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

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047
2005
Open to Public Inspection

A For the 2005 calendar year, or tax year beginning 07-01-2005 and ending 06-30-2006

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

C Name of organization
 INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
 ELECTRICAL WORKERS

Number and street (or P O box if mail is not delivered to street address) Room/suite
 900 7TH STREET NW

City or town, state or country, and ZIP + 4
 WASHINGTON, DC 20001

D Employer identification number
 53-0088380

E Telephone number
 (202) 728-6200

F Accounting method Cash Accrual
 Other (specify) _____

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Web site: www.ibew.org

J Organization type (check only one) 501(c) (5) (insert no) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes" enter number of affiliates _____

H(c) Are all affiliates included? Yes No
 (If "No," attach a list. See instructions.)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Group Exemption Number _____

M Check if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 **886,836,724**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Revenue	1	Contributions, gifts, grants, and similar amounts received			
	a	Direct public support	1a		
	b	Indirect public support	1b		
	c	Government contributions (grants)	1c		
	d	Total (add lines 1a through 1c) (cash \$ _____ noncash \$ _____)		1d	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)		2	2,720,200
	3	Membership dues and assessments		3	82,101,905
	4	Interest on savings and temporary cash investments		4	137,201
	5	Dividends and interest from securities		5	14,309,042
	6a	Gross rents	6a		
	b	Less rental expenses	6b		
	c	Net rental income or (loss) (subtract line 6b from line 6a)		6c	
	7	Other investment income (describe _____)		7	
8a	Gross amount from sales of assets other than inventory		(A) Securities	(B) Other	
			785,220,383	8a	12,465
	b	Less cost or other basis and sales expenses	763,084,822	8b	1,010
	c	Gain or (loss) (attach schedule)	22,135,561	8c	11,455
d	Net gain or (loss) (combine line 8c, columns (A) and (B))		8d	22,147,016	
9	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>				
	a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a		
	b	Less direct expenses other than fundraising expenses	9b		
c	Net income or (loss) from special events (subtract line 9b from line 9a)		9c		
10a	Gross sales of inventory, less returns and allowances		10a	820,781	
	b	Less cost of goods sold	10b	843,709	
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)		10c	-22,928
11	Other revenue (from Part VII, line 103)		11	1,514,747	
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)		12	122,907,183	
Expenses	13	Program services (from line 44, column (B))		13	
	14	Management and general (from line 44, column (C))		14	
	15	Fundraising (from line 44, column (D))		15	
	16	Payments to affiliates (attach schedule)		16	6,879,188
	17	Total expenses (add lines 16 and 44, column (A))		17	112,326,136
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)		18	10,581,047
	19	Net assets or fund balances at beginning of year (from line 73, column (A))		19	392,617,905
	20	Other changes in net assets or fund balances (attach explanation)		20	-13,383,200
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)		21	389,815,752

Part II Statement of Functional Expenses

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See the instructions)

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc	25	4,768,923		
26	Other salaries and wages	26	31,862,430		
27	Pension plan contributions	27	9,810,161		
28	Other employee benefits	28	22,237,846		
29	Payroll taxes	29	5,343,123		
30	Professional fundraising fees	30			
31	Accounting fees	31	77,250		
32	Legal fees	32	2,650,601		
33	Supplies	33	1,449,633		
34	Telephone	34	510,647		
35	Postage and shipping	35	321,790		
36	Occupancy	36	5,052,971		
37	Equipment rental and maintenance	37	632,989		
38	Printing and publications	38	2,620,655		
39	Travel	39	6,148,080		
40	Conferences, conventions, and meetings	40	1,406,679		
41	Interest	41			
42	Depreciation, depletion, etc (attach schedule) <input checked="" type="checkbox"/>	42	3,043,712		
43	Other expenses not covered above (itemize)				
a	See Additional Data Table	43a			
b		43b			
c		43c			
d		43d			
e		43e			
f		43f			
g		43g			
44	Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	105,446,948		

Joint Costs. Check if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____, (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► IRC 501(c)(5) LABOR ORGANIZATION All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)
a TO ORGANIZE ALL WORKERS FOR THE MORAL, ECONOMIC AND SOCIAL ADVANCEMENT AND THEIR CONDITION AND STATUS (Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
b (Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
c (Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
d (Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash—non-interest-bearing		45	
	46 Savings and temporary cash investments	42,368,248	46	39,799,765
	47a Accounts receivable	12,466,359		
	b Less allowance for doubtful accounts		8,562,356	47c 12,466,359
	48a Pledges receivable			
	b Less allowance for doubtful accounts			48c
	49 Grants receivable			49
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)			50
	51a Other notes and loans receivable (attach schedule)	6,572,314		
	b Less allowance for doubtful accounts		852,628	51c 6,572,314
	52 Inventories for sale or use	1,238,687	52	1,349,695
	53 Prepaid expenses and deferred charges	482,590	53	1,829,609
	54 Investments—securities (attach schedule) <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	347,182,714	54	385,552,705
	55a Investments—land, buildings, and equipment basis			
	b Less accumulated depreciation (attach schedule)			55c
56 Investments—other (attach schedule)	101,489,035	56	56,849,630	
57a Land, buildings, and equipment basis	38,930,015			
b Less accumulated depreciation (attach schedule)	7,238,359	28,859,270	57c 31,691,656	
58 Other assets (describe <input type="checkbox"/> _____)	44,433,425	58	45,056,013	
59 Total assets (must equal line 74) Add lines 45 through 58	575,468,953	59	581,167,746	
Liabilities	60 Accounts payable and accrued expenses	20,892,464	60	39,120,055
	61 Grants payable		61	
	62 Deferred revenue	4,511,324	62	5,036,109
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe <input type="checkbox"/> _____)	157,447,260	65	147,195,830
66 Total liabilities Add lines 60 through 65	182,851,048	66	191,351,994	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	392,617,905	67	389,815,752
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	392,617,905	73	389,815,752
	74 Total liabilities and net assets / fund balances Add lines 66 and 73	575,468,953	74	581,167,746

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements		a	114,397,177
b	Amounts included on line a but not on line 12			
1	Net unrealized gains on investments	b1	-13,383,200	
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3		
4	Other (specify) <input type="checkbox"/> _____	b4	6,298,268	
	Add lines b1 through b4			b -7,084,932
c	Subtract line b from line a			c 121,482,109
d	Amounts included on line 12, but not on line a			
1	Investment expenses not included on line 6b	d1	1,271,443	
2	Other (specify) <input type="checkbox"/> _____	d2	153,631	
	Add lines d1 and d2			d -7,084,932
e	Total revenue (line 12) Add lines c and d			e 122,907,183

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements		a	117,199,330
b	Amounts included on line a but not on line 17			
1	Donated services and use of facilities	b1		
2	Prior year adjustments reported on line 20	b2		
3	Losses reported on line 20	b3		
4	Other (specify) <input type="checkbox"/> _____	b4	8,224,637	
	Add lines b1 through b4			b 8,224,637
c	Subtract line b from line a			c 108,974,693
d	Amounts included on line 17, but not on line a :			
1	Investment expenses not included on line 6b	d1	1,271,443	
2	Other (specify) <input type="checkbox"/> _____	d2	2,080,000	
	Add lines d1 and d2			d 3,351,443
e	Total expenses (line 17) Add lines c and d			e 112,326,136

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
See Additional Data Table				

Part VI Other Information (continued)

Yes No

<p>82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?</p> <p>b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III)</p>	82a		No
<p>83a Did the organization comply with the public inspection requirements for returns and exemption applications?</p> <p>b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?</p>	83a	Yes	
<p>84a Did the organization solicit any contributions or gifts that were not tax deductible?</p> <p>b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</p>	84a	Yes	
<p>85 <i>501(c)(4), (5), or (6) organizations.</i> a Were substantially all dues nondeductible by members?</p> <p>b Did the organization make only in-house lobbying expenditures of \$2,000 or less?</p> <p>If "Yes," was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed the prior year.</p> <p>c Dues assessments, and similar amounts from members</p> <p>d Section 162(e) lobbying and political expenditures</p> <p>e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices</p> <p>f Taxable amount of lobbying and political expenditures (line 85d less 85e)</p> <p>g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?</p> <p>h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?</p>	85a	Yes	
<p>86 <i>501(c)(7) orgs.</i> Enter a Initiation fees and capital contributions included on line 12</p> <p>b Gross receipts, included on line 12, for public use of club facilities</p>	82b		
<p>87 <i>501(c)(12) orgs.</i> Enter a Gross income from members or shareholders</p> <p>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</p>	85c		
<p>88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX</p>	85d		
<p>89a <i>501(c)(3) organizations</i> Enter Amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> _____, section 4912 <input type="checkbox"/> _____, section 4955 <input type="checkbox"/> _____</p> <p>b <i>501(c)(3) and 501(c)(4) orgs.</i> Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction</p> <p>c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="checkbox"/></p> <p>d Enter Amount of tax on line 89c, above, reimbursed by the organization <input type="checkbox"/></p>	85e		
<p>90a List the states with which a copy of this return is filed <input type="checkbox"/> DC</p> <p>b Number of employees employed in the pay period that includes March 12, 2005 (See instructions) <input type="checkbox"/></p>	85f		
<p>91a The books are in care of <input type="checkbox"/> THE ORGANIZATION Telephone no <input type="checkbox"/> (202) 728-6200</p> <p style="margin-left: 40px;">900 7TH STREET NW WASHINGTON D</p> <p>Located at <input type="checkbox"/> WASHINGTON, DC ZIP + 4 <input type="checkbox"/> 20001</p>	85g		
<p>92 <i>Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041</i>—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/></p>	85h		
<p>91b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</p> <p>If "Yes," enter the name of the foreign country <input type="checkbox"/> _____</p> <p>See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</p>	86a		
<p>91c At any time during the calendar year, did the organization maintain an office outside of the United States?</p> <p>If "Yes," enter the name of the foreign country <input type="checkbox"/> _____</p>	86b		
<p>92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/></p>	87a		
<p>92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/></p>	87b		

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a ADMINREIMBURSEMENTS					2,720,200
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					82,101,905
95 Interest on savings and temporary cash investments			14	137,201	
96 Dividends and interest from securities			14	14,309,042	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b non debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	22,147,016	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory			01	-22,928	
103 Other revenue a SPECIAL PROJECT FEES					1,090,772
b REFUNDS					95,691
c AFFINITY CARD ROYALTIES			15	1,711,856	
d CONFERENCE FEES					542,797
e Partnership Income (Loss)	531120	-284,298	16	-1,642,071	
104 Subtotal (add columns (B), (D), and (E))		-284,298		36,640,116	86,551,365
105 Total (add line 104, columns (B), (D), and (E))					122,907,183

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	See Additional Data Table

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
IBEW HEADQUARTERS BUILDING LLC 601 Thirteenth Street NW Washington, DC20005 20-1187115	99 0000	RENTAL ACTIVITY	-1,790,193	133,052,505
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

NOTE: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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

Please Sign Here

Signature of officer: _____ Date: 2007-02-22

Jon Walters Secretary-Treasurer
Type or print name and title

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: CALIBRE CPA GROUP PLLC
1850 K STREET NW
WASHINGTON, DC 20006

Preparer's SSN or PTIN (See Gen Inst W): _____
EIN: _____
Phone no: (202) 331-9880

Additional Data**Software ID:****Software Version:****EIN:** 53-0088380**Name:** INTERNATIONAL BROTHERHOOD OF ELECTRICAL
WORKERS
ELECTRICAL WORKERS**Form 990, Part II, Line 43 - Other expenses not covered above (itemize):**

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
a ACTUARIAL FEES	43a	326,192			
b CONTRIBUTIONS	43b	1,223,954			
c DUES AND SUBSCRIPTIONS	43c	389,639			
d OTHER PROFESSIONAL FEES	43d	1,607,863			
e GENERAL EXPENSE	43e	88,814			
f INSURANCE	43f	877,558			
g MOVING AND TEMPORARY HOUSING	43g	447,318			
h PUBLIC RELATIONS	43h	59,808			
i COUNCIL ON INDUSTRY RELATIONS	43i	44,578			
j PERSONAL PROPERTY AND SALES TAXES	43j	430,558			
k INVESTMENT EXPENSE	43k	1,271,443			
l FOREIGN EXCHANGE LOSS (GAIN)	43l	-2,818,318			
m REFUNDS AND REBATES	43m	29,267			
n SPECIAL PROJECTS	43n	3,530,784			

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
g lucero 900 7TH STREET NW WASHINGTON,DC 20001	inTNL EXEC CN 10 00	31,269	23,417	0
s schoemehl 900 7TH STREET NW WASHINGTON,DC 20001	inTNL EXEC CN 10 00	22,904	17,107	0
m calvey 900 7TH STREET NW WASHINGTON,DC 20001	inTNL EXEC CN 10 00	22,904	17,107	0
ED HILL 900 7TH STREET NW WASHINGTON,DC 20001	INTNL PRES 40 00	260,173	93,356	45,028
jf WALTERS 900 7TH STREET NW WASHINGTON,DC 20001	INTNL SECTYTREAS 40 00	229,827	84,252	32,566
FJ CARROLL JR 900 7TH STREET NW WASHINGTON,DC 20001	INTNL VP 40 00	160,443	63,437	0
R CARRINHO 900 7TH STREET NW WASHINGTON,DC 20001	INTNL EXEC CN 10 00	77,501	38,554	0
lk lee 900 7TH STREET NW WASHINGTON,DC 20001	INTNL VP 40 00	156,936	62,384	1,484
J SCHANTZEN 900 7TH STREET NW WASHINGTON,DC 20001	INTNL VP 40 00	160,443	63,437	1,169
M MOWREY 900 7TH STREET NW WASHINGTON,DC 20001	INTNL VP 40 00	160,443	63,437	514

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
R KLEIN 900 7TH STREET NW WASHINGTON,DC 20001	INTNL VP 40 00	160,443	63,437	1,427
PJ WITTE 900 7TH STREET NW WASHINGTON,DC 20001	INTNL VP 40 00	160,443	63,437	3,050
WEADS 900 7TH STREET NW WASHINGTON,DC 20001	INTNL VP 40 00	12,974	5,259	0
S CHILIA 900 7TH STREET NW WASHINGTON,DC 20001	INTNL EXEC CN 10 00	34,020	25,510	0
rw pderson 900 7TH STREET NW WASHINGTON,DC 20001	INTNL EXEC CN 10 00	29,583	20,378	0
LK QUERRY 900 7TH STREET NW WASHINGTON,DC 20001	INTNL EXEC CN 10 00	117,082	50,428	0
T JENSEN 900 7TH STREET NW WASHINGTON,DC 20001	INTNL VP 40 00	160,443	63,437	1,507
J FASHION 900 7TH STREET NW WASHINGTON,DC 20001	INTNL EXEC CN 10 00	29,471	16,668	0
ML FOSTER 900 7TH STREET NW WASHINGTON,DC 20001	INTNL EXEC CN 10 00	91,794	42,842	0
P FLEMMING 900 7TH STREET NW WASHINGTON,DC 20001	INTNL VP 40 00	138,988	49,523	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Jf Iohman 900 7TH STREET NW WASHINGTON,DC 20001	INTNL VP 40 00	160,443	63,437	2,093
J GARDNER 900 7TH STREET NW WASHINGTON,DC 20001	INTNL VP 40 00	160,443	63,437	4,030
D SIEGEL 900 7TH STREET NW WASHINGTON,DC 20001	INTNL VP 40 00	160,443	63,437	1,585
L PLOTT 900 7TH STREET NW WASHINGTON,DC 20001	INTNL EXEC CN 10 00	34,020	25,510	0
W TURNER 900 7TH STREET NW WASHINGTON,DC 20001	INTNL EXEC CN 10 00	110,365	48,413	0
P LAVIN 900 7TH STREET NW WASHINGTON,DC 20001	INTNL EXEC CN 10 00	34,020	25,510	0
jp calabro 900 7TH STREET NW WASHINGTON,DC 20001	INTNL EXEC CN 10 00	28,518	20,058	0

Form 990, Part V-B - Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits:

(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contributions to employee benefit plans and deferred compensation plans	Expense account and other allowances
RICHARD D ACTON 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
HARRY BEXLEY 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
JAMES P CONWAY 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
LAWRENCE P CURLEY 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
WILLIAM C EADS 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
RAY EDWARDS 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
LAWRENCE FARNAN 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
JOHN E FLYNN 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
DONALD FUNK 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
H WADE GURLEY 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
MELVIN HORTON 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
CARL LANSDEN 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
RALPH A LEIGON 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
GLEN G MCCALL 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
S R MCCANN 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
JACK F MOORE 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
BILL J MOTLEY 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
JAMES F MULLONEY 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
JEREMIAH J OCONNOR 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
R W PURCELL 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
LAWRENCE E ROSSA 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
ORVILLE A TATE JR 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
WESLEY I TAYLOR 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
THOMAS VAN ARSDALE 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
DAN H WATERS 900 7TH STREET NW WASHINGTON,DC 20001	0	0	19,646	0
JOSEPH M FASHION 900 7TH STREET NW WASHINGTON,DC 20001	0	0	7,955	0
DONALD LOUNDS 900 7TH STREET NW WASHINGTON,DC 20001	0	0	7,955	0
JAMES R MCAVOY 900 7TH STREET NW WASHINGTON,DC 20001	0	0	7,955	0
KEN G ROSE 900 7TH STREET NW WASHINGTON,DC 20001	0	0	7,955	0
KEN WOODS 900 7TH STREET NW WASHINGTON,DC 20001	0	0	7,955	0

Form 990, Part VIII - Relationship of Activities to the Accomplishment of Exempt Purposes:

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93a	AMOUNTS RECEIVED FROM AN AFFILIATED EXEMPT ORGANIZATION FOR SHARED ADMINISTRATIVE EXPENSES PROVIDED TO ASSIST THE AFFILIATE IN CARRYING OUT ITS EXEMPT PURPOSE
94	MEMBERSHIP DUES
103a	GROSS RECEIPTS FROM LOCAL UNIONS TO OFFSET THE COST OF INDUSTRY TRADE SPECIAL PROJECTS
103b	MISCELLANEOUS REFUNDS AND REIMBURSEMENTS FROM VENDORS AND OTHERS
103c	ROYALTY PAYMENTS RECEIVED FOR USE OF UNION'S INTANGIBLE PROPERTY IN CONNECTION WITH THIRD PARTY'S PROVISION OF CREDIT CARD AND OTHER FINANCIAL SERVICE PRODUCTS FOR THE BENEFIT OF UNION MEMBERS
103d	REGISTRATION FEES CHARGED TO OFFSET THE COST OF INDUSTRY TRADE CONFERENCES

TY 2005 Depreciation and Depletion Schedule

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
 ELECTRICAL WORKERS

EIN: 53-0088380

Asset	Amount
EQUIPMENT	1,843,712
LEASEHOLD IMPROVEMENTS	1,200,000

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2003 Gain/Loss from Sale of Nonpublic Securities Schedule

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
ELECTRICAL WORKERS

EIN: 53-0088380

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Sales Expenses	Total (net)
mortgages	2005-12	PURCHASED	2005-12	various	39,930,000	39,930,000	0	0

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2005 Gain/Loss from Sale of Other Assets Schedule

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
ELECTRICAL WORKERS

EIN: 53-0088380

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Sales Expenses	Total (net)	Accumulated Depreciation
furniture fixtures	2005-12	PURCHASED	2005-12	various	12,465	516,471	0	11,455	515,461

TY 2005 Gain/Loss from Sale of Public Securities Schedule

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
ELECTRICAL WORKERS

EIN: 53-0088380

Gross Sales Price: 745,290,383

Basis: 723,154,822

Sales Expenses: 0

Total (net): 22,135,561

TY 2005 Investments - Other Schedule

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
 ELECTRICAL WORKERS

EIN: 53-0088380

Description	Book Value	Cost/FMV
INVESTMENT IN IBEW - BUILDING LLC	38,805,661	C
AFL-CIO HOUSING INVESTMENT TRUST	18,043,969	F

TY 2005 Investments - Securities Schedule

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
ELECTRICAL WORKERS

EIN: 53-0088380

Description	Book Value	Cost/FMV
GOV'T AND GOV'T AGENCY OBLIGATIONS	70,661,343	F
CORPORATE BONDS AND NOTES	103,716,129	F
STOCKS	210,802,945	F
MUTUAL FUNDS	372,288	F

TY 2005 Land etc. Schedule

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
ELECTRICAL WORKERS

EIN: 53-0088380

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
EQUIPMENT	15,188,610	5,638,359	9,550,251
LEASEHOLD IMPROVEMENTS	23,741,405	1,600,000	22,141,405

TY 2005 Other Assets Schedule

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
 ELECTRICAL WORKERS

EIN: 53-0088380

Description	Beginning of Year Amount	End of Year Amount
HOMES ON RELOCATION	121,022	594,857
DEPOSITS	149,000	149,000
CASH COLLATERAL HELD FOR SECURITIES ON LOAN	36,821,079	28,206,108
GUARANTEED PAYMENTS DUE FROM IBEW HQ BLDG LLC	7,342,324	16,106,048

TY 2005 Other Changes in Net Assets Schedule

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
 ELECTRICAL WORKERS

EIN: 53-0088380

Description	Amount
CHANGE IN UNREALIZED GAIN (LOSS) IN INVESTMENTS	-13,383,200

TY 2005 Other Expenses Included Schedule

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
 ELECTRICAL WORKERS

EIN: 53-0088380

Description	Amount
COST OF INVENTORY SOLD REPORTED ON LINE 10b FORM 990	843,709
IBEW HEADQUARTERS BLDG LLC RENTAL EXPENSE REPORTED ON SEPARATE RETURN	7,380,928

**TY 2005 Other Expenses
Not Included Schedule**

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
ELECTRICAL WORKERS

EIN: 53-0088380

Description	Amount
REIMBURSED ADMINISTRATIVE EXPENSES	2,080,000

TY 2005 Other Liabilities Schedule

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
ELECTRICAL WORKERS

EIN: 53-0088380

Description	Beginning of Year Amount	End of Year Amount
ACCRUED POST RETIREMENT BENEFIT COST	103,900,873	117,499,902
LIABILITY TO RETURN CASH COLLATERAL ON LOANS	36,821,079	28,206,108
ACCRUED PENSION COST	16,725,308	1,489,820

TY 2005 Other Revenues Included Schedule

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
ELECTRICAL WORKERS

EIN: 53-0088380

Description	Amount
IBEW HEADQUARTERS BLDG LLC RENTAL INCOME REPORTED ON SEPARATE RETURN	5,138,956
IBEW HEADQUARTERS BLDG LLC INTEREST INCOME REPORTED ON SEPARATE RETURN	315,603
COST OF INVENTORY SOLD REPORTED ON LINE 10b FORM 990	843,709

**TY 2005 Other Revenues
Not Included Schedule**

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
ELECTRICAL WORKERS

EIN: 53-0088380

Description	Amount
NET INCOME FROM TITLE HOLDING CO	-1,926,369
REIMBURSED ADMINISTRATIVE EXPENSES	2,080,000

TY 2005 Payments to Affiliates Schedule

Name: INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS

ELECTRICAL WORKERS

EIN: 53-0088380

Name	Address	Amount	Purpose
AMERICAN FEDERATION OF LABOR AND CONGRESS OF INDUSTRIAL ORGANIZATIONS	815 16TH STREETNW Washington, DC 20006	4,813,420	PER CAPITA TAX
BUILDING AND CONSTRUCTION TRADES DEPARTMENT AFL-CIO	1155 15TH STREET NW Washington, DC 20005	1,431,000	PER CAPITA TAX
METAL TRADES DEPARTMENT	1925 K STREET NW Washington, DC 20006	89,228	PER CAPITA TAX
UNION LABEL AND SERVICE TRADES DEPARTMENT	888 16TH STREET NW Washington, DC 20006	72,000	PER CAPITA TAX
MARITIME TRADES DEPARTMENT	1150 17TH STREET NW Washington, DC 20036	10,800	PER CAPITA TAX
DEPARTMENT OF PROFESSIONAL EMPLOYEES	888 16TH STREET NW washington, DC 20006	36,980	PER CAPITA TAX
TRANSPORTATION DEPARTMENT	1025 CONNECTICUT AVENUE NW Washington, DC 20036	37,887	PER CAPITA TAX
CANADIAN LABOUR CONGRESS	2841 Prom RIVERSIDE DRIVE Ottawa, CN K1V 8X7 OC	387,873	PER CAPITA TAX

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2005, or tax year beginning JUL 1, 2005, and ending JUN 30, 2006

2005

Department of the Treasury Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

See instructions.

Name of exempt organization INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS

Employer identification number 53-0088380

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8453-EO and enter the applicable amount from the return if any. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line for the return for which you are filing this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b whichever is applicable, blank (i.e. do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

Table with 5 rows (1a-5a) and 5 columns (Form type, Total revenue, Total tax, Tax based on investment income, Balance Due) with handwritten values.

Part II Declaration of Officer

6 I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return...

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2005 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete.

Sign Here [Signature] | 2/22/07 | SECRETARY-TREASURER
Signature of officer Date Title

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return.

ERO's Use Only [Signature] | 2/19/07 | CALIBRE CPA GROUP PLLC | 1850 K STREET, N.W. | WASHINGTON, DC 20006 | 47-0900880 | (202) 331-9880

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer's Use Only [Signature] | [Date] | [Firm Name] | [EIN] | [Phone No]