4b		4c	1 066 007
5 00%	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.	ie 16.)	5	1,066,987.
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part			
				<b></b>
			<del>-</del>	
		·····		
		·		

Schedule D (For	orm 990) 2019	Page <b>5</b>
Part XIII	Supplemental Information (continued)	
	•	
	•	
		•
	<u>'</u>	
		·
		•

# SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 880, Part IV, line 21 or 22.

▶ Go to www.irs.gov/Form990 for the latest information. ► Attach to Form 990.

2019	Open to Publ

n to Publi

OMB No 1545-0047

Employer identification number

IBEW LOCAL UNION NO. 596	Crante and	Accietance				0-66	55-0341809
1 Does the organization maintain records to substantiate the arther selection criteria used to award the grants or assistance?	records to subs	stantiate the amou	nt of the grants or	assistance, the g	rantees' eligibility fo	mount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	e, and Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ation's procedur	es for monitoring	the use of grant fu	nds in the United	States.	ware acitetinepro edt	ored "Yee" on Form 990
3	recipient that	resuc Organizate received more than	an \$5,000. Part	I can be duplica	ted if additional s	pace is needed.	Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.
1 (a) Name and address of organization or government	<b>(b)</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) Description of noncash assistance	(h) Purpose of grant or assistance
(1) J. WILSON MEMORIAL TEXTBOOK FUND CLARKSBURG WV 26301 N,	N/A		36,184.				CONTRIBUTION
(2)							
(6)							
(4)		-					
(9)							
(9)							
æ							
(8)		-					
(6)	,						
(10)	:						
(11)							
(12)		-					
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	01(c)(3) and gov	vernment organiza	tions listed in the l	ine 1 table			<b>A</b> . <b>A</b>
Par	e the Instruction	s for Form 990.					Schedule I (Form 990) (2019)

REV 04/21/20 PRO

**Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
-						a can access consequently and access consequently access consequen
83						
တ						
4						
S.				,		
9			,			
7	-					
Part IV	Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	the information r	equired in Part I, lin	e 2; Part III, columr	ı (b); and any other additi	
				, 1		
				, 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

Schedule 1 (Form 990) (2019)

REV (4/21/20 PRO

BAA

#### **SCHEDULE 0** (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

2019

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

**Employer identification number** 

IBEW LOCAL UNION NO. 596	55-0341809
Pt VI, Line 11b: THE FORM 990 IS PREPARED BY THE ORGANIZA	ATION'S PUBLIC ACCOUNTING
FIRM AND REVIEWED BY THE ORGANIZATION'S TOP MANAGEMENT A	ND FINANCIAL PERSONNEL
AS WELL AS APPROVED BY THE BOARD OF DIRECTORS.	
Pt VI, Line 12c: EACH BOARD MEMBER IS ASKED TO COMPLETE	A FORM FOR DISCLOSURE
ON AN ANNUAL BASIS.	
Pt VI, Line 15b: THE COMPENSATION OF THE BUSINESS MANAGE	R IS DETERMINED BY THE
OFFICERS OF THE BOARD THROUGH NEGOTIATIONS.	
Pt VI, Line 19: THE ORGANIZATION DOES NOT MAKE ITS GOVER	NING DOCUMENTS, CONFLICT
OF INTEREST, AND/OR FINANCIAL STATEMENTS AVAILABLE TO TH	E PUBLIC. THEY ARE AVAILABLE
IF SOMEONE CONTACTS THE OFFICE DIRECTLY. ALL REQUIRED D	ISCLOSURES ARE REPORTED
IN THE ORGANIZATION'S FORM 990 WHICH IS MADE FREELY AVAI	LABLE TO PUBLIC INSPECTION.
Pt XII, Line 1: MODIFIED CASH	
Pt VI, Line 15a: REVIEW AND APPROVAL BY BOARD OF DIRECTO	RS.