

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public
Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047
2017
Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 01-01-2017, and ending 12-31-2017

- B** Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
EIGHTH DISTRICT ELECTRICAL BENEFIT FUND
% CELINDA CAMPBELL
Doing business as
Number and street (or P O box if mail is not delivered to street address) Room/suite
2156 W 2200 S
City or town, state or province, country, and ZIP or foreign postal code
SALT LAKE CITY, UT 84119
F Name and address of principal officer
RUSSELL LAMOREAUX
2156 W 2200 S
SALT LAKE CITY, UT 84119

D Employer identification number
84-0730298
E Telephone number
(801) 973-1001
G Gross receipts \$ 166,459,130

- I** Tax-exempt status 501(c)(3) 501(c) (9) ◀ (insert no) 4947(a)(1) or 527
J Website: ▶ www.8thdist.org

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)
H(c) Group exemption number ▶
K Form of organization Corporation Trust Association Other ▶
L Year of formation 1966 **M** State of legal domicile UT

Part I Summary

1 Briefly describe the organization's mission or most significant activities
SEE SCHEDULE O
2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets
3 Number of voting members of the governing body (Part VI, line 1a) **3** 12
4 Number of independent voting members of the governing body (Part VI, line 1b) **4** 0
5 Total number of individuals employed in calendar year 2017 (Part V, line 2a) **5** 140
6 Total number of volunteers (estimate if necessary) **6** 0
7a Total unrelated business revenue from Part VIII, column (C), line 12 **7a** 0
b Net unrelated business taxable income from Form 990-T, line 34 **7b** 0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	0	0
9 Program service revenue (Part VIII, line 2g)	69,723,268	72,208,003
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,952,571	3,378,611
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	445,151	432,239
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	72,120,990	76,018,853
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0	0
14 Benefits paid to or for members (Part IX, column (A), line 4)	74,177,798	78,110,246
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0	0
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,262,870	3,063,286
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	77,440,668	81,173,532
19 Revenue less expenses Subtract line 18 from line 12	-5,319,678	-5,154,679
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	80,205,550	78,348,966
21 Total liabilities (Part X, line 26)	23,282,135	25,793,526
22 Net assets or fund balances Subtract line 21 from line 20	56,923,415	52,555,440

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer _____ Date 2018-08-06
JOSH WHEELER trustee
Type or print name and title _____

Paid Preparer Use Only
Print/Type preparer's name Jeffrey Goss Preparer's signature Jeffrey Goss Date _____
Check if self-employed PTIN P00349311
Firm's name ▶ MILLER KAPLAN ARASE LLP Firm's EIN ▶ _____
Firm's address ▶ 4123 LANKERSHIM BLVD Phone no (818) 769-2010
NORTH HOLLYWOOD, CA 916022828

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

TO PROVIDE MEDICAL, DENTAL, PRESCRIPTION, VISION, PERSONAL CARE ACCOUNTS, DISABILITY, LIFE AND ACCIDENTAL DEATH AND DISMEMBERMENT BENEFITS, SUBJECT TO CERTAIN ELIGIBILITY REQUIREMENTS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

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? Yes No

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(c)(3) and 501(c)(4) 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 \$ including grants of \$) (Revenue \$)
See Additional Data

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶

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)? <i>If "Yes," complete Schedule A</i>		No
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?		No
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		No
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>		
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? <i>If "Yes," complete Schedule C, Part III</i>		
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? <i>If "Yes," complete Schedule D, Part I</i> 🗑️		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> 🗑️		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 🗑️		No
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? <i>If "Yes," complete Schedule D, Part IV</i> 🗑️		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 🗑️		No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> 🗑️		No
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? <i>If "Yes," complete Schedule D, Part VII</i> 🗑️		No
c 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? <i>If "Yes," complete Schedule D, Part VIII</i> 🗑️		No
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? <i>If "Yes," complete Schedule D, Part IX</i> 🗑️		No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 🗑️	Yes	
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)? <i>If "Yes," complete Schedule D, Part X</i> 🗑️	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> 🗑️	Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> 🗑️		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		No
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		No
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		No
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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)		No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		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? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		No
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
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? <i>If "Yes," complete Schedule R, Part VI</i>		No
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	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question ID, question text, and Yes/No response boxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited transactions, charitable contributions, and organizational details.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (12), 1b (0), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17, 18, 19, 20.

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JAMES PETERSON TRUSTEE	1 0 0 0	X						0	0	0
(2) KLAAS DEBOER JR TRUSTEE	1 0 0 0	X						0	0	0
(3) RORY BERUMEN TRUSTEE	1 0 0 0	X						0	0	0
(4) PATRICK CARLSON TRUSTEE	1 0 0 0	X						0	0	0
(5) MIKE SCHMIDT TRUSTEE	1 0 0 0	X						0	0	0
(6) BRIAN BRADLEY TRUSTEE	1 0 0 0	X						0	0	0
(7) JOHN GORDON TRUSTEE	1 0 0 0	X						0	0	0
(8) JERRY PAYNE TRUSTEE	1 0 0 0	X						0	0	0
(9) NED JONES TRUSTEE	1 0 0 0	X						0	0	0
(10) RUSSELL LAMOREAUX TRUSTEE	1 0 0 0	X						0	0	0
(11) JOSH WHEELER TRUSTEE	1 0 0 0	X						0	0	0
(12) JIM MANTELE TRUSTEE	1 0 0 0	X						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and Title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation.

Summary rows: 1b Sub-Total, 1c Total from continuation sheets to Part VII, Section A, 1d Total (add lines 1b and 1c).

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

Table with 3 columns: Question number, Question text, Yes/No response. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Lists contractors like COMPUSYS OF UTAH INC, United Actuarial Services, etc.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 5

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a					
	b Membership dues . . .	1b					
	c Fundraising events . . .	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f \$ _____						
	h Total. Add lines 1a-1f			0			
Program Service Revenue		Business Code					
	2a EMPLOYER CONTRIBUTIONS	900099	67,349,780	67,349,780			
	b PARTICIPANT SELF-PAYMENTS	900099	4,858,223	4,858,223			
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
g Total. Add lines 2a-2f			72,208,003				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1,780,625			1,780,625	
	4 Income from investment of tax-exempt bond proceeds		0				
	5 Royalties		0				
	6a Gross rents	(i) Real	(ii) Personal				
		b Less rental expenses					
		c Rental income or (loss)	0	0			
		d Net rental income or (loss)			0		
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less cost or other basis and sales expenses					
		c Gain or (loss)	92,038,263				
		d Net gain or (loss)	90,440,277				
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a	0				
		b Less direct expenses	b	0			
		c Net income or (loss) from fundraising events			0		
	9a Gross income from gaming activities See Part IV, line 19	a	0				
		b Less direct expenses	b	0			
		c Net income or (loss) from gaming activities			0		
10a Gross sales of inventory, less returns and allowances	a	0					
	b Less cost of goods sold	b	0				
	c Net income or (loss) from sales of inventory			0			
Miscellaneous Revenue	Business Code						
11a MEDICARE PART D SUBSIDY	900099	432,239	432,239				
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d			432,239				
12 Total revenue. See Instructions			76,018,853	72,640,242		3,378,611	

Part IX 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
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	0			
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	0			
4 Benefits paid to or for members.	78,110,246			
5 Compensation of current officers, directors, trustees, and key employees.	0			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0			
7 Other salaries and wages.	0			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	0			
9 Other employee benefits.	0			
10 Payroll taxes.	0			
11 Fees for services (non-employees)				
a Management	1,679,768			
b Legal	195,501			
c Accounting	192,568			
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17.	0			
f Investment management fees.	161,192			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	180,299			
12 Advertising and promotion.	0			
13 Office expenses.	460,848			
14 Information technology.	0			
15 Royalties.	0			
16 Occupancy.	0			
17 Travel.	0			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19 Conferences, conventions, and meetings.	40,313			
20 Interest.	0			
21 Payments to affiliates.	0			
22 Depreciation, depletion, and amortization.	0			
23 Insurance.	43,607			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a MISCELLANEOUS	2,485			
b PCORI FEE	29,046			
c BANK FEES	77,659			
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e.	81,173,532			
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	487,680	1	285,842
	2 Savings and temporary cash investments	3,604,552	2	4,641,872
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	6,267,020	4	6,864,342
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	0	8	0
	9 Prepaid expenses and deferred charges	0	9	0
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	b Less accumulated depreciation	0	10c	0
	11 Investments—publicly traded securities	69,846,298	11	66,556,910
	12 Investments—other securities See Part IV, line 11	0	12	0
	13 Investments—program-related See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets See Part IV, line 11	0	15	0
16 Total assets. Add lines 1 through 15 (must equal line 34)	80,205,550	16	78,348,966	
Liabilities	17 Accounts payable and accrued expenses	427,907	17	85,960
	18 Grants payable	0	18	0
	19 Deferred revenue	0	19	0
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
	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	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	22,854,228	25	25,707,566	
26 Total liabilities. Add lines 17 through 25	23,282,135	26	25,793,526	
Net Assets or Fund Balances	27 Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	30 Organizations that do not follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 30 through 34. Capital stock or trust principal, or current funds	0	30	0
	31 Paid-in or capital surplus, or land, building or equipment fund	0	31	0
	32 Retained earnings, endowment, accumulated income, or other funds	56,923,415	32	52,555,440
	33 Total net assets or fund balances	56,923,415	33	52,555,440
	34 Total liabilities and net assets/fund balances	80,205,550	34	78,348,966

Part 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	76,018,853
2	Total expenses (must equal Part IX, column (A), line 25)	2	81,173,532
3	Revenue less expenses Subtract line 2 from line 1	3	-5,154,679
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	56,923,415
5	Net unrealized gains (losses) on investments	5	786,704
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 33, column (B))	10	52,555,440

Part XII Financial Statements and Reporting

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

	Yes	No
<p>1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O</p>		
<p>2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>		No
<p>b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	Yes	
<p>c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O</p>	Yes	
<p>3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</p>		
<p>b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits</p>		

Additional Data

Software ID:

Software Version:

EIN: 84-0730298

Name: EIGHTH DISTRICT ELECTRICAL BENEFIT FUND

Form 990 (2017)

Form 990, Part III, Line 4a:

TO PROVIDE MEDICAL, DENTAL, PRESCRIPTION, VISION, PERSONAL CARE ACCOUNTS, DISABILITY, LIFE AND ACCIDENTAL DEATH AND DISMEMBERMENT BENEFITS,
SUBJECT TO CERTAIN ELIGIBILITY REQUIREMENTS

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

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.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047
2017
Open to Public Inspection

Name of the organization
EIGHTH DISTRICT ELECTRICAL BENEFIT FUND

Employer identification number
84-0730298

Part I 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
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 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 conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 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

2 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 Year	
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a 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

b 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

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 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

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- | | Amount |
|--|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | Yes | No |
|--|---------------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

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

Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	▶	

Part VIII Investments—Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	▶	

Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	▶

Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	0
CLAIMS INCURRED BUT NOT REPORTED	12,206,975
BANK HOUR LIABILITY	13,500,591
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 25,707,566

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	76,805,557
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	786,704
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	786,704
3	Subtract line 2e from line 1	3	76,018,853
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	76,018,853

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	81,173,532
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	81,173,532
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	81,173,532

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 84-0730298

Name: EIGHTH DISTRICT ELECTRICAL BENEFIT FUND

Supplemental Information

Return Reference	Explanation
part x, line 2	Accounting principles generally accepted in the United States of America require management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken a tax position that more likely than not would not be sustained upon examination by a tax authority. The Plan is subject to routine audits by taxing jurisdictions, however, there are currently no audits for any tax periods in progress.

SCHEDULE O
(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.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
EIGHTH DISTRICT ELECTRICAL BENEFIT FUND

Employer identification number

84-0730298

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART I, LINE 1 - ORGANIZATION'S MISSION	TO PROVIDE MEDICAL, DENTAL, PRESCRIPTION, VISION, PERSONAL CARE ACCOUNTS, DISABILITY, LIFE AND ACCIDENTAL DEATH AND DISMEMBERMENT BENEFITS, SUBJECT TO CERTAIN ELIGIBILITY REQUIREMENTS PART VI, LINE 11B THE FORM 990 IS REVIEWED BY THE ADMINISTRATIVE OFFICE PRIOR TO FILING, ANY UNUSUAL ITEMS ARE BROUGHT TO THE BOARD OF TRUSTEES ATTENTION PART VI, LINE 12C THE BOARD OF TRUSTEES AND ALL PROFESSIONALS ARE AWARE OF THE CONFLICT OF INTEREST POLICY AND ARE TO CONTACT LEGAL COUNSEL IF ANY POTENTIAL CONFLICTS ARISE PART VI, LINE 19 THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE AT THE PLAN OFFICE UPON REQUEST PART VII, SECTION A COMPENSATION PAID TO TRUSTEES EMPLOYED BY NOT-FOR-PROFIT ORGANIZATIONS IS PROPERLY REPORTED ON THE EMPLOYER'S ANNUAL TAX FILINGS

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2017

**Open to Public
Inspection**

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
- ▶ Attach to Form 990.
- ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization
EIGHTH DISTRICT ELECTRICAL BENEFIT FUND

Employer identification number

84-0730298

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)SEE PART VII	N/A						

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) SEE PART VII												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No
(1)SEE PART VII									

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	No
b Gift, grant, or capital contribution to related organization(s)	1b	No
c Gift, grant, or capital contribution from related organization(s)	1c	No
d Loans or loan guarantees to or for related organization(s)	1d	No
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
o Sharing of paid employees with related organization(s)	1o	No
p Reimbursement paid to related organization(s) for expenses	1p	No
q Reimbursement paid by related organization(s) for expenses	1q	No
r Other transfer of cash or property to related organization(s)	1r	No
s Other transfer of cash or property from related organization(s)	1s	No

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.
 Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
PARTS II, III AND IV - IDENTIFICATION OF NOT-FOR-PROFIT ORGANIZATIONS AND	<p>RELATED ORGANIZATIONS TAXABLE AS A PARTNERSHIP, CORPORATION OR TRUST 4 A ELECTRIC, LLC 4 MEGAWATTS ELECTRIC A C ELECTRIC, INC A+ ELECTRIC LLC ABERCROMBIE PIPELINE SERVICES, ABSOLUTE ELECTRIC INC ACCURATE CONSTRUCTION ACE ELECTRIC INC ACE ELECTRICAL ACTS ELECTRIC, LLC ADAMS ELECTRIC INC ADAMSON ELECTRIC, LLC ADF GROUP AD-LITE ELECTRIC ADVANCED ELECTRIC & AL ELECTRIC, LLC ALARMCO INC ALEUT GLOBAL SOLUTIONS ALLIED ELECTRICAL ALUMINUM WIRE REPAIR, INC AMERICAN ELECTRIC, INC ANCHOR ELECTRIC CONTRACTING API SYSTEMS INTEGRATORS, INC ARC ELECTRIC ARC ELECTRIC INC ARCTIC SLOPE ARK ELECTRIC, LLC ASCENSION ELECTRIC, INC ASPLUNDH TREE EXPERT CO ASSOCIATED ARBORISTS AUTOMATED BUILDING SOLUTIONS AUTOMATED CONTROL ELECTRIC, LLC AUTOMATION 307, LLC AUTOMATION ELECTRONICS AZTEC ELECTRIC AND SOLAR INC B & B ELECTRIC B W SYSTEMS BAHM ELECTRIC, LLC BALFOUR BEATTY RAIL, INC BAR T ELECTRIC BEAR RIVER ELECTRIC BEE ELECTRIC BELL ELECTRIC INC BEMIS ELECTRIC CO INC BERRIER ELECTRIC BERWICK ELECTRIC BEST ELECTRICAL SOLUTIONS BIG SKY ELECTRIC SERVICES INC BILLINGS BUILDERS EXCHANGE BLACK AND MCDONALD BODELL SOLUTIONS INC BOISE ELECTRIC SERVICES, LLC BRAHMA INDUSTRIAL SERVICES BRENT WOODWARD, INC BRISTOL SITE CONTRACTORS, LLC BRONDER TECHNICAL SERVICES, INC BROOKSIDE ELECTRIC BURKE ELECTRIC BUTTE-SILVER BOW BWSR, LLC CACHE VALLEY ELECTRIC CO CASCADE ELECTRIC CASCADE ELECTRIC INC CEDAR CANYON ENTERPRISES, INC CENTURY ELECTRIC CHRIS ELECTRIC COMPANY, INC CITY OF GREAT FALLS CITY OF TROY CJ'S CONST & SEEDING INC COCHRAN ELECT CO INC COLO ELECT MOTOR REPAIR INC COLORADO ELECTRICAL SOLUTIONS COLORADO SPRINGS ELECTRICAL COLSTRIP ELECTRIC INC COMPUSYS OF UTAH, INC CONTROL SYSTEMS INTEGRATORS CONTROL TEMPERATURE COPPERHEAD ELECTRIC CRAFTSMEN ELECTRICAL, INC CUPERTINO ELECTRIC CURRENT ELECTRIC, LLC CUTTING EDGE ELECTRIC, INC DALE W G ELECTRIC CO DAVEY TREE SURGERY DECKER ELECTRIC, INC DELTA SOLUTIONS & DENVER JOINT ELECTRICAL DEPARTMENT OF ADMINISTRATION DEPATCO UNION DBA DEVOGE ELECTRIC INC DILLMAN ELECTRIC DILLON ELECTRIC, INC DMI DRILLING CONSTRUCCION DON'S ELECTRIC INC DRISCOLL ELECTRIC & EAGLE ELECTRIC INC EAGLETON HIGH VOLTAGE, INC EASTERN IDAHO ELECT JATC ECHO SERVICES ELECT POWER & PROCESS INC ELECTRIC CORP OF AMERICA ELECTRIC INC ELECTRIC SERVICE INC ELECTRICAL CONSTRUCTION ELECTRICAL EQUIPMENT CO INC ELECTRICAL SERVICES LLC ELECTRICAL SYSTEMS INC ELIASSON ELECTRIC INC ELITE ELECTRICAL, LLC ELKHORN ELECTRICAL CORP ELM LOCATING & UTILITY SERVICE EML (ELECTRONIC METROLOGY EMPIRE ELECTRIC INC ENTERPRISE ELECTRIC ERIE ELECTRIC INC EVETS ELECTRIC EXTREME STAFFING OF IDAHO, LLC FAITH ENTERPRISES INC FATHER AND SON ELECTRICAL FERGUSON & SONS FIBER-TECH ELECTRIC INC FIRST LIGHT ELECTRIC LLC FISHER ELECTRIC, INC FISTER ELECTRIC INC FLUOR IDAHO, LLC FPD ELECTRIC, INC G D BARRI GABE'S CONSTRUCTION GENESIS ELECTRICAL SERVICES GET WESTERN ELECTRIC, LLC GORDON SIGN CO GREAT FALLS PUBLIC SCHOOLS GREEN ELECTRIC GREEN ENERGY FOUNDATIONS, LLC GT TECHNOLOGIES LLC GUARANTEE ELECTRICAL HELENA SCHOOL DISTRICT #1 HENKELS & MC COY INC HIGH COUNTRY ELECTRIC HIGH COUNTRY LINE HIGH PLAINS POWER & CONTROL HOOPER CORPORATION HORTIN ELECTRIC INC HOWARD ELECTRIC HUNT ELECTRIC CORPORATION I B E W LOCAL 111 I B E W LOCAL 113 I B E W LOCAL 12 I B E W LOCAL 233 I B E W LOCAL 291 I B E W LOCAL 322 I B E W LOCAL 354 I B E W LOCAL 415 I B E W LOCAL 44 I B E W LOCAL 449 I B E W LOCAL 532 I B E W LOCAL 57 I B E W LOCAL 68 I B E W LOCAL 768 IBERG ELECTRICAL AND ICELAND CONSTRUCTION, INC IDAHO CHAPTER NECA IDAHO STATE AFL-CIO IN PHASE ELECTRIC INC INDUSTRIAL CONTRACTORS INC INSTRUMENTAL ELECTRIC INTEC SERVICES INC INTEGRITY ELECTRIC INC INTERMOUNTAIN CHAPTER NECA INTERMOUNTAIN ELECTRIC INC INTERNATIONAL LINE ITC ELECTRICAL TECHNOLOGIES J & J MAINTENANCE J & M ELECTRIC INC JACO CONSTRUCTION INC JAMM POWER SERVICE, LLC JOHN FARROW ELECTRIC JOHNSON ELECTRIC INC JR ELECTRIC JT ELECTRIC, INC K & D ELECTRIC, INC K R SWERDFEGER CONST , INC K M D ELECTRIC KALISPELL ELECTRIC KEY LINE CONSTRUCTION KING GEORGE LLC KKP ELECTRICAL CONTRACTORS LLC KONRAD ELECT INC LEA ELECTRIC LENZ ELECTRIC LENZ ELECTRIC SERVICE, LLC LIBERTY BELL ELECTRIC, INC LIBERTY ELECTRIC LLC LIMITLESS WIRING SOLUTIONS INC LINCOLN ELECTRIC COOPERATIVE LITZBAUER ELECTRIC LONG BUILDING TECHNOLOGIES LUMINOUS ELECTRIC LLC LYNCH JOE ELECTRIC M J ELECTRIC, LLC MAIN ELECTRIC LTD MC DADE - WOODCOCK INC MC2 ELECTRICAL CONTRACTOR MCKEE ELECTRIC, INC MECHANICAL TECHNOLOGY INC METRO ELECTRIC MICHELS POWER MID STATES ENERGY CO , LLC MIDLAND ELECTRIC CONTR INC MIDWEST ELECTRIC INC MIKE'S ELECTRIC MILLER ELECTRIC CO MISSION ELECTRIC LLLP MISSION VALLEY POWER MJO INC MODERN ELECTRIC MONTANA CHAPTER, NECA MONTANA ELECTRICAL JATC MOUNTAIN ELECTRICAL MOUNTAIN POWER CONSTRUCTION MOUNTAIN STATES ELEC CONTR INC MOUNTAIN STATES LINE CONST MOUNTAIN WEST ELECTRIC, INC MSE INC MTN WEST ELECTRICAL NAES POWER CONTRACTORS NASH ELECTRICAL, INC NATIONAL CONDUCTOR NATIONAL TECHNOLOGIES, LLC NEELY ELECTRIC, INC NELSON BROTHERS ELECTRIC, INC NELSON ELECTRIC NEWMAN CONSTRUCTION II, INC NINETY EIGHT ELECTRIC NORTH/WESTERN ELECTRICAL NTH ELECTRIC OHMEGA ELECTRIC OLD TOWN ELECTRIC ON ELECTRIC GROUP, INC ONE THIRTEEN CREDIT UNION ONEIDA ELECTRIC, INC OUTBACK POWER COMPANY PALMER ELECTRIC TECHNOLOGY PAR ELECTRICAL CONTRACTORS INC PAULSON ELECTRIC PCI PICK ELECTRIC, INC POSITIVE POWER POUNDERS ELECTRIC, INC POWER CONTRACTING, LLC POWER FOUNDATION LLC POWER PLUS INC PREMIER ENERGY CONTROLS, INC PRIMARY SOURCE ELECTRIC, LLC PUEBLO ELECTRICAL JATC PUEBLO ELECTRICS INC PUEBLO WEST ELECTRIC QUALITY ELECTRIC QUALITY ELECTRIC & CONTROLS QUALITY ELECTRIC INC R & M ELECTRIC R & R ELECTRIC R C ELECTRIC RAGE ELECTRIC INC RAINBOW ELECTRIC CORP RALPH'S NEON & ELECT INC RANDALL ELECTRIC & CONTROLS RAY PETERSON ELECTRIC INC RED LODGE ELECTRIC CO RED MOUNTAIN ELECTRIC REDDI ELECTRIC INC REDI ELECTRIC SERVICES REDI SERVICES, LLC RHC CONSTRUCTION LLC RIDGE ELECTRIC LLC RIVA SOLUTIONS RIVER VALLEY ELECTRIC, INC RIVERSIDE ELECTRIC INC RME ELECTRIC CORP ROB GILES ELECTRIC, INC ROCKHILL ELECTRICAL SYSTEMS ROCKY MOUNTAIN CHAPTER NECA ROCKY MOUNTAIN CONTRACTORS INC ROSE ELECTRIC LLC ROSEBUD OPERATING SERVICES INC RYDALCH ELECTRIC, INC SANCHEZ ELECTRIC INC SASCO ELECTRIC SCHMITT ELECTRIC SCHROCK ELECTRIC INC SECURITY MANAGEMENT SYSTEMS SEDLAK ELECTRIC CO SERVICE ELECTRIC SETPOINT SYSTEMS CORP SHERIDAN ELECTRIC SIERRA ELECT ENTERPRISES SIGNATURE ELECTRIC SIMPSON ELECTRIC CO SKYLINE ELECTRIC CO INC SMITTICK ELECTRIC LLC SNAKE RIVER ELECTRIC, INC SODEXO, INC SONG DOG ELECTRIC SOUTHERN COLO CHAPTER NECA SOUTHWESTERN IDAHO ELECTRICAL SPAULDING CONSTRUCTION SPRECHER ELECTRIC INC ST ANDREWS ELECTRIC CORP STAPLETON ELECTRIC, LLC STATE LINE CONTRACTORS INC STONER ELECTRIC INC STURGEON ELECTRIC CO INC SUMMIT LINE CONSTRUCTION SUMMIT LINE CONSTRUCTION, INC SUNDANCE ELECTRIC INC SYSTEM TECH, INC T & T ELECTRIC CO TABBERT CONSTRUCTION TALCO ELECTRIC CONST INC TASKER ELECTRIC TEC ELECTRIC THE ELECTRIC WAY THE ORIGINAL MOWBRAY'S TREE THE THIRD ELEMENT, INC THOMAS ELECTRIC TITAN ELECTRIC TNT ELECTRIC TOWNSEND CONTROLS & TPE-TWIN PEAKS ELECTRIC TRADEMARK ELECTRIC INC TREASURE STATE ELECTRIC TREES INC TRI STATE ELECTRIC INC TRI-COUNTY MECHANICAL TRIDENT ELECTRIC, LLC UNITED ELECTRIC UNITED ELECTRIC, LLC URS ENERGY & CONSTRUCTION INC UTAH ELECTRICAL JATC VALLEY ELECTRICAL CONTR INC VAN ERT ELECTRIC VFC INC VOS ELECTRIC W A CHESTER LLC WARD ELECTRIC COMPANY WARD ENGINEERING, INC WASATCH ELECTRIC WATTS ELECTRIC, LLC/ WELLS GLOBAL WEST WEST ELECTRIC WESTERN COLO ELEC JATC WESTERN INDUSTRIAL WESTERN LINE CONST WHEELER ELECTRIC INC WHITE ELECTRIC WHITEFISH ENERGY WILLIAMSON FENCE & SPRINKLERS WINWARD ELECTRICAL SERVICES WRIGHT TREE SERVICE INC WRIGHT WAY ELECTRIC WYOMING CHAPTER NECA WYOMING ELECTRIC INC WYOMING ELECTRICAL JATC YELLOWSTONE ELECTRIC CO ZACHA UNDERGROUND CONSTRUCTION</p>

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