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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

		of the Treasury nue Service	` ▶ ⊺	he organization may have to use a copy of this return to satisfy state repo	orting re	equirements	Inspection
<u>. </u>	For th	ne 2008 ca	lendar	year, or tax year beginning JANUARY 1 , 2008, and ending	JAN	IUARY 31	, 20 08
3 (Check if	applicable	Please	C Name of organization UNITED STEELWORKERS INTERNATIONAL	UNIO	N D Employ	er identification number
_		:: I	use IRS label or	Doing Business As USW LOCAL UNION 13-447		72	0500916
	Name c	- 1	print or	Number and street (or P O box if mail is not delivered to street address) Room/suite		E Telepho	one number
_	nitial re	-	type See	1601 FOURTH STREET		(504)	341-8875
\neg	Termina		Specific Instruc-	City or town, state or country, and ZIP + 4			
_		ed return	tions.	WESTWEGO, LA 70070		G Gross re	ceipts \$
\neg		on pending	F Nam	e and address of principal officer ARTHUR J BOUDREAUX	H(a) ls	this a group return	for affiliates? Yes No
		, ,	1601 F	OURTH STREET, WESTWEGO, LA 70094			ncluded? Yes No
ī	Tax-ex	empt status		01(c) () ◀ (insert no)			list (see instructions)
j	Webs	ite: ▶			H(c) Grou	up exemption nui	nber ▶
(Type of	organization [Corpor			' ' ' 	legal domicile LA
Pa	rt I	Summa	ary				
	1			the organization's mission or most significant activities. REPRES	ENT N	MEMBERS I	N CONTRACT
	•			S, DAY TO DAY ISSUES IN THE WORK PLACE, COMMUNITY IS	SUES	EFFECTING	G MEMBERS
Ce				***************************************			
nai	·			***************************************			
Governance	2	Chack this	bov ► [if the organization discontinued its operations or disposed of more than 25	% of its	assets	
Ğ				g members of the governing body (Part VI, line 1a)	,, o, iio	3	922
ଷ୍ଟ				pendent voting members of the governing body (Part VI, line 1b)		4	922
įţį				employees (Part V, line 2a)		5	41
Activities				volunteers (estimate if necessary)	• •	. 6	881
⋖				lated business revenue from Part VIII, line 12, column (C)	•	7a	0
				isiness taxable income from Form 990-T, line 34.	•	7b	0
		TTOT GITTOR	<u> </u>	Siness taxasis income world out ose 1, into o4	Pnor	- 1 1	Current Year
		Contribut		A CONTINUE OF LARES		501816	550708
e ne				d grants (Gr () () () () () () () () () (001010	000,000
Revenue				revenue (Part VIII, line 29)		12	438
æ	10	Investmer	nt inco	mediant VIII, column (A), lines 874, and 7d)			
				248 (III, Wortumn (A) liges (2, 64, 96, 9c, 10c, and 11e)		8924	20549
				di lines 8 through 11 (must equa Part VIII, column (A), line 12)		510762	571695
				ar amounts paid (Part IX, column (A), lines 1-3)		7007	7240
s.		· ·		or for members (PartyIX) column (A), line 4)		7097	7310
Expenses				mpensation, employee benefits (Part IX, column (A), lines 5–10)		101739	115612
Ç	ſ			araising rees (Part IX, column (A), line 1 Te)	7	0	<u>0</u>
Ŵ			_	expenses (Part IX, column (D), line 25) ▶			
	l			(Part IX, column (A), lines 11a-11d, 11f-24f)		426052	482103
				Add lines 13-17 (must equal Part IX, column (A), line 25).		534870	605025
_ თ		Revenue l	ess exp	penses Subtract line 18 from line 12		-24108	-33330
net Assets or Fund Balances				B	Beginnin	g of Year	End of Year
Bala	20			rt X, line 16).. 		905061	825157
ᅙ	21		٠,	Part X, line 26)		0	0
				nd balances. Subtract line 21 from line 20		905061	825157
Pa	ırt II		ature I				<u> </u>
		under per	nalties of . it usatru	perjury, I declare that I have examined this return, including accompanying schedules a, correct, and complete Declaration of preparer (other than officer) is based on all if	and stat	ements, and to on of which or	the best of my knowledge eparer has any knowledge
		1.	/4.	h till and a	1		- DMC
Sig		1	100	my sourceaux		0 - 7	J - MCCI
1e	re	Signa	ture of c	flicer U T T D Cin T L C		Date	a .a .a.
			CTH	ur I Boudreaux Secretary	/-	I rea	SLIVER
		Туре	or print	name and title	<u>. </u>		
		Preparer's	· •	Date Check self-	tt _	Preparer's #	dentifying number
aid	1	signature	•	employ	yed ▶ [] (300 113000	
	arer's						
	Only	Firm's nar		urs	EIN	•	
		address, a	and ZIP		Phone	no ► ()
May	y the	IRS discu	iss this	return with the preparer shown above? (see instructions)			. Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form **990** (2008)

Par	Statement of Program Service Accomplish	iments (see instructions)		
1	Briefly describe the organization's mission: REPRESENT MEMBERS IN CONTRACT NEGOTIATION COMMUNITY ISSUES EFFECTING MEMBERS	ONS, DAY TO DAY ISSUES IN		
	WE ARE A LABOR UNION			
2	Did the organization undertake any significant program the prior Form 990 or 990-EZ?	n services during the year which	h were not listed on	☐ Yes ☑ No
	If "Yes," describe these new services on Schedule O.			
3	Did the organization cease conducting, or make signif		cts, any program	
	services?		. , , ,	☐ Yes 🗹 No
4	Describe the exempt purpose achievements for each	of the organization's three large	et program senices	hy evnenses
•	Section 501(c)(3) and 501(c)(4) organizations and section allocations to others, the total expenses, and revenue,	on 4947(a)(1) trusts are required	d to report the amou	
4a	(Code) (Expenses \$include			
				**
4h	(Code:) (Expenses \$ include	ding grants of \$	\ /Revenue \$	
70	(Code) (Expenses #micial			

	•			
4c	(Code:) (Expenses \$ include:	ding grants of \$) (Revenue \$)
		• • • • • • • • • • • • • • • • • • • •		
				•••••
				•
				_
4d	Other program services. (Describe in Schedule O.)			
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► \$	(Must equal Part IX, Line 2	25, column (B).)	

Pai	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,"	1		
2	complete Schedule A	2		7
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		1
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		✓
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		/
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		1
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	9		 ✓
10	complete Schedule D, Part IV	10		1
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11		1
2	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		1
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		1
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17 18		✓
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	19		V
19 20	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		1
21	Did the organization report more than \$5,000 on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions	240		
L	24b–24d and complete Schedule K. If "No," go to question 25.	24a 24b		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			Ť
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		✓
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		✓
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		1

ΙPa	Checklist of Required Schedules (continued)			
			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		√
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		1
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	i	✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.	36		1
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		√

Form **990** (2008)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S Information Returns Enter -0- if not applicable 1a 0			
	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 reportable gaming (gambling) winnings to prize winners?	1c	1	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 41]		ĺ
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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)?	4a		1
b	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		√
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		✓
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than	_		
	\$75?	7a		✓
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	_	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g	✓	-
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as		,	ĺ
	required?	7h	V	
	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section			
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		1
	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			Ť
	Did the organization make any taxable distributions under section 4966?	9a		1
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		1
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 0			ı
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			ĺ
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	120		./
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b	12a		

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			
	circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
_	any other officer, director, trustee, or key employee?	2		1
3	Did the organization delegate control over management duties customarily performed by or under the direct	_		<u>`</u> -
3		3		1
4	supervision of officers, directors or trustees, or key employees to a management company or other person?	4		1
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	5		1
5	Did the organization become aware during the year of a material diversion of the organization's assets?	6	7	_
6	Does the organization have members or stockholders?			
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	7a	✓	
	of the governing body?	7b	-/	
þ	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	70	_	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following	۰.	1	-
_	The governing body?	8a	-/	
b	Each committee with authority to act on behalf of the governing body?	8b	•	./
9a	Does the organization have local chapters, branches, or affiliates?	9a		
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations		_	
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	✓	
11	Is there any officer, director or 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	11		✓
<u>Sec</u>	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13.	12a	✓	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give		_	
	rise to conflicts?	12b	✓	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	122		
	describe in Schedule O how this is done	12c	√	
13	Does the organization have a written whistleblower policy?	13	-	
14	Does the organization have a written document retention and destruction policy?	14	· •	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:	4-		
а	The organization's CEO, Executive Director, or top management official?	15a	V	
b	Other officers or key employees of the organization?	15b	V	
	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	40-	1	,
	with a taxable entity during the year?	16a		✓
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
_	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶LOUISIANA		.	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s	only)	
	available for public inspection. Indicate how you make these available. Check all that apply.		••	
	☐ Own website ☐ Another's website ☑ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of inte	erest	
	policy, and financial statements available to the public.			
20	policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and reco	rds of	the	

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

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

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

☐ Check this box if the organization did not co	mpensate	any o	offic	er,	dire	ctor,	trus	tee, or key em	nployee.	
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average		on (d		k all	that ap		Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
SEE ATTACHED COPIES OF										
OFFICERS FROM 2008 LM-2	1									
			ļ 							
										
							<u>.</u>			
									_	

	t VII Section A. Officers, Directors, Tru (A)	(B)			(0	C)			(D)	(E)	1	(F)
	Name and title	Average	Positi	on (c		•	that app	oly)	Reportable	Reportable	E	stimated
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	com fr org an	mount of other apensation from the ganization d related anizations
										•		
											ļ <u>-</u>	···
											ļ	
											ļ	
				_								
<u>1b</u>	Total	<u> </u>	•			<u> </u>	_ <u> </u>	▶				
2	Total number of individuals (including those organization ► 0	e in 1a) wh	no rec	eive	ed r	nore	e than	\$10	00,000 in repo	rtable compens	sation	- T
3	Did the organization list any former office	r, director	or tr	uste	e, l	кеу	emplo	oyee	e, or highest c	ompensated		Yes No
4	employee on line 1a? If "Yes," complete S For any individual listed on line 1a, is the s	chedule J	for su	ıch	indı	vidu	ual .				3	-
	the organization and related organizations individual										4	1
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," comp	comp plete	oen: Sch	sati edu	on 1 Ile J	from a	any uch	unrelated org person	anızation for	5	1
	ction B. Independent Contractors											
1	Complete this table for your five highest compensation from the organization	ompensate	ed ind	epe 	ende	ent d	contra	ctor	s that receive	d more than \$1	00,000) of
	(A) Name and business add	tress							(B) Description of s	ervices	Compe	

2	Total number of independent contractors compensation from the organization ▶ 0		those	ın	1) w	/ho	receiv	red	more than \$10	00,000 in		

Fòrm 9			····		1		Pag
Part	VIII	Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from under section 512, 513, or 5
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns 1a	0				
gra	b	Membership dues 1b	550708				
ts, am	С	Fundraising events . 1c	0		İ		
igi		Related organizations . 1d	0	Ì	1		
Sin.	е	Government grants (contributions). 1e	0	j	İ		
ž žį	f	All other contributions, gifts, grants,	_				
et is		and similar amounts not included above 1f	0 0				
20 Pa		Noncash contributions included in lines 1a-1f: \$	······································	550708			
	- 11		Business Code	550708			
Program Service Revenue		 -	Business Code	o	o	0	
eve.	2a			0	0	0	
9	b			0	0	0	
Š	d			0	0	0	
S	u			0	0	0	
gra	f	All other program service revenue .		0	0	0	
Pro		Total. Add lines 2a–2f	▶	0	-	-	
	3	Investment income (including dividends, i	interest and				
		other similar amounts)		438	0	0	
	4	Income from investment of tax-exempt bond p		0	0	0	
	5	Royalties		0	0	0	
		(ı) Real	(II) Personal				
	6a	Gross Rents . 0	0				
	b	Less rental expenses 0	0				
		Rental income or (loss) 0	0				
	d	Net rental income or (loss)	▶	0	0	0	
	7a	Gross amount from sales of (i) Securities	(II) Other	{			
		assets other than inventory 0	0				
	b	Less. cost or other basis	ام				
		and sales expenses .	0				
		Gain or (loss)		o	o	0	
ø.		· · ·		-			
ž	8a	Gross income from fundraising events (not including \$					
š		of contributions reported on line 1c)					
æ		See Part IV, line 18 a	o				
Other Revenu	ь	Less: direct expenses . b	0				1
ŏ		Net income or (loss) from fundraising eve	ents >	o	0	0	1
	Qa	Gross income from gaming activities				-	
	Ja	See Part IV, line 19 a	0				
		Less. direct expenses b	0				
	С	Net income or (loss) from gaming activities	es 🕨	0	0	0	<u> </u>
	10a	Gross sales of inventory, less					
		returns and allowances . a	450				
	b	Less cost of goods sold b	0		_	_	
	C	Net income or (loss) from sales of inventory		450	0	0	
			Business Code	ا	ا	•	
			0	0	0	0	
	b		0	0	0	0	
	C	All all and a second and	20099	0	0	0	
		All other revenue	-	20099	0		
		Total Revenue Add by the Co. 0. 4.5	. ▶	20099			
	12	Total Revenue. Add lines 1h, 2g, 3, 4, 5 9c, 10c, and 11e	, 6a, 7a, 8c,				

fundraising solicitation

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) but are not required to complete columns (B), (C), and (D). (B) Do not include amounts reported on lines 6b. Total expenses Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 . 3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 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) . Other salaries and wages Pension plan contributions (include section 401(k) n and section 403(b) employer contributions) Other employee benefits 10 Payroll taxes . Fees for services (non-employees): a Management **b** Legal c Accounting . . **d** Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees g Other . Advertising and promotion Office expenses . . . Information technology Royalties Occupancy . Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings . Interest Payments to affiliates Depreciation, depletion, and amortization. Insurance Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) **DONATIONS LEGAL FEES** b C d All other expenses Total functional expenses. Add lines 1 through 24f Joint Costs. Check here ▶ ☐ If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and

Pa	irt X	Balance Sheet					
			(A) Beginning of year		(I End c	B) of year	
	1	Cash—non-interest-bearing	126342	1		9	3012
	2	Savings and temporary cash investments	0	2			(
	3	Pledges and grants receivable, net	0	3			0
	4	Accounts receivable, net	0	4			C
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L.	0	5			
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L	0	6			C
ts	7	Notes and loans receivable, net	0	7			0
Assets	8	Inventories for sale or use	0	8			0
Ä	9	Prepaid expenses and deferred charges	0	9			0
	10a	Land, buildings, and equipment. cost basis 10a 414139					
	b	Less: accumulated depreciation. Complete Part VI of Schedule D 10b 0	414139	10c		41	4139
	11	Investments—publicly traded securities	364580	$\overline{}$		31	8006
	12	Investments—other securities See Part IV, line 11	0	12			0
	13	Investments—program-related See Part IV, line 11	0	13			0
	14	Intangible assets	0	14			C
	15	Other assets See Part IV, line 11	0	15			0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	905061	16		82	5157
	17	Accounts payable and accrued expenses	0	17			0
	18	Grants payable	0	 			0
	19	Deferred revenue	0				0
	20	Tax-exempt bond liabilities	0				0
ties	21	Escrow account liability. Complete Part IV of Schedule D	0	21			0
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0				0
	23	Secured mortgages and notes payable to unrelated third parties	0				0
	24	Unsecured notes and loans payable	0				0
	25	Other liabilities. Complete Part X of Schedule D	0				0
	26	Total liabilities. Add lines 17 through 25	0	26			0
Balances		Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.					
<u>a</u>	27	Unrestricted net assets		27			
	28	Temporarily restricted net assets		28			
Ĕ	29	Permanently restricted net assets		29			
or Fund		Organizations that do not follow SFAS 117, check here ▶ ✓ and complete lines 30 through 34.	_				
Net Assets	30	Capital stock or trust principal, or current funds	0	30			0
\ss	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31			0
¥,	32	Retained earnings, endowment, accumulated income, or other funds	0	32			0
ž	33 34	Total net assets or fund balances	005064	33		92	<u>0</u> 5157
Dа	rt XI	Financial Statements and Reporting	905061	34		02	3131
-	I C AI	Tinancial Statements and Reporting				Yes	No
1		ounting method used to prepare the Form 990: 🗹 Cash 🛛 Accrua				163	
2a		e the organization's financial statements compiled or reviewed by an inc	•	t? .	2a	igwdapprox	1
b		e the organization's financial statements audited by an independent acc			<u>2b</u>	 	✓
С		es" to lines 2a or 2b, does the organization have a committee that assumes					
_		audit, review, or compilation of its financial statements and selection of an ir			2c	\vdash	
Зa		result of a federal award, was the organization required to undergo an Single Audit Act and OMB Circular A-133?	audit or audits as set	torth in	2-		1
b		'es." did the organization undergo the required audit or audits?		•	3a	\vdash	-

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(A) Name	(B) Title	(C) Status	(D) Gross Salary Disbursements (before any deductions)	(E) Allowances Disbursed	(F) Disbursements for Official Business	(G) Other Disbursements not reported in (D) through (F)		(H) TOTAL
1A BRENT	Middle Initial F	Last Name PETIT						
B PRES & CHAIRMAN -CYTEC	MAN -CYTEC		\$18,799	0 \$	\$2,582			\$21,381
ပ ပ	į							
Schedule 15 Representational Activities	5 Activities 38 %	Schedule 16 Political Activities and Lobbying	bying 1 %	Schedule 17 Contributions	0 % Schedule 18 General Overhead	ad 0 %	Schedule 19 Administration	61 %
2A First Name	Middle Initial L	Last Name BOUDREAUX						
B SECRETARY-TREASURER	REASURER		\$19,608	0\$	\$1,454		\$ 0	\$21,062
0								
Schedule 15 Representational Activities	5 Activities 27 %	Schedule 16 Political Activities and Lobbying	bying 1 %	Schedule 17 Contributions	0 % Schedule 18 General Overhead	% 0 pa	Schedule 19 Administration	72 %
3A First Name	Middle Initial	Last Name MUSE						
B EXE V-P, CHAIR -NAT GYPSU	R-NAT GYPSU		\$3,170	\$0	295\$		\$0	\$3,737
၁								
Schedule 15 Representational Activities	5 Activities 95 %	Schedule 16 Political Activities and Lobbying	% 0 %	Schedule 17 Contributions	0 % Schedule 18 General Overhead	% 0 pa	Schedule 19 Administration	5 %
4 A First Name	Middle Initial	Last Name BECNEL						
B TRUSTEE			0\$	\$	\$214		2 0	\$214
၁၁								
Schedule 15 Representational Activities	5 Activities 80 %	Schedule 16 Political Activities and Lobbying	% 0 guida	Schedule 17 Contributions	0 % Schedule 18 General Overhead	% 0 pe	Schedule 19 Administration	20 %
5A First Name STEPHEN	Middle Initial	Last Name BOUDREAUX						
B TRUSTEE			\$290	0\$	\$205		\$0	\$795
၁								
Schedule 15 Representational Activities	5 Activities 80 %	Schedule 16 Political Activities and Lobbying	% 0 buixqu	Schedule 17 Contributions	0 % Schedule 18 General Overhead	% 0 pe	Schedule 19 Administration	20 %
6 TOTALS FROM CO	TOTALS FROM CONTINUATION PAGES (if any)	GES (if any)	\$36,095	9	\$2,723	3	\$0	\$38,818
7 TOTAL OF LINES 1-6	1-6		\$78,262		\$7,745	5	\$0	\$86,007
8 LESS DEDUCTIONS	SN							\$30,325
9. NET DISBURSEMENTS	ENTS							\$55,682
								_

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ı) FAL	\$0		% 0		\$8,560		% 0		\$7,643		% 0		\$5,394		% 0		\$0		% 0		\$21,597	
(H) TOTAL		- .	Schedule 19 Administration				Schedule 19 Administration				Schedule 19 Administration				Schedule 19 Administration				Schedule 19 Administration			
(G) Other Disbursements not reported in (D) through (F)	80		8 % 0		\$0		0 % Ad		\$0		S % 0		\$0		S % 0		\$0		S % 0		\$0	
	\$0		. 18 erhead		\$446		18 erhead		\$479		H		\$962		: 18 erhead		-0\$		18 erhead		\$1,887	
(F) Disbursements for Official Business			Schedule 18 General Overhead		\$		Schedule 18 General Overhead		₹		Schedule 18 General Overhead		\$		Schedule 18 General Overhead				Schedule 18 General Overhead		\$1	
	0\$		% 0				% 0		\$0		% 0		\$0		% 0		\$0		% 0	:	\$0	
(E) Allowances Disbursed			Schedule 17 Contributions				Schedule 17 Contributions				Schedule 17 Contributions				Schedule 17 Contributions				Schedule 17 Contributions			
(D) Gross Salary Disbursements (before any deductions)	0\$		% 0		\$8,114		% 0		\$7,164		% 0		\$4,432		% 0		0\$		% 0		\$19,710	
Grc Disburso any o		<u> </u>	6 d Lobbying				6 Lobbying			Γ	6 d Lobbying				6 d Lobbying		<u> </u>	Ţ -	6 d Lobbying			
(C) Status	Last Name WHITE		Schedule 16 Political Activities and Lobbying	Last Name COLEMAN			Schedule 16 Political Activities and Lobbying	Last Name GROS, III			Schedule 16 Political Activities and Lobbying	Last Name PELLEGRIN	:		Schedule 16 Potitical Activities and Lobbying	Last Name LEE			Schedule 16 Political Activities and Lobbying			
	Middle Initial La		100%	Middle Initial La	Oc		100 %	Middle Initial La GF	ORONITE		100 %	Middle Initial La	HILLIPS		100 %	Middle Initial La			100 %			
(B) Title	Ā		Schedule 15 Representational Activities		CHAIRMAN - BUNGE OPD		Schedule 15 Representational Activities	Min	CHAIRMAN -CHEVRON ORONITE		Schedule 15 Representational Activities	Mic	CHAIRMAN -CONOCO PHILLIPS		Schedule 15 Representational Activities	Mi	-VEECOR		Schedule 15 Representational Activities		JES 1-6	
(A) Name	First Name CHARLES TPI ISTEE	C	Schedule 15 Representational A	First Name BERTRAND	CHAIRMAN	S	Scher Representatu	First Name JOHN	CHAIRMAN	S	Schec Representation	First Name DAN	CHAIRMAN	0	Scher Representation	First Name WILTON	CHAIRMAN -VEECOR	S	Scher Representatir		. TOTAL OF LINES 1-6	
	Α 0	a U		2 A	В	ပ	_	9 8	В	ပ	_	4 A	В	ပ	_]	5 A	В	ပ	_	ဖ	<u>1</u>	 _

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(G) (H) Other Disbursements TOTAL not reported in (D) through (F)		0 \$0 \$ \$490		ad 0 % Schedule 19 0		\$0 \$2,952		ad 0 % Schedule 19 0		\$0 82,959		ad 0 % Schedule 19 0		\$0 \$584		ad 0 % Schedule 19 0		\$0 \$74		ad 0 % Schedule 19 0		1 \$0 \$7,059										
(F) Disbursements for Official Business		0\$		% Schedule 18 General Overhead		\$551		% Schedule 18 General Overhead		\$0		% Schedule 18 General Overhead		\$0		Schedule 18 General Overhead		0\$		% Schedule 18 General Overhead	*	\$551										
(E) Allowances Disbursed		0\$		Schedule 17 O		0\$		Schedule 17 0		0\$		Schedule 17 0		\$0		Schedule 17 0		0\$		Schedule 17 Contributions		\$0										
(D) Gross Salary Disbursements (before any deductions)		\$490		% 0		\$2,401		% 0 Buindq		\$2,959		% 0		\$584		% 0 % ppxing		\$74		% 0		\$6,508										
(C) Status	LINDNER			% Schedule 16 Political Activities and Lobbying	Last Name SECTION			% Schedule 16 Political Activities and Lobbying	Last Name CAMBRE			% Schedule 16 Political Activities and Lobbying	_ _ _	V		% Schedule 16 Political Activities and Lobbying	Ľž			% Schedule 16 Political Activities and Lobbying												
(B) Title	Middle Initial	N-CHS		Schedule 15 Representational Activities 100%	Middle Initial	CHAIRMAN-KNIGHT CELOTEX	į	Schedule 15 Representational Activities 100	Middle Initial	CHAIRMAN-BUNGE GRAIN N.A.		Schedule 15 Representational Activities 100	Middle Initial	VICE-CHAIRMAN NAT GYPSUM		15 Activities 100	Middle Initial			Schedule 15 Representational Activities 100 %		OF LINES 1-6										
(A) Name	1A First Name	B CHAIRMAN-CHS	o o	Sche Represental	2A First Name	B CHAIRMAN	ပ ပ	Sche Representat	3A First Name	B CHAIRMAN	υ υ	Sche Sche	4A First Name	B VICE-CHAI	ပ ပ	Schedule Representational	5A GREG	B SAFETY	ပ ပ	Sche Represental	6.	7. TOTAL OF LI		,	, ,	, ,	, ,	, ,	, ,	, ,	, ,	, ·

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(A) (B) Name Title	(C) Status	(D) Gross Salary Disbursements (before any deductions)	(E) Allowances Disbursed	(F) Disbursements for Official Business	(G) Other Disbursements not reported in (D) through (F)	(H) TOTAL	4L
First Name Middle Initial K	ial Last Name CREECY		6	•	é		\$10E
B VICE-CHAIRMAN CYTEC		\$225	O#	0.99	O#		C77¢
0 0							
Schedule 15 100 Representational Activities	100% Schedule 16 Political Activities and Lob	% 0 doubting	Schedule 17 Contributions 0	% Schedule 18 General Overhead	% 0	Schedule 19 Administration	% 0
Pirst Name Middle Initial	al Last Name OTT						
B VICE-CHAIRMAN CHEVRON		\$3,267	0\$	\$285	0\$		\$3,552
0							
Schedule 15 Representational Activities 100	% Schedule 16 Political Activities and Lobbying	% 0 Burkqq	Schedule 17 0 Contributions 0	Schedule 18 General Overhead	% 0	Schedule 19 Administration	% 0
3 A First Name Middle Initial	ial Last Name ROUSSEL						
B VICE-CHAIRMAN CONOCO PHIL	HIL	\$919	\$0	0\$	0\$		\$919
2 2							
Schedule 15 Representational Activities	% Schedule 16 Political Activities and Lobbying	% 0 guida	Schedule 17 0	% Schedule 18 General Overhead	% 0	Schedule 19 Administration	% 0
4 A First Name Middle Initial MARTY	lal Last Name ROBERTSON						
B VICE-CHAIRMAN BUNGE N. A.	,	\$3,460	\$0	\$0	\$0		\$3,460
0			,				
Schedule 15 Representational Activities	% Schedule 16 Political Activities and Lobbying	% 0 guida	Schedule 17 Contributions	0 % Schedule 18 General Overhead	% 0	Schedule 19 Administration	% 0
5 First Name Middle Initial	ial Last Name HINES						
B VICE-CHAIRMAN BUNGE OPD)	\$2,006	0\$	\$0	\$		\$2,006
0 0							
Schedule 15 100 Representational Activities	% Schedule 16 Political Activities and Lobbying	% 0 %	Schedule 17 0	% Schedule 18 General Overhead	% 0	Schedule 19 Administration	% 0
6.		. :					
7. TOTAL OF LINES 1-6		29,877	0\$	\$285		\$0	\$10,162
			٠				
				and the same and t			

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	(A) Name	(B) Title	(C) Other Payer	(D) Gross Salary Disbursements (before any deductions)	ary (before ons)	(E) Allowances Disbursed	Disbi for Offic	(F) Disbursements for Official Business	(G) Other Disbursements not reported in (D) through (F)	(H) TOTAL	
4 	First Name LINDA	Middle Initial	Last Name VERDIN								
<u>n</u>	OFFICE MANAGER	AGER			\$29,296	0\$		\$308		0 \$	\$29,605
ပ	C										
	Schedule 15 Representational Activities	0	% Schedule 16 Political Activities and Lobbying	0 buyung 0	%	Schedule 17 Contributions	9 % 0	Schedule 18 General Overhead	100%	Schedule 19 Administration	% 0
2 A	First Name	Middle Initial	Last Name								
8											\$
ပ											
	Schedule 15 Representational Activities		% Schedule 16 Political Activities and Lobbying	pbying	%	Schedule 17 Contributions	9 %	Schedule 18 General Overhead	%	Schedule 19 Administration	%
Θ	First Name	Middle Initial	Last Name								
В											96
ပ											
_	Schedule 15 Representational Activities		% Schedule 16 Political Activities and Lobbying	phying	%	Schedule 17 Contributions	s %	Schedule 18 General Overhead	, %	Schedule 19 Administration	%
4 A		Middle Initial	رًا								
8				•							\$0
ပ											
	Schedule 15 Representational Activities		% Schedule 16 Schedule 16 Political Activities and Lobbyings	spuida	%	Schedule 17 Contributions	° %	Schedule 18 General Overhead	%	Schedule 19 Administration	%
9 9	First Name	Middle Initial	Last Name								
В				.							\$0
ပ											·
	Schedule 15 Representational Activities		% Schedule 16 Political Activities and Lobbying	guyqqq	%	Schedule 17 Contributions	9 %	Schedule 18 General Overhead	%	Schedule 19 Administration	%
9	OTAL RECEIVED BY	ALL OTHER EMPLOYEES	TOTAL RECEIVED BY ALL OTHER EMPLOYEES MAKING \$10,000 OR LESS								\$0
	Schedule 15 Representational Activities		% Schedule 16 Political Activities and Lobbying	gupying	%	Schedule 17 Contributions	⁹ %	Schedule 18 General Overhead	%	Schedule 19 Administration	%
	TOTALS FROM	7. TOTALS FROM CONTINUATION PAGES (if any)	AGES (if any)		\$0	\$0		0\$	8	\$0	\$0
Θ	TOTAL OF LINES 1-7	S 1-7			\$29,296	0\$		\$309		\$0	\$29,605
9. L	9. LESS DEDUCTIONS	SNC								İ	
6	10. NET DISBURSEMENTS	EMENTS									\$29,605
	•										

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	Description (A)	To Whom Paid (B)	Amount (C)
1 A.	A. CHASE HALEY HEALTH INSURANCE	BLUE CROSS BLUE SHIELD	\$105
2 LIN	LINDA VERDIN HEALTH INSURANCE	BLUE CROSS BLUE SHIELD	\$4,499
3. VA	VALENTINE PAPER FINAL DENTAL INSURANCE PAYMENT	ASSURANT EMPLOYEE BENEFITS	\$200
4 DE	DEATH BENEFIT PAID FROM DEATH BENEFIT FUND	ESTATE OF DARRYL PETIT	\$2,500
5			
9			
7.			
8			
6			
10			
11			
12.			
13			
14.			
15			
16			
17			
18			
19.			
50			
21			
22 Tot	22 Total of Continuation pages (if any)		80
23° Jo	23' Jotal of Lines 1 through 22 (The Total from Line 23 will be automatically entered in Item 55)		\$7,310