### CHANGE OF ACCOUNTING PERIOD

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

▶ 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. Inspection

A F	or the 2	2016 calendar year, or tax year beginning APR 1, 2016 and ending	g DE	EC 31, 20	16	
B c	heck if oplicable	C Name of organization WESTERN WASHINGTON SHEET METAL INDUSTRY		D Employer ide	intificat	tion number
<u>_</u>	_lchange	FUND		_		
<u>_</u>	Name change	Doing business as		91	<u> -608</u>	87551
<u></u>	Initial	Number and street (or P.O. box if mail is not delivered to street address) Room/	/suite   i	E Telephone nu		
	Final return/	13810 SE EASTGATE WAY 445		4.2	<u> 25 – 28</u>	<u>89-5010</u>
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code	L	G Gross receipts \$	·	1,845,300.
<u></u>	Amende return	BETTEACE, MY 38002		H(a) Is this a gro	oup retu	rn
L	Applica-	I F Name and address of principal officer of other Modifier Page P	- 1	for subordi	nates?	Yes X No
	pending	SAME AS C ABOVE		H(b) Are all subordi	nates inclu	rded? Yes No
1 7	ax-exer	mpt status: 501(c)(3)X 501(c)( 6 ) ◀ (insert no.) 4947(a)(1) or	527	If "No," atta	ach a lis'	t. (see instructions)
JV	Vebsite	:►N/A		H(c) Group exer	nption r	number >
KF	orm of c	organization: Corporation X Trust Association Other L	Year o	f formation: 195	57 <b>м</b> S	State of legal domicile: WA
Pa	art I	Summary				
a	1 E	Briefly describe the organization's mission or most significant activities TO PROV	IDE	PROGRAMS	IMA 6	D
Activities & Governance	1 2	ACTIVITIES FOR THE PROMOTION OF THE SHEET M	ETAI	L INDUSTI	₹Y	
Ë	2 0	Check this box   if the organization discontinued its operations or disposed of	more	than 25% of its	net asse	ets
Š	3 1	lumber of voting members of the governing body (Part VI, line 1a)			3	8
<u>ن</u> مع	4 1	lumber of independent voting members of the governing body (Part VI, line 1b)			4	0
Se	5 T	otal number of individuals employed in calendar year 2016 (Part V, line 2a)			5	3
ž	6 7	otal number of volunteers (estimate if necessary)			6	0
Ę	7a T	otal unrelated business revenue from Part VIII, column (C), line 12			7a	0.
	ь	Net unrelated business taxable income from Form 990-T, line 34			7b	0.
	]			Prior Year		Current Year
ā	8	Contributions and grants (Part VIII, line 1h)		<del></del>	0.	<u> </u>
nue.	9 F	Program service revenue (Part VIII, line 2g)		2,061,1		1,806,388.
Revenue	10 1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		58,4	43.	38,912.
Q.	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0.	0.
	12 7	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,119,6	27.	1,845,300.
	13 (	Grants and similar amounts paid (Part IX, column (A), lines 1-3) RECEIVED	(2)		0.	0.
	1	Benefits paid to or for members (Part IX, column (A), line 4)			0.	<u> </u>
es	15 5	Salaries, other compensation, employee benefits (Part IX, column (A), lines 510) 2000 Professional fundraising fees (Part IX, column (A), line 11e)	/ High	493,7		423,532.
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)		<u> </u>	0.	<u> </u>
Š	b ]	Total fundraising expenses (Part IX, column (D), line 25)	Λ	<u> </u>		
w	177	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	7	1,167,0		1,111,677.
	18	Total expenses Add lines 13-17 (must equal Part-IX) column (A), line 25 (1)	ļ	1,660,7		1,535,209.
	19 [	Revenue less expenses Subtract line 18 from line 12		458,8	87.	310,091.
500	<u>[</u>	Total assets (Part X line 16)	Beg	inning of Current		End of Year
SSet	20	Total assets (Part X, line 16)		3,365,8		3,675,989.
Net Assets or	21	Total liabilities (Part X, line 26)	-	561,0		534,901.
2	22	Net assets or fund balances Subtract line 21 from line 20 EM		2,804,7	89.	3,141,088.
بيبسا	art II	Signature Block				·
		Ities of perjuly, I declare that I have examined this return, including accompanying schedules and				knowledge and belief, it is
tru	e, correc	t, and complete. Deceration of preparer (other than officer) is based on all information of which pi	reparer	has any knowledg	€.	
		Sant Market		Date	[3/1,	Z
Sig	-	Signatury White			•	
He	re	JULIE MULLER-NEFF, EXECUTIVE VICE PRESIDE	)FN.I.			
		Type or print name and title	Ir	Date , , C	haati [	PTIN
_		Print/Type preparer's name		11/12/17 1	heck	I
Pa		JOSANNE EISENMAN JASANNE ZOENMAN		/ -/	elf-employed	
	parer	Firm's name MCGOORTY EISENMAN, INC PS		Firm's E	IN 🛌	26-0278750
Us	e Only	Firm's address 10410 - 19TH AVE SE, STE 102				E \ 20E   2405
		EVERETT, WA 98208		Phone r	10. (42	5)385-3483
Mia	ay the IF	RS discuss this return with the preparer shown above? (see instructions)				X Yes No

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

SCANNED DEC 18 7017

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### WESTERN WASHINGTON SHEET METAL INDUSTRY

orm 9	990 (2016) FUND 9.	1-6087551 Page 2
Part	III Statement of Program Service Accomplishments	<del></del>
	Check if Schedule O contains a response or note to any line in this Part III	
	Briefly describe the organization's mission. TO PROVIDE PROGRAMS AND ACTIVITIES FOR THE PROMOTION OF TI	ಗಾರವಭ್ರ ವಭ
	NETAL INDUSTRY	ne Sneer
;	METALI INDUSTRI	
•		
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 X No
	If "Yes," describe these new services on Schedule O.	
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O	103
	Describe the organization's program service accomplishments for each of its three largest program services, as mea	asured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	• •
	revenue, if any, for each program service reported.	and total expenses, and
	(Code) (Expenses \$including grants of \$) (Revenue \$	1
	TO PROVIDE PROGRAMS AND ACTIVITIES FOR THE PROMOTION OF T	HE SHEET METAL
	INDUSTRY	
		<del></del>
4b	(Code) (Expenses \$	
70	(Code) (expenses 5) (Hevenue 5	
		····
		**************************************
		**************************************
		<del></del>
4-		
4c	(Code) (Expenses \$) (Revenue \$	
		**************************************
		<del></del>
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$	<u> </u>
<u>4e</u>	Total program service expenses	
		Form <b>990</b> (2016

Form **990** (2016)

Par	t 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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
	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		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		
•		4		
5	during the tax year? If "Yes," complete Schedule C, Part II  Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			<del> </del>
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		-u-	[
		5	X	
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	ļ	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		ĺ	l
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	<b> </b>	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	1		
	Schedule D, Part III	8	ļ	X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	]	1	l
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?	•	1	)
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			1
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X		1	
	as applicable.	1	j	
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	X	
þ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	İ		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	}	1	1
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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	<u> </u>	X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
1	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	111		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	1		1
	Schedule D, Parts XI and XII	12a	X	
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	<u> </u>	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1	[	}
	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	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any		}	
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		ĺ	
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	<u> </u>	X
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	17	<u> </u>	X
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		X
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		X

### Form 990 (2016) FUND Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	1 1		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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			1
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			<u> </u>
	any tax-exempt bonds?	24c	1	Ì
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<del>                                     </del>
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit		<del></del>	<del> </del>
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	ļ	
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	2.56	ļ	<del> </del>
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	2.50		<del> </del>
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	]	]	
	complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial		<b></b>	<u></u> -
	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	Ì	х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		1	<del>                                     </del>
	instructions for applicable filing thresholds, conditions, and exceptions).		İ	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X	
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		1	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			T
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part i	31		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		1	-
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	X
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	X	<u> </u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	ļ	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		İ	}
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	1	<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	1	1	
	If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	
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	<u> </u>	X
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	<u>x</u>	
		Form	1990	(2016

Par 1a b	990 (2016) FUND  t 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  Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and re	1a	91-60875			age <b>5</b>
1a b	Check if Schedule O contains a response or note to any line in this Part V  Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable				······································	
b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable				<del></del>	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable					
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable				Yes	No
	· · · · · · · · · · · · · · · · · · ·		14	Ì	i	
_	Did the organization comply with backup withholding rules for reportable payments to vendors and re	1b	U	1	]	
С		portab	ole gaming	.	1	
	(gambling) winnings to prize winners?	,		1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	İ			-	
	filed for the calendar year ending with or within the year covered by this return	2a	3	- 1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	Į	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	)	,			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authori	ty over, a			
	financial account in a foreign country (such as a bank account, secunties account, or other financial a	accoun	nt)?	4a		X
b	If "Yes," enter the name of the foreign country:					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccount	ts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?		5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		· Ì	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	e orga	inization solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		х
ь	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or	rgifts			
-	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).	••	·			
a	D. 141	vices p	rovided to the payor?	7a		
b	The state of the s	•		7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as rea	uired			
Ī	to file Form 8282?			7c		
d	A STATE OF THE STA	7d				
е	make the second of the second	ontrac	t?	7e		
f				71		
g	And the second of the second o		99 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		i	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the	e		-	
	sponsoring organization have excess business holdings at any time during the year?	-		8		
9	Sponsoring organizations maintaining donor advised funds.					
а	militaria.			9a		-
b				9b		
10	Section 501(c)(7) organizations. Enter.					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				l
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a			Ì	
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them)	11b				1
<b>12</b> a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	10411	?	12a	<u></u>	<u></u>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				L	
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O					
t	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b			Ì	1

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Form **990** (2016)

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

### WESTERN WASHINGTON SHEET METAL INDUSTRY

91-6087551

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  $\lceil \mathbf{x} \rceil$ Check if Schedule O contains a response or note to any line in this Part VI Section 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 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 0 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 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? X 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a X b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a X 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 X in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 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? a The organization's CEO, Executive Director, or top management official 15a X b Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a X taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Other (explain in Schedule O) \_\_\_\_ Another's website X Upon request 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records THE ORGANIZATION - 425-289-5010 BELLEVUE, 13810 SE EASTGATE WAY, NO. Form 990 (2016) 632006 11-11-16

Form 990 (2016)

FUND

### **Employees, and Independent Contractors** Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

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

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

(A)	(B)			(C Posi	<b>(C</b>			(D)	(E)	(F)
Name and Title	Average hours per week	box.	not cl	POSI heck i ss per id a di	more	than is bot	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) JIM REYNOLDS	1.00					1			_	
CHAPTER COUNCILOR		X		X	ļ	ļ	ļ	1,000.	0.	0.
(2) BRIAN FLUETSCH	1.00								_	
VICE PRESIDENT		X	ļ	X	ļ	<u> </u>	ļ	1,000.	0.	0.
(3) DOUG HAPPE	1.00	l							_	
MEMBER EMERITUS		X	<b> </b>		<b> </b>	<u> </u>	<u> </u>	1,000.	0.	0.
(4) NED GEBERT	1.00	١							_	
TRUSTEE		X	ļ	ļ	ļ		ļ	0.	0.	0.
(5) TOM MONTGOMERY	1.00	-		l						_
SECRETARY-TREASURER		X	-	X	<b>.</b>	ļ	ļ	1,000.	0.	0.
(6) RICHARD HERMANSON	1.00	┨								_
TRUSTEE		X	-	<del> </del>	<del> </del>	ļ	<del> </del>	1,000.	0.	0.
(7) RUSS KIMBALL	1.00	۱						4 000		
TRUSTEE		X	-	<del> </del>		-	<del> </del>	1,000.	0.	0.
(8) MARK WEBSTER	1.00							1 000		
TRUSTEE	+	X	┼	-	╁	╄-	ļ	1,000.	0.	0.
(9) JULIE MULLER-NEFF	40.00	-	1					160 130		64 440
EXECUTIVE VICE PRESIDENT		-	╁┈	+	X		-	168,138.	0.	61,419.
		-								
		$\top$								
		1	$\dagger$			<del> </del>	$\top$			
		+-	+	-	+-	+	+			
The state of the s		1_	<b>-</b>	ļ	-	_	$\downarrow$			
		+		+-			<b>-</b>			
	<u> </u>		Д	Ш					<u> </u>	5000 (224.5)

632007 11-11-16

Form 990 (2016)

\$100,000 of compensation from the organization

Part VIII Statement	of Revenue						
Form 990 (2016)	FUND					91-6087551	Page 9
	WESTERN	WASHINGTON	SHEET	METAL	INDUSTRY		

			Check if Schedule O conta	ains a response o	or note to any line	ın this Part VIII			
	`	-				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a		Federated campaigns Membership dues	1a 1b				<del>.</del>	
S, E	c	:	Fundraising events	, 1c		-			
ig ig	c	i	Related organizations	1d		-	`		
ξĒ	•	•	Government grants (contribut	ions) 1e					
T S	f		All other contributions, gifts, gran	ts, and					
ξĒ			similar amounts not included above	ve 1f					
벌	ę	3	Noncash contributions included in lines	1a-1f \$					
<u>8</u> 0		1_	Total. Add lines 1a-1f		, <b>&gt;</b>				
				_	Business Code	4 === 60=			
ice	2 :		MEMBERSHIP DUES		900099	1,777,625.	1,777,625.	<del></del>	
e S			ORGANIZATIONAL	TRUST G	900099	23,689.	23,689.		
H S			OTHER		900099	5,074.	5,074.		
Rea	•	d							
Program Service Revenue	•	9				· · · · · · · · · · · · · · · · · · ·			
_	1		All other program service reve	enue .		1 006 200			
		<u>g_</u>	Total. Add lines 2a-2f			<u>1,806,388.</u>		·	
	3		Investment income (including	aiviaenas, inter	est, and	38,912.			20 012
	4		other similar amounts) Income from investment of ta	 v avamat band t	Ţ. ;	30,312.			38,912.
	5		Royalties	x-exempt bond p	Droceeds	······································			
	5		Hoyanies	(i) Real	(II) Personal	*	-		
	6	а	Gross rents	Wilde	(ii) i didonai	,	,		
		b	Less rental expenses						
			Rental income or (loss)						
			Net rental income or (loss)		. •	`			
			Gross amount from sales of	(i) Securities	(ii) Other	-			
			assets other than inventory			-1	-		
		b	Less cost or other basis						
			and sales expenses			٠,			
		C	Gain or (loss)	L				:	
		d	Net gain or (loss)		<u> </u>				
eune	8	а	Gross income from fundraisir including \$	•					
}ev			contributions reported on line						1
Other Rev			Part IV, line 18	ŧ	1	1			
É			Less direct expenses		o [				
_			Net income or (loss) from fun		<u> </u>	ļ	<del> </del>		
	9	а	Gross income from gaming a	ctivities See					
			Part IV, line 19		9	-{	1		
			Less direct expenses	_	· [	4			
			Net income or (loss) from gain						
	10	а	Gross sales of inventory, less						
			and allowances		9				
			Less' cost of goods sold		b L				
	-	c	Net income or (loss) from sal		h	<u> </u>			
			Miscellaneous Reven	<u> </u>	Business Code	4			
	11				1	<u> </u>			
		b						<u> </u>	
		C	***			<b>—</b>		-	
		d	Total. Add lines 11a-11d			1		<del>                                     </del>	
	12		Total revenue See instructions			1 845 300	.1,806,388.	<del>                                     </del>	38,912.
	1.14		TOTAL LEAGURE OCCUPATION	•		TT 10 TJ 100	· · · · · · · · · · · · · · · · · · ·		Form <b>990</b> (2016

### 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 (A) Total expenses (D) Fundraising Do not include amounts reported on lines 6b, Program service Management and 7b, 8b, 9b, and 10b of Part VIII. **expenses** general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 236,557 trustees, and key employees 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 125,592. Pension plan accruals and contributions (include 26,894 section 401(k) and 403(b) employer contributions) 17,433. Other employee benefits 17,056. 10 Payroll taxes Fees for services (non-employees) Management 270 Legal h 11,900. Accounting d Lobbying Professional fundraising services. See Part IV, line 17 11,716 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 11,076 column (A) amount, list line 11g expenses on Sch O.) 80,507. Advertising and promotion 12 63,671. 13 Office expenses 8,466. Information technology 14 Royalties 15 78,292. 16 Occupancy 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 499,456. 19 Conferences, conventions, and meetings 20 Interest 302,804. 21 Payments to affiliates 12,595. 22 Depreciation, depletion, and amortization 5,928. 23 Insurance 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 0.) DONATIONS 10,000. DUES & SUBSCRIPTIONS 9,961. 2,766. c SAFETY PROGRAM 2,269. d POSTAGE e All other expenses 1,535,209 Total functional expenses. Add lines 1 through 24e 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)

632010 11-11-16

91-6087551 Page 11 Form 990 (2016) FUND Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year 150. 150. Cash - non-interest-bearing 1,530,282. 2 Savings and temporary cash investments 2 2,276,046. 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 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 instr). Complete Part II of Sch L Assets 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 130,503. basis. Complete Part VI of Schedule D 10a 10b 28,996. 114,102. b Less accumulated depreciation 101,507. 10c 1,149,511. Investments - publicly traded securities 754,991. 11 11 561,058. Investments - other securities. See Part IV, line 11 534,901. 12 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 10,744. Other assets. See Part IV, line 11 8,394. 15 15 3,365,847. 3,675,989. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 Accounts payable and accrued expenses 17 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 21 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17:24). Complete Part X of <u>561,058.</u> Schedule D 25 <u>534,901.</u> 561,058. Total liabilities. Add lines 17 through 25 534,901. 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ 🛣 and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 2,804,789. 3,141,088. 27 27 Unrestricted net assets 28 Temporarily restricted net assets 28 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund

> 3,675,989. Form **990** (2016)

3,141,088.

32

33

2,804,789.

3,365,847.

32

33

Total net assets or fund balances

Total liabilities and net assets/fund balances

Retained earnings, endowment, accumulated income, or other funds

### WESTERN WASHINGTON SHEET METAL INDUSTRY

	990 (2016) FUND	91-60	87551	_Pac	e 12
Par	t-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	1,845	5,3	00.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,535	, 2	09.
3	Revenue less expenses Subtract line 2 from line 1	3	310	0,0	91.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,804		
5	Net unrealized gains (losses) on investments	5	26	5,2	08.
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			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
<u> </u>	column (B))	10	3,141	L , O	88.
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				$\mathbf{x}$
	,			Yes	No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other		.		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
ь	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,			
	consolidated basis, or both				
_	X Separate basis Consolidated basis Both consolidated and separate basis				
Ç	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
3-	If the organization changed either its oversight process or selection process during the tax year, explain in Sch As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				
Ja	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Act and OMB Circular A-133?	ngie Audit			v
_	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	دران ما امسان	3a		<u> </u>
D	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	JII BU AUGIT	0.		
	or addits, explain why in ochequie o and describe any steps taxen to undergo such addits		3b   Form	200	0010
			Form :	<b>330</b> (	2016)

632012 11-11-16

### **SCHEDULE C**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

2016

Open to Public Inspection

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

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

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B Do not complete Part II-B

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

<ul> <li>Section 501(c)(4), (5), or (6) organization</li> </ul>	ations: Complete Part III			
Name of organization WESTERI FUND	N WASHINGTON SHEE	r METAL IND	JSTRY Emp	loyer identification number 91-6087551
Part I-A Complete if the or	ganization is exempt und	er section 501(c)	or is a section 527 o	organization.
<ol> <li>Provide a description of the organ</li> <li>Political campaign activity expend</li> <li>Volunteer hours for political campaign</li> </ol>	itures	al campaign activities	n Part IV . ► s	Б
Part I-B Complete if the or	ganization is exempt und	er section 501(c)	(3).	
1 Enter the amount of any excise ta			, <b>&gt;</b> ;	<b>3</b>
2 Enter the amount of any excise ta	x incurred by organization manage	ers under section 4955	<b>&gt;</b> , , . ▶	B
3 If the organization incurred a sect	ion 4955 tax, did it file Form 4720	for this year?		Yes No
4a Was a correction made?				L Yes No
b If "Yes," describe in Part IV.  Part I-C   Complete if the or	rganization is exempt und	er section 501(c)	except section 501	(c)(3)
1 Enter the amount directly expend		······································		
2 Enter the amount of the filing orga	, ,	•	ection 527	
exempt function activities  3 Total exempt function expenditure	es Add lines 1 and 2 Enter here s	and on Form 1120-POL	▶:	<b>D</b>
line 17b	es. Add lines 1 and 2. Enter here a	11.0 OH 1 OHH 1 1201 OL	·•	\$
4 Did the filing organization file Fori	n 1120-POL for this year?		•	Yes No
5 Enter the names, addresses and	•	N) of all section 527 pe	olitical organizations to whi	
made payments. For each organize	zation listed, enter the amount pai	d from the filing organi	zation's funds. Also enter t	the amount of political
•	promptly and directly delivered to		•	ate segregated fund or a
political action committee (PAC)	if additional space is needed, pro-		·····	
(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-	
				delivered to a separate political organization If none, enter 0-
				political organization
				political organization
				political organization
				political organization
				political organization
				political organization
				political organization
				political organization
				political organization

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

Schedule C (Form 990 or 990-EZ) 2016

LHA

632041 11-10-18

### WESTERN WASHINGTON SHEET METAL INDUSTRY

Schedule C (Form 990 or 990-EZ) 2016 FUP Part II-A   Complete if the organ	JND nization is exe	mot under section :	501(c)(3) and file	91 - ( od Form 5768 (e	5087551 Page 2 election under
section 501(h)).			(-)(-)		
	n belongs to an aff	iliated group (and list in P	art IV each affiliated (	group member's nar	me, address, EIN,
expenses, and share of					
3 Check  if the filing organizatio	n checked box A a	nd "limited control" provis	sions apply		
Limits	on Lobbying Expe ures" means amo	enditures unts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe					
b Total lobbying expenditures to influe			-		
c Total lobbying expenditures (add line		dy (direct lobbying)	•		
d Other exempt purpose expenditures	3 Ta and To)	•	}	· · · · · · · · · · · · · · · · · · ·	
e Total exempt purpose expenditures	(add lines to and 1	d)	ŀ	· · · · · · · · · · · · · · · · · · ·	
f Lobbying nontaxable amount. Enter			columns	· · · · · · · · · · · · · · · · · · ·	
		bbying nontaxable amou	1 1	<u> </u>	
If the amount on line 1e, column (a) or ( Not over \$500,000		f the amount on line 1e	111(15.	•	
Over \$500,000 but not over \$1,000,		000 plus 15% of the exces	S OVER \$500 000	-	
Over \$1,000,000 but not over \$1,000,		000 plus 10% of the exces			
Over \$1,500,000 but not over \$17,00		000 plus 5% of the excess			
Over \$17,000,000	\$1.000		S OVER \$1,500,000	n	
Over \$17,000,000	1 \$1,000	7,000	J		
g Grassroots nontaxable amount (ente	er 25% of line 10				
h Subtract line 1g from line 1a. If zero		•		· · · · · · · · · · · · · · · · · · ·	
i Subtract line 1f from line 1c If zero					
j If there is an amount other than zero	•	r line 1i, did the organizat	ا on file Form 4720		
reporting section 4911 tax for this ye		<b></b>			Yes No
(Some organizations tha	at made a section See the sepa	veraging Period Under s 501(h) election do not harate instructions for line	ave to complete all ( es 2a through 2f.)	of the five columns	
	Lobbying Exp	enditures During 4-Year	Averaging Period	<del></del>	
Calendar year (or fiscal year beginning in)	(a) 2013	( <b>ь)</b> 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))			·		
c Total lobbying expenditures					
d Grassroots nontaxable amount			······································		
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990 EZ) 2016 FUND 91-6087551 Page 3
Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

f the lobbying activity.	(a	)	(b)	)
	Yes	No	Amo	unt
During the year, did the filing organization attempt to influence foreign, national, state or				······································
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				······································
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				<del></del> ,
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?				<del></del>
• • • • • • • • • • • • • • • • • • • •				
j Total. Add lines 1c through 1:				····
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912		<del></del>		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III-A Complete if the organization is exempt under section 501(c)(4), so	action EQ4(a)	/E) a= a=		<del></del>
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	sction 50 f(c)	(a), or se	ction	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	х	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures fr	om the prior yea		1	X
answered "Yes."  1 Dues, assessments and similar amounts from members			1	
		1	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of	political			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid).	political	-1-		
	political	2a		
expenses for which the section 527(f) tax was paid).  a Current year	political	-		
expenses for which the section 527(f) tax was paid).  a Current year	political	2a		
expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year		2a 2b		
expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total	es	2a 2b 2c		
expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	es ne excess	2a 2b 2c		
expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du	es ne excess	2a 2b 2c 3		
expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du  4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year?	es ne excess	2a 2b 2c		
expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du  4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)	es ne excess	2a 2b 2c 3		
expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du  4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)  Part IV Supplemental Information	es ne excess and political	2a 2b 2c 3	and 2 (see	
expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du  4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)  Part IV Supplemental Information  Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated)	es ne excess and political	2a 2b 2c 3	and 2 (see	
expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du  4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)  Part IV Supplemental Information  Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated)	es ne excess and political	2a 2b 2c 3	and 2 (see	
expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du  4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)  Part IV Supplemental Information  Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated)	es ne excess and political	2a 2b 2c 3	and 2 (see	
expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du  4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)  Part IV Supplemental Information  Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated)	es ne excess and political	2a 2b 2c 3	and 2 (see	
expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du  4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)  Part IV Supplemental Information  Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated)	es ne excess and political	2a 2b 2c 3	and 2 (see	
expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du  4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)	es ne excess and political	2a 2b 2c 3	and 2 (see	
expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du  4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)  Part IV Supplemental Information  Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated)	es ne excess and political	2a 2b 2c 3	and 2 (see	
expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du  4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)  Part IV Supplemental Information  Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated)	es ne excess and political	2a 2b 2c 3	and 2 (see	
expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du  4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)  Part IV Supplemental Information  Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated)	es ne excess and political	2a 2b 2c 3	and 2 (see	
expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du  4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)  Part IV Supplemental Information  Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated)	es ne excess and political	2a 2b 2c 3	and 2 (see	

Schedule C (Form 990 or 990-EZ) 2016

### SCHEDULE D

(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047 16 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

**FUND** 

WESTERN WASHINGTON SHEET METAL INDUSTRY

**Employer identification number** 91-6087551

Par	organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		o or proodures. Complete in the
		(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 adv	ised funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can b	e used only
	for chantable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpos	e conferring
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990	. Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a his	storically important land area
	Protection of natural habitat	Preservation of a ce	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the forr	n of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements	•	. 2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ructure included in (a)	. 2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struc	cture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by t	he organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea		-
5	Does the organization have a written policy regarding the pe	• •	f
	violations, and enforcement of the conservation easements		YesNo
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing co	nservation easements during the year
_			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conser	vation easements during the year
_			TO IN VANCO
8	Does each conservation easement reported on line 2(d) abo and section 170(h)(4)(B)(ii)?	ve satisfy the requirements of section 17	
9		tion anapments in the revenue and even	Yes No
9	In Part XIII, describe how the organization reports conservation include, if applicable, the text of the footnote to the organization		
	conservation easements	ation's imancial statements that describe	is the organization's accounting for
Pa	irt III Organizations Maintaining Collections of	of Art. Historical Treasures, or	Other Similar Assets
	Complete if the organization answered "Yes" on Forn		other on mar Addets.
12	If the organization elected, as permitted under SFAS 116 (A		ement and halance shoot works of ort
	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that descri		rance of public service, provide, in Fart Ain,
ь	If the organization elected, as permitted under SFAS 116 (A		ant and halance sheet works of art, historian
•	treasures, or other similar assets held for public exhibition, e		
	relating to these items:	saddation, or resource in the thirtierance of p	done service, provide the following amounts
	(i) Revenue included on Form 990, Part VIII, line 1		▶ ¢
	(ii) Assets included in Form 990, Part X		. <b>&gt;</b> \$
2	If the organization received or held works of art, historical tre	easures or other similar assets for finance	Cial dain provide
~	the following amounts required to be reported under SFAS		nai gairi, provide
2	Revenue included on Form 990, Part VIII, line 1	The frace and relating to these items.	<b>&gt;</b> \$
	Assets included in Form 990, Part X	•	

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

632051 08-29-16

Schedule D (Form 990) 2016

### · WESTERN WASHINGTON SHEET METAL INDUSTRY

	ule D (Form 990) 2016 FUND					0.1			37551	
Part										
3	Using the organization's acquisition, accessio	n, and other records	s, check a	any of the f	ollowing that	are a sign	ificant use	of its c	ollection	items
(	check all that apply):									
а	Public exhibition	ď		oan or exch	ange progra	ms				
b	Scholarly research	е	L 0	ther						
С	Preservation for future generations									
4	Provide a description of the organization's co	llections and explair	n how the	y further th	e organizatio	n's exemp	ot purpose	ın Part	XIII.	
5	During the year, did the organization solicit or	receive donations of	of art, hist	torical treas	ures, or othe	r sımılar a	ssets	<u> ,</u>	-	
	to be sold to raise funds rather than to be ma	intained as part of t	he organi	zation's co	llection?				Yes	No_
Par	Escrow and Custodial Arrang reported an amount on Form 990, Par		ete if the o	organization	n answered "	Yes" on Fo	orm 990, P	art IV, I	ıne 9, or	
1a	is the organization an agent, trustee, custodia	an or other intermed	liary for c	ontribution	s or other ass	sets not in	cluded			
	on Form 990, Part X?		-						Yes	□ No
	If "Yes," explain the arrangement in Part XIII a	and complete the fo	llowing ta	rple.					-	
_		•	ŭ						Amount	
С	Beginning balance						1c			
	Additions during the year	,					1d			
	Distributions during the year	•				,	1e			
f	Ending balance						1f			
	Did the organization include an amount on Fo	orm 990. Part X. line	21. for e	scrow or cu	istodial acco	unt liability	/?		Yes	□ No
	If "Yes," explain the arrangement in Part XIII									
Par										
L	· · · · · · · · · · · · · · · · · · ·	(a) Current year	r	nor year	(c) Two year	····	) Three year	rs back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
C	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur-	rent year end baland	ce (line 1g	g, column (a	a)) held as					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
c	Temporarily restricted endowment ▶	%								
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.								
За	Are there endowment funds not in the posses	ession of the organiz	ation tha	t are held a	nd administe	red for the	organizati	ion	_	
	by.									Yes No
	(i) unrelated organizations	,							3a(ı)	
	(ii) related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requi	ired on S	chedule R?					3b	
4	Describe in Part XIII the intended uses of the	· · · · · · · · · · · · · · · · · · ·	owment f	unds		·				
Pa	rt VI Land, Buildings, and Equipm									
	Complete if the organization answere					), Part X, II	ne 10.			····
	Description of property	(a) Cost or o			or other	٠,	umulated		(d) Book	value
		basis (invest	ment)	basis	(other)	depr	eciation			······································
1a	Land						<del></del>		·	
þ	Buildings .									
C	Leasehold improvements				1,843.		6,626			<u>,217.</u>
	Equipment			6	8,660.		<u>22,370</u>	U •	4 (	5,290.
	Other									
Tota	I. Add lines 1a through 1e (Column (d) must e	equal Form 990, Par	t X, colun	nn (B), line	10c)			<b>&gt;</b>	10:	L,507.

and the state of t	on Form 990, Part IV, Iin	e 11b. See Form 990, Part X, I	ine 12.
(a) Description of security or category (including name of security)	(b) Book value	··	Cost or end-of-year market value
1) Financial derivatives			
2) Closely-held equity interests			
3) Other			
(A) DEFERRED COMPENSATION			
(B) PLAN ASSET	534,901	. END-OF-YEAR	MARKET VALUE
(C)			
(D)			·
(E)			
(F)			
(G)			
(H)			
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	534,901		
Part VIII Investments - Program Related.	JJ4,701	• 1	<del></del>
Complete if the organization answered "Yes"	an Form 000 Doubly Ive	- 11- C F 000 D-+V	
(a) Description of investment	(b) Book value	(c) Method of valuation	: Cost or end-of-year market value
	(D) DOOK VAIGO	(c) morned of valuation	. Oost or end-or-year market value
(1)			
(2)			
(3)			
(4)	· · · · · · · · · · · · · · · · · · ·		
(5)			
(6)			
(7)			
(8)	, , ,		
(9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	ļ		
Part IX Other Assets.  Complete if the organization answered "Yes"  (a)	on Form 990, Part IV, III Description	ne 11d See Form 990, Part X,	line 15 (b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(7) (8)			
(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) lir Part X Other Liabilities.			
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) lir Part X Other Liabilities. Complete if the organization answered "Yes"			art X, line 25.
(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) lir Part X Other Liabilities.		ne 11e or 11f See Form 990, F (b) Book value	Part X, line 25.
(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organization answered "Yes"  1. (a) Description of liability (1) Federal income taxes	on Form 990, Part IV, III	(b) Book value	Part X, line 25.
(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) lir Part X Other Liabilities. Complete if the organization answered "Yes' 1. (a) Description of liability	on Form 990, Part IV, III		Part X, line 25.
(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organization answered "Yes"  1. (a) Description of liability (1) Federal income taxes	on Form 990, Part IV, III	(b) Book value	Part X, line 25.
(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) DEFERRED COMPENSATION PLA	on Form 990, Part IV, III	(b) Book value	art X, line 25.
(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities.  Complete if the organization answered "Yes"  1. (a) Description of liability (1) Federal income taxes (2) DEFERRED COMPENSATION PLA (3)	on Form 990, Part IV, III	(b) Book value	art X, line 25.
(8) (9)  Total. (Column (b) must equal Form 990, Part X, col (B) lir  Part X Other Liabilities.  Complete if the organization answered "Yes'  1. (a) Description of liability  (1) Federal income taxes  (2) DEFERRED COMPENSATION PLA  (3) (4)	on Form 990, Part IV, III	(b) Book value	Part X, line 25.
(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) lire Part X Other Liabilities.  Complete if the organization answered "Yes"  1. (a) Description of liability (1) Federal income taxes (2) DEFERRED COMPENSATION PLA (3) (4) (5)	on Form 990, Part IV, III	(b) Book value	Part X, line 25.
(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities.  Complete if the organization answered "Yes"  1. (a) Description of liability  (1) Federal income taxes  (2) DEFERRED COMPENSATION PLA  (3) (4) (5) (6)	on Form 990, Part IV, III	(b) Book value	Part X, line 25.
(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities.  Complete if the organization answered "Yes"  1. (a) Description of liability  (1) Federal income taxes  (2) DEFERRED COMPENSATION PLA  (3)  (4)  (5)  (6)  (7)	on Form 990, Part IV, III	(b) Book value	Part X, line 25.
(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organization answered "Yes"  1. (a) Description of liability  (1) Federal income taxes  (2) DEFERRED COMPENSATION PLA  (3) (4) (5) (6) (7) (8)	on Form 990, Part IV, III	(b) Book value	Part X, line 25.

Schedule D (Form 990) 2016

### . WESTERN WASHINGTON SHEET METAL INDUSTRY

Sche <b>Pa</b> r	t XI Reconciliation of Revenue per Audited Financial Stateme	ante With	Revenue per R	91-1	6087551 Page
rai	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		neveriue per n	otuin	<b>1.</b>
1	Total revenue, gains, and other support per audited financial statements	*		1	1,871,508
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			-	1,0/1,508
a	Net unrealized gains (losses) on investments	2a	26,208.		
b	Donated services and use of facilities	2b	20,200.		
C	Recoveries of prior year grants	20 2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d	Zu		2e	26,208
3	Subtract line 2e from line 1			3	1,845,300
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.		• •	3	1,043,300
a	Investment expenses not included on Form 990, Part VIII, line 7b	100			
b	Other (Describe in Part XIII.)	4a 4b			
c	Add lines 4a and 4b	1 40			0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		!	4c	0 1,845,300
	t XII Reconciliation of Expenses per Audited Financial Staten	nents Wit	h Expenses per		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		Exponded per		
1	Total expenses and losses per audited financial statements			1	1,535,209
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				1,000,200
~ a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b		1 1	
c	Other losses	2c		1 1	
d	Other (Describe in Part XIII )	2d			
_	Add lines 2a through 2d			2e	0
3	Subtract line 2e from line 1		•	3	1,535,209
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			•
c	Add lines 4a and 4b			4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	1,535,209
Pa	rt XIII Supplemental Information.				
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Pai			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 ad	ditional infor	mation		
				····	
			······································		
	MCT-71************************************				
		· · · · · · · · · · · · · · · · · · ·			
	48		······································		
					dule D (Form 990) 20

### SCHEDULE J (Form 990)

Department of the Treasury

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.

Open to Public

91-6087551

Internal Revenue Service

Name of the organization

FUND

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

WESTERN WASHINGTON SHEET METAL INDUSTRY Employee

Inspection
Employer identification number

OMB No 1545-0047

Part I **Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items X First-class or charter travel Housing allowance or residence for personal use X Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as, maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain Х 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? X 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Compensation survey or study Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? X X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Х c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of. a The organization? Any related organization? 5b If "Yes" on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of. a The organization? 6a b Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes." describe in Part III 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

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

Schedule J (Form 990) 2016

Regulations section 53 4958-6(c)?

### 91-6087551 WESTERN WASHINGTON SHEET METAL INDUSTRY FUND

Schedule J (Form 990) 2016

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i) (iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

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		(B) Breakdown of W	W-2 and/or 1099-MISC compensation	oc compensation	(C) Retirement and	(U) Nontaxable	(E) lotal of countilis	(F) compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	6119180	(2)(2)	ම් ව
(1) JULIE MULLER-NEFF	ε	144,638.	10,000.	13,500.	47,345.	14,074.	229,557.	0.
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Schedule J (Form 990) 2016

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Schedule J (Form 990) 2016

Provide the information, explanation, or descriptions required for Part 1, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information. Part III Supplemental Information

1A:	THE EXECUTIVE VICE PRESIDENT, PRESIDENT AND CHAPTER COUNCILOR TRAVEL BY	AIRFARE. SPOUSES OF THE PRESIDENT AND EXECUTIVE VICE PRESIDENT	D CONVENTIONS AT								Schedule J (Form 990) 2016
PART I, LINE 1A:	THE EXECUTIVE VICE PRE	FIRST CLASS AIRFARE.	ATTEND CONFERENCES AND								

### **SCHEDULE L**

Department of the Treasury Internal Revenue Service

### **Transactions With Interested Persons**

(Form 990 or 990-EZ) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open To Public Inspection

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1	(b)	Relationship bety			fied					<u>U.</u>	(d)	Correc	cted?
(a) Name of disqualified	person	person and or			(c	) De	scription of tran	sactio	n	<del></del>	Ye		No
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<ul><li>2 Enter the amount of ta section 4958</li><li>3 Enter the amount of ta</li></ul>		•	_			ing f	the year under		► \$ ► \$				
Part II Loans to a	nd/or From I	nterested Per	sons	•							<del></del>		
•	-				, Part V, line 38a or F	orm	990, Part IV, Iir	ne 26;	or if th	e orga	nizatio	on	
reported an ar	nount on Form 9 (b) Relationsh	90, Part X, line 5, ( ip (c) Purpose		2. oan to or	(e) Original	10	Balance due	(0)	) In	(h) App	roved	(3) \A/	ritten
interested person	with organizati		fron	n the zation?	principal amount	(1)	balance due		ult?	by boa	ard or 1	עע נון ן	ment?
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Complete if the (a) Name of intereste		nswered "Yes" on (b) Relationship			art IV, line 27 (c) Amount of		(d) Type	e of		le	) Purp	ose o	
(a) Namo or intereste	,	interested per the organiz	rson ar		assistance		assistar				assist		
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Schedule L (Form 990 or 990-EZ) 2016

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

### WESTERN WASHINGTON SHEET METAL INDUSTRY

91-6087551 Page 2

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c (e) Sharing of (b) Relationship between interested (c) Amount of (a) Name of interested person (d) Description of organization's person and the organization transaction transaction revenues? Yes No HEIDI COLEMAN IS TH 61,700 HEIDI SERVE HEIDI COLEMAN X BARON DERR BARON DERR IS THE 12,000 BARON PROVI X Part V Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions) SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: HEIDI COLEMAN (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: HEIDI COLEMAN IS THE DAUGHTER OF THE FORMER EXECUTIVE VICE PRESIDENT (D) DESCRIPTION OF TRANSACTION: HEIDI SERVES AS THE DIRECTOR OF OPERATIONS AND IS AN EMPLOYEE (A) NAME OF PERSON: BARON DERR (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: BARON DERR IS THE FORMER EXECUTIVE VICE PRESIDENT (D) DESCRIPTION OF TRANSACTION: BARON PROVIDES CONSULTING SERVICES TO THE ORGANIZATION

Schedule L (Form 990 or 990-EZ) 2016

Schedule L (Form 990 or 990-EZ) 2016 FUND

### **SCHEDULE O**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

### 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.

2016
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OMB No 1545-0047

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

WESTERN WASHINGTON SHEET METAL INDUSTRY Employer identification number

FUND 91-6087551 FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 IS PROVIDED TO THE OFFICERS FOR THEIR REVIEW BEFORE IT IS FILED FORM 990, PART VI, SECTION B, LINE 12C: DISCLOSURE FORM IS COMPLETED ANNUALLY BE EACH RESPONSIBLE PERSON FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST FORM 990, PART XII, LINE 2C: THE ORGANIZATION HAS NOT CHANGED ITS OVERSIGHT OR SELECTION PROCESS.

(g) Section 512(b)(13) controlled Schedule R (Form 990) 2016 S Employer identification number Open to Public Inspection OMB No 1545-0047 × 2016 entity? Direct controlling 91-6087551 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. Direct controlling entity End-of-year assets status (if section **e** Public charity 501(c)(3)) <u>e</u> Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Information about Schedule R (Form 990) and its instructions is at www.lrs.gov/form990. Total income Related Organizations and Unrelated Partnerships Exempt Code Ð section 501(C)(6) ত্ত Legal domicile (state or Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 Legal domicile (state or foreign country) foreign country) ► Attach to Form 990. WESTERN WASHINGTON SHEET METAL INDUSTRY WASHINGTON PROMOTE THE SHEET METAL Primary activity Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. INDUSTRY 91-0815085 13810 SE EASTGATE WAY #445 SMACNA WESTERN WASHINGTON ASSOCIATION Name, address, and EIN (if applicable) Name, address, and EIN of related organization FUND of disregarded entity 98005 Name of the organization Department of the Treasury Internal Revenue Service BELLEVUE, WA SCHEDULER (Form 990) Part Part

WESTERN WASHINGTON SHEET METAL INDUSTRY FUND

Schedule R (Form 990) 2016 FUND

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.

Page 2

91-6087551

(a)	(q)	<u> </u>	<b>(</b> g		(e)	3	(a)		3	8			£
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	(related, excluded from	Predominant income (related, unrelated, excluded from tax under sections 510-514)	Share of total income	Share of end-of-year assets		ortonate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	Pero Pero	General or Percentage managing ownership partner?
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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	ganizations Taxable a	s a Corpor g the tax ye	ration or Trust. Co	omplete if th	ne organization	answered "Y	es" on Form	990, Part IN	/, line 34	because it ha	d one or	more re	slated
(a)			(p)	<u> </u>	9		(e)	£	·····		Ξ		<u>.</u>
Name, address, and EIN of related organization	Zc	Pnma	ctivity	Legal domicile (state or foreign country)	Direct controlling entity		Type of entity (C corp, S corp, or trust)	Share of total income	······································	Share of end-of year assets	Percentage ownership		512(b)(13) controlled entity?
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# WESTERN WASHINGTON SHEET METAL INDUSTRY FUND

91-6087551

Schedule R (Form 990) 2016 FUND

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

1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1						3	L
Note: Complete line I if any entity is listed in Parts II, III, or IV of this schedule  1. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more r	elated organizations liste	d in Parts II-IV?		Ŀ	<u>.</u>	2
-	· >		;		13	8	×
<b>b</b> Gift, grant, or capital contribution to related organization(s)				•	9	۵	×
c Gift, grant, or capital contribution from related organization(s)	•		•		5		×
	•	•	: :	•	<u> </u>	_	×
	•		:	:	: =	- A	×
			:		<u> </u>	7/.	<u> </u>
f Dividends from related organization(s)					=		×
g Sale of assets to related organization(s)		:	:		1		×
h Purchase of assets from related organization(s)			•		÷		×
i Exchange of assets with related organization(s)	,	•	•		¥		×
j Lease of facilities, equipment, or other assets to related organization(s)	:				1,		×
	•				** :		٠. ا
k Lease of facilities, equipment, or other assets from related organization(s)		:			<b>*</b> :		×
! Performance of services or membership or fundraising solicitations for related organization(s)	ınızation(s)		:	;	=	_	×
m Performance of services or membership or fundraising solicitations by related organization(s)	ınızation(s)				Ę		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ion(s)	;		:	t,	_	×
o Sharing of paid employees with related organization(s)					4	_	×
p Reimbursement paid to related organization(s) for expenses		:		:	4	_	×
q Reimbursement paid by related organization(s) for expenses	:		:		10		×
<ul> <li>Other transfer of cash or property to related organization(s)</li> </ul>	,			:	+	_	×
s Other transfer of cash or property from related organization(s)				•	15		×
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.	the must complete the	is line, including covered	frelationships and to	ansaction thresholds.			
(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	Metho	(d) Method of determining amount involved	nt involvec	T3	
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## WESTERN WASHINGTON SHEET METAL INDUSTRY FUND

Schedule R (Form 990) 2016

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.

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Name, address, and EIN	Primary activity	Legal domicile (state or foreign	redominant income in (related, unrelated, 15)	501(c)(3) 5010s ?	Share of total	Share of end-of year	tonate allocations?	tonate amount in box 20 managing ownership allocations? of Schedule K-1 partner?	managin partner	
(111)		country)	sections 512-514)	Yes No	псоте	assets	Yes No	(Form 1065)	Yes No	
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### WESTERN WASHINGTON SHEET METAL INDUSTRY 91-6087551 Page 5 Schedule R (Form 990) 2016 FUND Part VII Supplemental Information. Provide additional information for responses to questions on Schedule R. See instructions