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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

_									
<u>A</u> _	For the	e 2012 cale	endar year, or tax year beginning July 1 , 2012, and endi	ng Ju	ne 30	, 20 13			
В	Check r	f applicable [.]	C Name of organization IBEW Local 300		D Emplo	yer identification n	umber		
	Address	change	Doing Business As		03-0102265				
	Name c	hange	Number and street (or P.O. box if mail is not delivered to street address) Room/s	uite	E Teleph	one number			
	Initial re	tum	3 Gregory Drive			802-864-5865			
	Termina	ited	City, town or post office, state, and ZIP code						
$\overline{\Box}$		ed return	South Burlington, Vermont 05403		G Gross	receipts \$	948,809		
H		tion pending	F Name and address of principal officer Mr. Jeffrey Wimette	₩/a\ le this	4	m for affiliates?			
ч	Арриса	non pending	3 Gregory Drive, South Burlington, VT 05403			included? Yes			
_	T					a list (see instruction			
÷		mpt status	501(c)(3)			•	,,,,,		
7	Website					on number ►			
K			Corporation Trust Association ✓ Other Local Union L Year of form	ation.	M Stat	te of legal domicile	<u> </u>		
	art I	Summ							
	1	Briefly de	escribe the organization's mission or most significant activities: To or	ganize worke	rs and to	secure improve	d wages,		
ø		hours, wo	orking conditions and other economic advantages through organizing, nec	otiations and	d collecti	ve bargaining.			
Governance	ŀ								
Ë									
ĕ	2	Check th	is box ▶☐ if the organization discontinued its operations or disposed	of more tha	n 25% o	f its net assets.			
Ō	3	Number	of voting members of the governing body (Part VI, line 1a)		. 3		11		
S	4	Number (of independent voting members of the governing body (Part VI, line 1b)	. 4		0		
Activities &	5	Total nun	nber of individuals employed in calendar year 2012 (Part V, line 2a)		. 5		12		
댫	6		nber of volunteers (estimate if necessary)		. 6		0		
ĕ	7a		elated business revenue from Part VIII, column (C), line 12		. 7a		0		
	b		ated business taxable income from Form 990-T, line 34		7b				
		NOC OFFICE	ated business taxable income from 1 cm coo 1, into 04	Prior Y		Current Ye			
	8	Contribut	tions and grants (Part VIII, line 1h)		(_			
e					·	6,771			
le le	9	-	service revenue (Part VIII, line 2g)	871,452		877,254			
Revenue	10		nt income (Part VIII, column (A), lines 3, 4, and 7d)		668	+	1,739		
	11		renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		45,129	 	59,650		
	12		enue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)		917,249	9	945,414		
	13		nd similar amounts paid (Part IX, column (A), lines 1-3))	0		
	14		paid to or for members (Part IX, column (A), line 4))	0		
S	15	Salaries, o	other compensation, employee benefits (Part 12, column (A), lines 5-10)		452,533	3	51 <u>5,707</u>		
JSC	16a	Professio	nal fundraising fees (Path X column (A), line 11e))	0		
Expenses	b	Total fund	draising expenses (Part IX, column (P) Vine 25) ►				` . ;		
ú	17	Other exp	penses (Part IX, column (A), Junes 11a-11d 11 F-24e)		403,525	5	408,315		
	18	Total exp	enses. Add lines 13-17 (must equal Part XX column (A), line 25)		856,058	3	924,022		
	19		less expenses. Subtract tine 18 for line 12		61,191		21,392		
<u> </u>			1099	Beginning of C					
Net Assets or Fund Balances	20	Total ass	ets (Part X, line 16)		672,425		693,817		
ASS IB	21		ilities (Part X, line 26)		072,720		000,017		
2 5	22		ts or fund balances. Subtract line 21 from line 20				693,817		
	rt II		ure Block		672,425	<u> </u>	093,017		
							h -1 -4 -4		
			ry, I declare that I have examined this return, including accompanying schedules and state ete. Declaration of preparer (other than officer) is based on all information of which prepare			my knowledge and	Deller, It is		
		1 4				. 3 14			
o:-			The comment			-41-15			
Sig		Signa	ature of officer	U	ate				
He	re	<u> </u>	JUNDOIAL SECRETARY						
		<u> </u>	of ornit name and trile						
Pa	id	Print/Typ		ate	Check		020-		
	epare	r L	Mekak X. Will Vo	1-3-201		nployed (10/3/	1381		
	e Oni		ame Accounting Office of Michael P. Ross	Fin	n's EIN ▶	30-02932	72		
US	e UIII	y	ddress ► 34 Salem Street, Suite 201, Reading, MA 01867		one no	781-942-58			
Ma	the IF		s this return with the preparer shown above? (see instructions)				No No		

Part		m Service Accomplishr			
1	Briefly describe the organiza		ny question in this Part II	l	· · · · <u>L</u>
,			eases and conduct all other	necessary activities to ensure p	roper working
				activities to attract new member	
	Conditions and economic day	diages for the membership	out to curry on organizm	4 doctorios to ataldet from montos	
2	Did the organization underta	ake any significant prograr	n services during the year	r which were not listed on the	
	prior Form 990 or 990-EZ?				☐ Yes ☑ No
	If "Yes," describe these new	services on Schedule O.			
3		e conducting, or make s	ignificant changes in ho	w it conducts, any program	
	services?				☐ Yes ☑ No
	If "Yes," describe these char	-			
4				hree largest program services,	
	expenses. Section 501(c)(3) the total expenses, and reve			the amount of grants and alloc	cations to others,
	the total expenses, and reve	inue, il any, for each progr	am service reported.		
40	(Cada: \/Evnana	no ¢ inclus	ding grants of \$) (Revenue \$	
4a	(Code) (Expense	=5 \$IIICIUI	ulling grants of \$) (Nevelue 4	'
		484888888888888888888888888888888888			
	10 1	Ф	-litf ft	\	
4b	(Code:) (Expense	es \$inclu	ding grants of \$) (Revenue \$)
	(O-d-) \(\sum_{\text{Pinare}}	a a the simple	ding grants of C) (Payonya ¢	·
4c	(Code:) (Expens	es \$inclu	ding grants of \$) (Revenue \$	/
		·			
	011				
4d	Other program services (De (Expenses \$) (Revenue S	\$	
	Total program service exp	including grants of \$) (nevenue :	J	

Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		/
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <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	1	
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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable.	,		, a
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	√	
	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	1	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
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		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
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		1
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		1
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		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		▼
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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		1
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 25	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		1
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 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	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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		1
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	1	
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	/	

Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			П
	Chock in Contradic C Contradic C Contradic C Contradic C Contradic C C Contradic C C C C C C C C C C C C C C C C C C C		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 1		, ,	, , , , , , , , , , , , , , , , , , ,
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			أنتأأ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c	- c ar, y ar,	10 99
Za	Statements, filed for the calendar year ending with or within the year covered by this return 2a 12	***	W 4	. T
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	72.7	g ³ ,	10 mg
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	N	/A
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		,	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4-	ļ	1
L	If "Yes," enter the name of the foreign country: N/A	4a	A. 85	¥ 76 € 5 3
b	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	The st		3 3 5
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<u> </u>	√
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		√
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	N,	/A
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	_		,
h	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		-
b	gifts were not tax deductible?	6b	N	/A
7	Organizations that may receive deductible contributions under section 170(c).	7:08		, , , , , , , , , , , , , , , , , , ,
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		i'a	
	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	N	<u>/A</u> _
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1
đ		و عرب الله	ÇE,	* * * * * * * * * * * * * * * * * * *
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<i>-5.2-1</i> 633 √
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		√
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u>√</u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	, N	/A
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	N	ನ್ನು [/A
9	Sponsoring organizations maintaining donor advised funds.			g 5/5
а	Did the organization make any taxable distributions under section 4966?	9a		√
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<u>√</u>
10	Section 501(c)(7) organizations. Enter:		(,)	
a	Initiation fees and capital contributions included on Part VIII, line 12	, ,, "	-	T. 0 7
b 1	Section 501(c)(12) organizations. Enter:	. '	7	13
a	Gross income from members or shareholders		*	• • •
b	Gross income from other sources (Do not net amounts due or paid to other sources	_ ,]	1	, }
	against amounts due or received from them.)		-	أحجد
2a		12a		✓
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b N/A			}
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		N/A
а	Is the organization licensed to issue qualified health plans in more than one state?	.54		1/1
b	Enter the amount of reserves the organization is required to maintain by the states in which			1
	the organization is licensed to issue qualified health plans	1	- 1	-
C	Enter the amount of reserves on hand			1
4a	pla and organization record any payments for made tanning controls and services	14a		/A:_
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	990 990	(2012)
		LOUD	220	(2012)

Part \	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Scheck if Schedule O contains a response to any question in this Part VI	ee ins	tructi	ons.
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 11	,		-
	If there are material differences in voting rights among members of the governing body, or	, ,		, s
	if the governing body delegated broad authority to an executive committee or similar	; ,	· '	* **
	committee, explain in Schedule O.	,	٠,	**
_	Enter the number of voting members included in line 1a, above, who are independent		7 U	72.
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			ا نعنی
9	any other officer, director, trustee, or key employee?	2		✓
3	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3	i	1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		'
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u> </u>
6	Did the organization have members or stockholders?	6	1	<u> </u>
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	✓	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,		1	
	stockholders, or persons other than the governing body?	7b	•	 ,
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		,	ا مرد براها
	the year by the following:			F
a	The governing body?	8a 8b	1	
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	OD	•	
•	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		✓
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			ļ
	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 filling the form?	11a	_	√ .2
b 120	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		/
12a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		ļ
13	Did the organization have a written whistleblower policy?	13		✓
14	Did the organization have a written document retention and destruction policy?	14	<u> </u>	✓_
15	Did the process for determining compensation of the following persons include a review and approval by		,	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	, 		
а	The organization's CEO, Executive Director, or top management official	15a		1
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 similar arrangement			
100	with a taxable entity during the year?	16a		1
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	<u> </u>		
	organization's exempt status with respect to such arrangements?	16b	<u> </u>	
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed None		(-\(0\)	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section specificable), 100-T (Section specificable), 1	11 301	(C)(J)\$	orny)
	available for public inspection. Indicate how you made these available. Check all that apply.			
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict or	of inte	rest :	oolicv
18	and financial statements available to the public during the tax year.		1	,,
20	State the name, physical address, and telephone number of the person who possesses the books and records	of th	е	
	organization: ► Mr. Jeffrey Wimette, 3 Gregory Drive, South Burlington, VT 05403 (802)864-5865			
		For	m 99 0) (2012)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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 employees."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

Officer this box in ficting, the organization no)	<u></u>				,
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average					than o		Reportable	Reportable	Estimated
Tuno and This	hours per					or/trust		compensation	compensation from	amount of
	week (list any hours for				_			from the	related organizations	other compensation
	related	Individual trustee or director	stitu	Officer	Key employee	ples	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	ct lual	ğ	,	夏	ye cc	~	(W-2/1099-MISC)		organization and related
	line)	Trus	al tr		ě	ğ]		organizations
		i tee	Institutional trustee			Highest compensated employee				
		_	ě			nted				
40										
(1) Timothy Watkins		}		/	/					00.050
President/Assistant Business Manager	<u>. </u>		-	~	 *			93,201	0	30,353
(2) Jeffrey Wimette		ł		١,	١,					
Financial Secretary/Business Manager				✓	1			121,146	0	30,212
(3) Louis Lacroix	ļ	1		١,	ļ					
Executive Board/Unit Chair				✓	ļ		<u> </u>	1,579	0	0
(4) Edward Provost				١.				1	•	
Executive Board/Unit Chair			L	✓	L			1,683	0	56
(5) Glen Johnson	<u> </u>									
Unit Chair				✓			L_	0	0	0
(6) James Cushing]	ŀ							
Executive Board		<u> </u>	<u> </u>	1	L.			0	0	, 0
(7) William Reardon	<u> </u>]								
Unit Chair		L	<u> </u>	✓	L		L	1,579	0	0
(8) Michele Joy										
Unit Chair		<u>l</u> .		✓			✓	0	0	
(9) Marcel Cote		ľ	Π							
Unit Chair	1	1		✓		ļ	İ	2,639	o) o
(10) Maureen Bothfeld										
Recording Secretary	†	1		✓				2,639	o	o
(11) Timothy Labomard			Г		Τ					
Executive Board	†	1		1	1		İ	34,209	o	17,603
(12) James Olszewski				T			\vdash			
Executive Board/Unit Chair	†	1		1			ļ		0	o
(40)			t		\vdash		T			
(13) Tracy Martin Unit Chair	†	1		✓			1		ه ا	0
(14) Andrew Scott			T	Ť	t	 	Ė	1		†
Unit Chair	†	1		1			1	79	ه اد	45
Offic Official				<u> </u>	_		<u>. </u>		· I	Form 990 (2012)

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees	s, ar	nd H	lighes	st C	ompensated E	mployees (con	tınue	d)		_
					(0	2)								
	(A)	(B)				ition			(D)	(E)		(F)	
	Name and title	Average					than one is both		Reportable	Reportable		Estim	ated	
		hours per					or/trust		compensation	compensation fro	m∣	amou		
		week (list any			_			<u> </u>	from	related		oth		
		hours for related	흑물	Stit	Officer	ey e	를	Former	the organization	organizations (W-2/1099-MISC	a	comper		
		organizations	햜	븅	۳	ğ) st c	욕	(W-2/1099-MISC)	(' }	organiz		
		below dotted	역출	<u>a</u>		Key employee	Ĕ				- {	and re		
		line)	Individual trustee or director	Institutional trustee	ŀ	8	9			,		organiz	ations	
			Φ.	166			Highest compensated employee							
(45)		"	ļ <u> </u>	-	-	<u> </u>					+			_
	chael Olson				1		l	/			0			^
Unit Cl	Cial-				┡		┢	<u> </u>	0		╫			0
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	iris Evans				Ť	 		Ť			1			~
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Unit C		†	1		1			1	0		0			0
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(21)														
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(22)		<u> </u>	ļ											
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(23)		ļ								1	ı			
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(24)		_	1											
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(25)		 -	1											
	Sub-total	<u> </u>		i	l	<u> </u>	<u> </u>	_	250.754		0		78,26	
1b	Total from continuation sheets to Part			•	•				258,754		╧		70,20	13
۲. C	Total (add lines 1b and 1c)			-	-	-			258,754				78.26	
d	Total number of individuals (including bu							2) 14			חחח	of	70,20	<u>,,</u>
2	reportable compensation from the organ			1056	3 115	leu	abov	e, w	Mio received in	Ore triair \$100	,000	O1		
	reportable compensation from the organ	izadon -										Ţ,	Yes No	_
3	Did the organization list any former o	fficer, direc	ctor.	or t	rust	ee.	kev	emi	olovee, or high	nest compens	ated	2 3	** 1	٦
•	employee on line 1a? If "Yes," complete	Schedule J	for s	uch	ina	livid	ual	. '				3	1	لب
4	For any individual listed on line 1a, is the							าก ส	and other com	nensation from	1 the	191 25	وَيُرَافِينِهِ الْمِرْزِيْنِ مِنْ	
•	organization and related organizations	areater th	an \$	150	001	n? /	lf "Ye	25 "	complete Sci	nedule J for	such	7.		1
	individual	9.00.01			,							4	1	ائـ
5	Did any person listed on line 1a receive	or accrite c	omne	กรล	- ition	fro	m an	V Hr	related organi	zation or indiv	idual		Ť	٦
3	for services rendered to the organization											5	1	نــ
Section	on B. Independent Contractors				_				· · · · · · · · · · · · · · · · · · ·					_
1	Complete this table for your five highest	compensat	ted in	dep	enc	dent	cont	ract	tors that receiv	ed more than	\$100	,000 of		_
•	compensation from the organization. Re	port compe	ensati	on f	or t	he d	calend	dar	year ending wi	th or within the	e orga	anizatio	n's tax	
	year.													
	(A)	,							(B)			(C)		
	Name and business ad	dress						<u> </u>	Description of	services		Compensa	ition	
								-	- <u> </u>					
								+						
								+						_
								+						_
	Total number of independent contract	ore (reclude	na h		20+	lum	ited 4		hose listed of	ove) who				_
2	received more than \$100,000 of comper								None	,545, 44110				

Form **990** (2012)

Part	VIII	Statement of Revenue				
		Check if Schedule O contains a response to any que	stion in this Part V	10 <u></u>	<u> </u>	<u> D</u>
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns 1a Membership dues 1b Fundraising events 1c Related organizations 1d Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f	6,771	,		
		Business Code				
Program Service Revenue	2a b c d	Dues and Assessments	877,254			
	f	All other program service revenue .				
~	g	Total. Add lines 2a–2f	Q11;LUT			
	3	Investment income (including dividends, interest and other similar amounts)	1,739			
	5	Royalties				
	6a b c	Gross rents	0	= 1		
	7a b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses . Gain or (loss)				
Other Revenue	d 8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18				
횽	b	Less: direct expenses b				
_		Net income or (loss) from fundraising events . ▶ Gross income from gaming activities. See Part IV, line 19	·			
		Less: direct expenses b				
		Net income or (loss) from gaming activities			<u> </u>	
		Gross sales of inventory, less returns and allowances a 2,5	- 1			
	b	Less: cost of goods sold b (2,59				
	⊢ <u>c</u>	Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code	<u>_</u>		-	
	44-					
	11a	Reimb. Shared Costs - Pension Fd	33,612		+	
	b	Reimb. Shares Costs - H&W Fund	18,055 7,983		 	
	d	Reimb. Shared Costs - JATC All other revenue	1,983		<u> </u>	<u> </u>
	e	Total. Add lines 11a-11d	59,650			
	12	Total revenue. See instructions	945,414			

Part IX Statement of Functional Expenses

Section	n 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respon-		in this Part IX .		<u> </u>
	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 governments and organizations in the United States. See Part IV, line 21				Service of the service of
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
_	organizations, and individuals outside the				4 4 4
	United States. See Part IV, lines 15 and 16			国的法法 (图15	
4	Benefits paid to or for members			1.12	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
5	Compensation of current officers, directors,				
	trustees, and key employees	258,754			
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	104,215			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	65,541			
9	Other employee benefits	54,682			
10	Payroll taxes	32,515			
11	Fees for services (non-employees):				
а	Management			<u> </u>	<u>.</u>
b	Legal	45,361			
C	Accounting	2,000			
d	Lobbying		1		
e f	Investment management fees		A. 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1	The Francisco	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	2,395			
13	Office expenses	27,029			
14	Information technology				
15	Royalties				
16	Occupancy	24,596			
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	18,256		 	
20	Interest			 	
21	Payments to affiliates				
22 23	Depreciation, depletion, and amortization	6,064			
	Insurance	5,194			
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.)				
а	Per Capita Tax	242,613			<u> </u>
ь	Automobile Expense	17,520			
С	Telephone Expense	9,632			
d	Contributions & Gifts to Members	7,655			
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	924,022			
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)				

Part X Balance Sheet

1 Cash—non-interest-bearing 13818 1 20,576 20,576 3 2 419,339 3 2 419,339 3 4 Accounts receivable, net 4 Accounts receivable, net 5 Cash and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 5 6 6 6 6 6 6 6 6			Check if Schedule O contains a response to any question in this Part >	<		
2 Savings and temporary cash investments 397,961 2 419,339 3 1 3 3 3 3 3 3 3 3						• •
3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustess, key employees, and highest compensated employees. Complete Part I of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4986(ff)), person described in section 4986(ff)), person described in section 4986(ff)), person described in section 4986(ff)), person described in section 4986(ff)), person described in section 4986(ff)), person described in section 4986(ff)), person described in section 4986(ff)), person described in section 4986(ff)), person described in 4986(ff)), person described in 4986(ff)), person described in 4986(ff), person described in 498		1	Cash-non-interest-bearing	19,818	1	20,676
A Accounts receivable, net 5 Loans and other receivables from current and former officers; directors, trustees, key employees, and highest compensated employees. 5 Complete Part II of Schedule 5 Complete Part		2	· · · · · · · · · · · · · · · · · · ·	397,961	2	419,339
Tustesse, key employees and highest compensated employees. Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(f)), persons described in section 4958(f)(f)), persons described in section 4958(f)(f)), persons described in section 4958(f)(f), persons described in 4958(f), persons de	ı	3	Pledges and grants receivable, net		3	
trustees, key employees, and highest compensated employees. Complete Part II of Schedule I. 6 Loans and other receivables from other disqualified persons (as defined under section 4958(p(II)), persons desorribed in section 4958(p(3)(p), end contributing employers and sponsoring organizations of section 50f(p(g)) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L. 7 Notes and loans receivables, net inventiories for sale or use Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 9 Prepaid expenses 9 Prepai		4	Accounts receivable, net		4	
Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 49590(11)), persons described in section 4959(c)(3)(6), and contributing employers and sponsoring organizations see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepade expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part II of Schedule D 10a 74,963 11 Investments—publicly traded securities 11 Investments—publicly traded securities 12 Investments—publicly traded securities 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 10 Tax-exempt bond liabilities 19 Deferred revenue 20 Tax-exempt bond liabilities or complete Part IV of Schedule D 21 Cans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 20 Tax-exempt bond liabilities on tincluded on lines 17-24). Complete Part X of Schedule D 21 Total Isabilities including federal income tax, payables to related third parties 22 Correlations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34. 29 Permanently restricted net assets 170,584 28 177,381 29 Permanently restricted net assets 170,584 28 177,381 29 Permanently restricted net assets 20 Total Isabilities, Add lines 17 through 25 complete lines 30 through 34. 20 Capital stock or trust principal, or current funds 21 Retained earnings, endowment, accumulated income, or other funds 22 Total Isabilities and the assets of fund balances 20 Total Isabilities and net assets fund balances 21 Total Isabilities and net assets fund balances 22 Total Isabilities and net assets fund balances 23 Total ret assets or fund balances 2		5	·	·~, ~, ~,	,	
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4958(f)(f)), persons described in section 4958(c)(f)(f), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L			·		5	
Sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part I of Schedule L		6				
organizations (see instructions). Complete Part II of Schedule L						
7 Notes and loans receivable, net 3 8 Inventories for sale or use 3 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 9 10a 74,963						
9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part I/ of Schedule D 10a 74,963 b Less: accumulated depreciation 10b 48,151 27,646 10c 26,802 11 Investments—publicly traded securities 11 1 227,000 12 Investments—program-related. See Part IV, line 11 227,000 13 Investments—program-related. See Part IV, line 11 13 13 14 Intangible assets 15 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15	ş		· · · · · · · · · · · · · · · · · · ·			
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b Less: accumulated depreciation 10b 48,161 27,646 10c 26,802 11		IVa	other basis Complete Port VI of Cohedule D			, 'm &
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12		-		21,040		20,802
13 Investments - program-related. See Part IV, line 11 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 672,425 16 693,817 17 Accounts payable and accrued expenses 17 18 Grants payable 18 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties 24 25 Other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 O 26 O O Organizations that follow SFAS 117 (ASC 958), check here 7 and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 170,584 28 177,381 29 Permanently restricted net assets 170,584 28 177,381			· · · · · · · · · · · · · · · · · · ·	227 000		227 000
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16					15	
17		_		672,425	16	693,817
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21 Escrow or custodial account liability. Complete Part IV of Schedule D . 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		19	Deferred revenue		19	
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parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			, ,		24	
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Total liabilities. Add lines 17 through 25					25	
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Complete lines 27 through 29, and lines 33 and 34. 27 31 28 28 29 29 29 29 29 29			Organizations that follow SFAS 117 (ASC 958), check here ▶ 🕜 and			
34 Total liabilities and net assets/fund balances 672,425 34 693,817	Ses					
34 Total liabilities and net assets/fund balances 672,425 34 693,817	a	27	Unrestricted net assets	501,841	27	516,436
34 Total liabilities and net assets/fund balances 672,425 34 693,817	Bal	28	Temporarily restricted net assets	170,584	28	177,381
34 Total liabilities and net assets/fund balances 672,425 34 693,817	ᅙ	29			29	
34 Total liabilities and net assets/fund balances 672,425 34 693,817	r Fur					
34 Total liabilities and net assets/fund balances 672,425 34 693,817	Ş	30	•		30	† <u>'</u>
34 Total liabilities and net assets/fund balances 672,425 34 693,817	sel	1			31	
34 Total liabilities and net assets/fund balances 672,425 34 693,817	As	1	· · · · · · · · · · · · · · · · · · ·		32	
34 Total liabilities and net assets/fund balances 672,425 34 693,817	Vet	33	Total net assets or fund balances	672,425	33	693,817
	_	34	Total liabilities and net assets/fund balances	672,425	34	

2
•

Part	XI Reconciliation of Net Assets			-	
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		94	5,414
2	Total expenses (must equal Part IX, column (A), line 25)	2		92	4,022
3	Revenue less expenses. Subtract line 2 from line 1	3		2	1,392
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	_	67	2,425
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 in Schedule O)	9	•		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	i			
	33, column (B))	10		69	3,817
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		<u></u>	· ·	
				Yes	No
1	Accounting method used to prepare the Form 990: 🖸 Cash 🔲 Accrual 🔲 Other		1	,	, }
	If the organization changed its method of accounting from a prior year or checked "Other," exp	olain in	, s	. (-
	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 comp	olled or			
	reviewed on a separate basis, consolidated basis, or both:		ı ,		-
_	Separate basis Consolidated basis Both consolidated and separate basis		.,		
þ	Were the organization's financial statements audited by an independent accountant?		2b	√	,
	If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	u on a	ř	, ,	
	•		ĩ.		
_	Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	erciaht		<u></u>	
С	of the audit, review, or compilation of its financial statements and selection of an independent account		2c		./
	If the organization changed either its oversight process or selection process during the tax year, ex		20	-1	▼
	Schedule O.	piani iii	*		70
За		forth in			لسسا
Ja	the Single Audit Act and OMB Circular A-133?		3a		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rgo the	-		-
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
-			For	n 990	(2012)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

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

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

	ection 501(c)(4), (5), or (6) orga	inizations [.] Complete Part III.			
Name	of organization			Employer ider	ntification number
IBEW	Local 300				03-0102265
Part		e organization is exempt unde			organization.
1	•	he organization's direct and indire	•		
2	•			<i></i> > \$	
3	Volunteer hours		· · · · · ·		
Dart	I-B Complete if the	e organization is exempt unde	er section 501/	-)(3)	
1		excise tax incurred by the organiza			······································
2		excise tax incurred by organization			
3		ed a section 4955 tax, did it file For			
4a	<u> </u>		•		Yes No
b	If "Yes," describe in Part				
Part	I-C Complete if the	e organization is exempt unde			(c)(3).
1		ly expended by the filing organiz			
2		filing organization's funds contrib			
_		vities			
3		expenditures. Add lines 1 and 2.			
_					
4		n file Form 1120-POL for this year			
5	Enter the names, address	ses and employer identification nur ents. For each organization listed, o	nber (EIN) of all se	ection 527 political organi	zations to which the filing
		ontributions received that were pro-			
	as a separate segregated	fund or a political action committee	ee (PAC). If additio	nal space is needed, prov	ride information in Part IV.
		T		T	Ĭ
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds If none, enter -0	promptly and directly delivered to a separate
					political organization If
					none, enter -0-
(1)					
					
(2)			ļ		
	 				
(3)					
				 	
(4)					
	···				
(5)		<u> </u>	1		
(6)			4	i	I

_			•
Р١	ac	ıe	_

Par	t II-A	Complete if the organization section 501(h)).	on is exempt u	under section 50	1(c)(3) and file	d Form 5768 (ele	ection under
A (Check ►	if the filing organization be name, address, EIN, expe					oup member's
в (Check ▶	☐ if the filing organization cl	necked box A	and "limited conti	rol" provisions	apply.	
			bying Expendit			(a) Filing	(b) Affiliated
		(The term "expenditures" n	neans amounts	paid or incurred.)		organization's totals	group totals
18	Total lo	obbying expenditures to influenc	e public opinion	(grass roots lobbyi	ng)		
ŧ	Total lo	obbying expenditures to influenc	e a legislative bo	ody (direct lobbying)		
(Total lo	obbying expenditures (add lines	1a and 1b) .				
(d Other e	exempt purpose expenditures .					
•		xempt purpose expenditures (ad		•			
1	Lobbyi columr	ng nontaxable amount. Enter	the amount f	rom the following	table in both		
	If the ar	nount on line 1e, column (a) or (b) i	s: The lobbying	nontaxable amount	is:	5.	, ,
		r \$500,000		mount on line 1e.			
	Over \$5	00,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000.		
	Over \$1	,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess of	over \$1,000,000.		٠.
	Over \$1	,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess ov	er \$1,500,000.	, " . " . ".	
	Over \$1	7,000,000	\$1,000,000.				, ,
9	g Grassr	oots nontaxable amount (enter 2	5% of line 1f)				
ı	h Subtra	ct line 1g from line 1a. If zero or	less, enter -0-				
i		ct line 1f from line 1c. If zero or l					
j		e is an amount other than zerong section 4911 tax for this year		1h or line 1i, did			Yes No
		(Some organizations that m	ade a section 5	Period Under Sec 501(h) election do ctions for lines 2a	not have to com		e
		Lobbyin	g Expenditures	During 4-Year Av	eraging Period		
	Cale	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2	a Lobby	ing nontaxable amount					
1		ing ceiling amount of line 2a, column (e))		, ,		e ge	
	c Total le	obbying expenditures					
	d Grassr	roots nontaxable amount					
(roots ceiling amount of line 2d, column (e))			,		
	f Grassi	roots lobbying expenditures					

Part	I-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	า 5768		
For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(6	a)		(b)	
	ption of the lobbying activity.	Yes	No	A	moun	t
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:	1				
a	Volunteers?			13 - 32 () - 13 () 1 - 20 10 13 () 14		
b C	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?	-		100,73		بالشسية
d	Mailings to members, legislators, or the public?		L			
e	Publications, or published or broadcast statements?		-			
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i	15 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ري ري در يي			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	<u>L</u>				
b	If "Yes," enter the amount of any tax incurred under section 4912	1	128,3,70			
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .	7.3				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		<u> </u>	1	م مناسبة التي مناسبة مناسبة التي التي التي التي التي التي التي التي	200
<u>Part</u>		c)(5), (or se	ction		
	501(c)(6).					
_				<u></u>	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	/	l. c
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	Ь	<u></u>
	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," (answered "Yes.")(5), OR (b)	Par	t III-A,	line	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).	s of	# T			
а	Current year		2a			
b	Carryover from last year		2b	<u> </u>		
C	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	ļ		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion c excess does the organization agree to carryover to the reasonable estimate of nondeductible lobe and political expenditure next year?			 -		
5	and political expenditure next year?		5			
Par		<u> </u>	<u> </u>	<u> </u>		
	lete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5	Part	I-A (a	ffiliated	grou	n
	art II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.	, r care	(utoc	grou	P
	~					

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

IBEW Local 300 03-0102265 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) . 3 Aggregate grants from (during year) . . Aggregate value at end of year 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? ☐ Yes ☐ No 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 Part II Conservation Easements. Complete if the organization answered "Yes" to 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 (e.g., recreation or education) Preservation of an 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. Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax vear ► 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 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) 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" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Assets included in Form 990, Part X .

Part	Organizations Maintaining C	collections of A	Art, Hist	orical T	reasures,	or Ot	her Similar A	ssets (continued)
3	Using the organization's acquisition, ac collection items (check all that apply):	cession, and oth	ner recor	ds, chec	k any of the	e follov	ving that are a	significant use of its
а	☐ Public exhibition		d [Loan	or exchang	e proq	rams	
	☐ Scholarly research				-			
	Preservation for future generations			_				
_	Provide a description of the organization	n'e collections a	nd ovnla	in how th	ov further	tha ara	ianization'e eve	mnt nurnose in Part
4	XIII.	n s collections a	nu expia	III HOW U	ley lurther	me org	janization s exe	mpt purpose in Fait
5	During the year, did the organization so	olicit or receive	donations	of art,	historical tr	easure	s, or other simi	lar
	assets to be sold to raise funds rather th							
Part	 							
_ı_aı_ı	line 9, or reported an amount				umzanom e	2110110	.00 100 101	o 000, . a,
	Is the organization an agent, trustee, or	ustadian ar ath	ar interm	odion, fo	r contribut	ione or	other accete r	not
1a	included on Form 990, Part X?							
b	If "Yes," explain the arrangement in Part	t XIII and comple	te the fol	lowing ta	able:			A
								Amount
C	Beginning balance					10	;	
d	Additions during the year					1d	1	
е	Distributions during the year					16		
f	Ending balance					11	:	
_	Did the organization include an amount							☐ Yes ☐ No
2a	•	-	-					
b	If "Yes," explain the arrangement in Part							
<u>Part</u>	V Endowment Funds. Complete				"Yes" to F	orm 9	90, Part IV, IIn	e 10.
		(a) Current year	(b) Pric	r year	(c) Two year	s back	(d) Three years ba	ck (e) Four years back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and							
_	losses							
	<u>}</u>							
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 the	e current year en	d balanc	e (line 1g	, column (a)) held	as:	
a	Board designated or quasi-endowment			` •	,			
_			'					
b	***************************************	''						
С	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c							u
За	Are there endowment funds not in the	possession of tr	ie organi	zation tha	at are nelo	and ac	iministered for	
	organization by:							Yes No
	(i) unrelated organizations							. 3a(i)
	(ii) related organizations							. 3a(ii)
b	If "Yes" to 3a(ii), are the related organization	ations listed as r	eauired c	n Sched	ule R? .			. 3b
4	Describe in Part XIII the intended uses of							
Par								
r ai						(2)	Annumulated	(d) Paak value
	Description of property	(a) Cost or of (investment)			or other basis other)		Accumulated depreciation	(d) Book value
1a	Land							
ь	Buildings							
	Leasehold improvements							
C					74.000	 	40 4C4	20.000
d	Equipment			<u> </u>	74,963	 	48,161	26,802
<u>e</u>	Other	 _	20.5		/D) !! !!			
Total.	Add lines 1a through 1e. (Column (d) mu	ust equal Form 9	90, Part 2	K, columi	n (B), line 10	U(C).)	. ▶	26,802

Part VII	Investments - Other Securities	. See Form 990, Part X, I	ine 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
(1) Financial	derivatives			
(2) Closely-h	neld equity interests			
(3) Other				
(A) Investi	ment in Realty	227,000	Cost	
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				·
(1)	(1)			
	(b) must equal Form 990, Part X, col (B) line 12.) ► Investments—Program Related	227,000		· · · · · · · · · · · · · · · · · · ·
Part VIII		(b) Book value	(c) Method of value	intion
	(a) Description of investment type	(b) Book value	Cost or end-of-year m	
(1)		<u> </u>		
(2)				
(3)				
(4)				
<u>(5)</u>				
(6)				· · · · · · · · · · · · · · · · · · ·
(7)				
(8)				
(9)		<u> </u>		
(10)	(b) must equal Form 990, Part X, col. (B) line 13)			, n _e
Part IX	Other Assets. See Form 990, Pa	art X. line 15.		
		a) Description		(b) Book value
(1)				
(2)				
(3)		<u> </u>		
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	ımn (b) must equal Form 990, Part X, c		. ▶	
Part X	Other Liabilities. See Form 990			
1.	(a) Description of liability	(b) Book value	4	
	income taxes		4	
(2)			4	
(3)			4	
(4)			4	
(5)			_	
(6)			4	
(7)			4	
(8)			4	
(9)		 	-	
(10)		 	4	
(11)	(h) must sound Form 000 Post V soil (D) line 05 1	<u> </u>	-	
	(b) must equal Form 990, Part X, col. (B) line 25.) SC 740) Footnote. In Part XIII, provide the		ganization's financial statements that	reports the organization's
	ncertain tax positions under FIN 48 (ASC			

1	Pa	α	e	•

Part	XI Reconciliation of Revenue per Audited Financial Stateme	ents V	Vith Revenue per	Retu	m
1	Total revenue, gains, and other support per audited financial statements			1	889,159
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			-	
а	Net unrealized gains on investments	2a]	
b	Donated services and use of facilities	2b] ,	
С	Recoveries of prior year grants	2c			
	· · · ·	2d	3,395	1	
	Add lines 2a through 2d			2e	3,395
3	Subtract line 2e from line 1			3	885,764
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		,	
	Other (Describe in Part XIII.)	4b	59,650	1	
	Add lines 4a and 4b			4c	59,650
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)		5	945,414
Part	XII Reconciliation of Expenses per Audited Financial Statem	ents	With Expenses pe	r Re	turn
1	Total expenses and losses per audited financial statements			1	867,767
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		1	•
С	Other losses	2c		1	
d	Other (Describe in Part XIII.)	2d	3,395	.]	1
e	Add lines 2a through 2d			2e	3,395
3	Subtract line 2e from line 1			3	864,372
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		-	
b	Other (Describe in Part XIII.)	4b	59,650	4	
	Add lines 4a and 4b			4c	59,650
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	942,022
Part :					
	ete this part to provide the descriptions required for Part II, lines 3, 5, and	9; Par	t III, lines 1a and 4; F	art IV	/, lines 1b and 2b;
	line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b				
nform	ation.				
Part XI	Line 2(d): Rental income offset (\$800) and sale of supplies (\$2,595)				
Part XI	, Line 2(d): Offset to rental income (\$800) and sale of supplies (\$2,595)				
Part XI	Line 4(b): Reimbursement received for shared costs				
Part XI	Line 4(b): Gross up expenses which had been offset by reimbursements				
			·····		
	•				

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

20**12**

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Name of the organization Employer identification number IBEW Local 300 03-0102265

Part VI, Section C, Line 19: The Executive Board of IBEW Local 300 meets on a monthly basis to review the financial activity of the Local
Union and to discuss matters relative to the general membership. The Financial Secretary reports to the general membership of the Local
Union on a regular basis, the financial status of the Local Union as required by the Local Union's By-Laws and the IBEW's International
Constitution. The Local Union makes available to its general membership, upon request, any governing document or policy as required
by it's By-Laws, the U.S. Department of Labor and the Internal Revenue Service.
Part VI, Section A, Line 2: During the 2011-2012 fiscal year, Mr. Timothy Watkins was elected to the position of President by the Local Union's
membership to replace Mr. George Cain who was retiring. Business Manager Mr. Jeffrey Wimette also appointed Mr. Watkins as Assistant
Business Manager. Ms. Jean Watkins, the bookkeeper of the Local Union, is the spouse of Mr. Timothy Watkins. Ms. Watkins has been the
Local Union's bookkeeper for several years.
·

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

BEW Local 300

Partl

Related Organizations and Unrelated Partnerships

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

uctions.	
e instr	
separat	
▲ See	
990	
Form	
₽	
tach	

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

Open to Public Inspection

OMB No 1545-0047

Employer identification number 03-0102265

(g) Section 512(b)(13) controlled entity? (f)
Direct controlling
entity ž Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Yes (f)
Direct controlling 'entity (e) End-of-year assets ΥŽ (e)
Public charity status
(if section 501(c)(3)) (d) Total income (d) Exempt Code section 501(c)(9) (c)
Legal domicile (state
or foreign country) (c) Legal domicile (state or forelgn country) (b) Primary activity 5 (b) Primary activity **Benefit Fund** (a) Name, address, and EIN (if applicable) of disregarded entity (a) Name, address, and EIN of related organization (1) IBEW Local 300 Health and Welfare Fund 3 Gregory Drive, South Burlington, VT Part II © 9 <u>ල</u> € 8

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

Cat. No. 50135Y

Schedule R (Form 990) 2012

X

401(a)

5

Benefit Fund

5

Benefit Fund

(5)

9

E

(3) Vermont Joint Apprenticeship & Training Trust

3 Gregory Drive, South Burlington, VT

4

3 Gregory Drive, South Burlington, VT

(2) IBEW Local 300 Pension Fund

Ϋ́

501(c)(5)

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(i) Section 512(b)(13) controlled entity? (k) Percentage ŝ ownership Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Yes Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) (I) General or managing partner? ĝ (h) Percentage ownership Yes (f)
Code V—UBI
amount in box 20
of Schedule K-1
(Form 1065) end-of-year assets (g) Share of (h)
Disproportionate
allocations? ŝ (f) Share of total income Yes (g) Share of end-ofyear assets (e)
Type of entity
(C corp., S corp., or trust) (f) Share of total income (d)
Direct controlling entity (e)
Predominant
income (related,
unrelated,
excluded from tax under sections 512-514) (c) Legal domidle (state or foreign country) (d)
Direct controlling entity (b) Primary activity (c) Legal domicile (state or foreign country) (b) Primary activity (a) Name, address, and EIN of related organization (a) Name, address, and EIN of related organization (2) Part IV Part III Ξ Ξ 8 ତ E 9 € 9 E 8 <u></u> **£** 9

Schedule R (Form 990) 2012

Page G

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.) Schedule R (Form 990) 2012

Part V Transactio

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV? Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity Gift, grant, or capital contribution to related organization(s) Gift, grant, or capital contribution from related organization(s) Loans or loan guarantees to or for related organization(s) Loans or loan quarantees by related organization(s)	6 to to	
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relationships and transact	ion thresholo	Js.
(c) (d) (d) (e) (d) (e) (e) (d) (e) (d) (e) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e) ng amount involv	p ₈
33,612 Actual		1
18,055 Actual		
7,983 Actual		
Schedule	R (Form 990)	2012
	ationships and transact Method of determinit Method of determinit Actual Schedule	ttionships and transaction Method of determining Method of determining Schedule R.

Form **8868**

Application for Extension of Time To File an Exempt Organization Return

(Rev January 2013)

OMB No 1545-1709

Internal Revenue Service				
If you are filing for an Automatic 3-Month External	ension, complete	only Part I and ched	ck this box	
If you are filing for an Additional (Not Automate)				
Do not complete Part II unless you have alread				
Electronic filing (e-file). You can electronically for a corporation required to file Form 990-T), or an a 8868 to request an extension of time to file any Return for Transfers Associated With Certain Finstructions). For more details on the electronic file	additional (not aut of the forms liste Personal Benefit	tomatic) 3-month ext ed in Part I or Part II Contracts, which ma	ension of time. You can e with the exception of Fo ust be sent to the IRS i	lectronically file For rm 8870, Informatic n paper format (se
Part I Automatic 3-Month Extension of	of Time. Only su	bmit original (no co	onies needed)	· · · · · · · · · · · · · · · · · · ·
A corporation required to file Form 990-T and Part I only	requesting an a	automatic 6-month	extension—check this bo	▶[
All other corporations (including 1120-C filers), pa to file income tax returns.	artnerships, REMI	Cs, and trusts must u	use Form 7004 to request	an extension of tim
			Enter filer's identifying nur	mber, see instruction
Type or Print Name of exempt organization or other file of the print Soul 300	er, see Instructions.			
Number, street, and room or suite no. If a	Number, street, and room or suite no. If a P.O. box, see instructions. Social security		Social security number (SSN	I)
file by the due date for 3 Gregory Drive				•
return. See instructions City, town or rost office, state, and ZIP of State.		ddress, see instructions	3.	
Enter the Return code for the return that this applie	• •	separate application	for each return)	0/
Application Is For	Return Code	Application Is For		Return
Form 990 or Form 990-EZ	01	Form 990-T (corporation) 07		
Form 990-BL	02	Form 1041-A 08		
Form 4720 (Individual)	03	Form 4720 09		
Form 990-PF	04	Form 5227 10		
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T (trust other than above)	06	Form 8870 12		
• The books are in the care of ► Mr. 3 Telephone No. ► 302 -84-5765		Winette		
If the organization does not have an office or place If this is for a Group Return, enter the organization	e of business in t	AX No. ► he United States, che	eck this box	
for the whole group, check this box				If this is Tand attach
a list with the names and EINs of all members the extension is for.				
1 I request an automatic 3-month (6 months for until From arg. 15, 20 / 4, to file the for the organizations return for:				The extension is
calendar year 20 or				•
≥ tax year beginning	, 20 <u>l</u> n 12 months, che	2 , and ending ck reason: ☐ Initial i	Tune 3 return □ Final return	o . ²⁰ 13 .
☐ Change in accounting period 3a If this application is for Form 990-BL, 990-P	F, 990-T, 4720, o	r 6069, enter the ten	tative tax, less any	
nonrefundable credits. See instructions. 3a $\$ \mathcal{N}/f$ b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and				
estimated tax payments made. Include any prior year overpayment allowed as a credit. $3b + \mathcal{N}/\mathcal{H}$				
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$ N/A				
Caution. If you are going to make an electronic fund withd				yment instructions.
For Privacy Aca and Paperwork Reduction Act Notice, s	see instructions. NJ — [730 —	Cat. No 0004 -6336	27916D For -0865	m 8868 (Rev. 1-2013)