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EXTENSION ATTACHED

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)

Department of the Treasury

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

Open to Public

		THUE SERVICE	The organization may have to dee a copy of the fedal to eather, that		Inspection
A F	or the	<u> 2009 cal</u>	endar year, or tax year beginning and ending		
Вс	heck if opiicati	use IRS	C Name of organization	D Employer identific	eation number
	Addre chang	ss label or le print or	LOCAL 881 UNION		
$\overline{}$	Name chang	type	Doing Business As	آ 36−2:	125555
	initial return		Number and street (or P.O. box if mail is not delivered to street address) Room/suite		
\vdash	Termiz	n- Specific	10400 W. HIGGINS RD.		294-5064
\vdash	Jated Amen	Instruc- ded tions		G Gross receipts \$	14,462,494.
\vdash	Jretum	i	City or town, state or country, and ZIP + 4		
_	Application pendi		ROSEMONT, IL 60018	H(a) Is this a group re	
		FNan	ne and address of principal officer:RONALD POWELL	for affiliates?	Yes X No
			E AS C ABOVE	H(b) Are all affiliates inc	
<u> </u>	ax-ex	empt statu	ıs: X 501(c) (5	-	list. (see instructions)
<u>J V</u>	Vebsi	<u>te: ▶ N/</u>		H(c) Group exemption	
		organizatio	on: Corporation X Trust Association Other L Yea	of formation: 1947 N	State of legal domicile: IL
Pa	rt I	Summ	ary		
ø)	1	Briefly des	scribe the organization's mission or most significant activities: LABOR UNI	ON	
č		-	· —		
Governance	2	Check thu	s box if the organization discontinued its operations or disposed of more	e than 25% of its net as	sets.
Š			f voting members of the governing body (Part VI, line 1a)	3	35
			f independent voting members of the governing body (Part VI, line 1b)	4	0
ර ග			ber of employees (Part V, line 2a)	5	66
Ė				6	0
Activities &			ber of volunteers (estimate if necessary)	· · · · — 1	0.
Ac		•	s unrelated business revenue from Part VIII, column (C), line 12	. 7a	
	b	Net unrela	ated business taxable income from Form 990-1, line-34		0.
				Prior Year	Current Year
e e	8	Contributi	ons and grants (Part VIII, line 1h) 5 JUL 2 0 2010 5		
eu	9	Program s		14,755,701.	14,126,670.
Revenue	10	Investmer	nt income (Part VIII, column (A), lines 3, 4, and 7d)	318,150.	<u>279,252.</u>
4	11	Other reve	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	39,698.	41,570.
			nue - add lines 8 through 11 (must-equal Part VIII, column (A), line 12)	15,113,549.	14,447,492.
	13	Grants an	d similar amounts paid (Part IX, column (A), lines 1-3)	154,803.	282,324.
			oaid to or for members (Part IX, column (A), line 4)	25,000.	38,000.
ß		•	other compensation, employee benefits (Part IX, column (A), lines 5-10)	5,774,016.	5,607,903.
Expenses		•	nal fundraising fees (Part IX, column (A), line 11e)		
e.					
ă:			Iraising expenses (Part IX, column (D), line 25)	8,013,715.	8,194,374.
			enses (Part IX, column (A), lines 11a-11d, 11f-24f)	13,967,534.	14,122,601.
			enses Add lines 13-17 (must equal Part IX, column (A), line 25)		
_ &	<u> 19</u>	Revenue	less expenses. Subtract line 18 from line 12	1,146,015.	324,891.
Net Assets or	3			eginning of Current Year	End of Year
ssel	ຼີ ₂ 0	Total asse	ets (Part X, line 16)	11,563,606.	12,445,319.
₩ ₩	`21	Total liabil	lities (Part X, line 26)	1,805,139.	1,673,778.
蓬	22		s or fund balances Subtract line 21 from line 20	<u>9,758,467.</u>	10,771,541.
Pa	rt II	Signa	ture Block		
ব		Under pena	Ities of perjury, I declare that I have examined this return, including accompanying schedules and statements te Declaration of preparer (other than office) based on all information of which preparer has any knowledg	, and to the best of my knowled	ge and belief, it is true, correct,
Sign	1	1	Me / E Jucese	7/16	110
Her	9	Sign	ature of officer	Date	
K	-	N RO	NALD POWELL, PRESIDENT		
SCAMINED			e or print name and title		
		-) / " /) / Dam / of ho	heck if Prepare	er's identifying number
Paid		Preparer's signature	C → [./.]X/1/1/C Y/T/1/L/D/D/D/D/D/D/D/L/D	elf- (see in:	structions)
Prep	arer's	Firm's name		nployed	
Use		yours if	TEGACI PROFESSIONALS LLP	EIN -	
	-	self-employ address, an	d Bill St Michell Bill 12 1000		10 260 2522
		ZIP + 4	CHICAGO, IL 60606	Phone no. ► 3	12-368-0500
May	the II	DC diagrica	e this ratium with the preparer shown above? (see instructions)		X Ves No



932002 02-04-10 Form **990** (2009)

			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_		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	x	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
4	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
5	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5_	X	
6	Did the organization maintain any donor advised funds or any similar funds or 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_		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	_8_		X
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," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	<u> </u>
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		,	
	Part VI.	-	'	:
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		i '	1
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	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		-	
•	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	-	٠	Ĩ
	Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		=	
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		-	
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.		,	
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			;
	Schedule D, Parts XI, XII, and XIII.	12	X	ļ.,
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?			;
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X			 ;
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	-	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization		ļ	
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	ĺ		
	located outside the United States? If "Yes," complete Schedule F, Part III	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	1		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	 	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,"		ļ	
	complete Schedule G, Part III	19	ļ	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	L	X

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			Yes	No
21	Ded the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States 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 and other assistance to individuals in the United States on Part IX,	ļ		
	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			
	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	1	ļ	
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		ļ
С	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	İ		
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified		٦,	
	person outstanding as of the end of the organization's tax year? 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		ĺ	ĺ
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete		1	•
	Schedule L, Part III	27	 _	X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV	1	_	
_	Instructions for applicable filing thresholds, conditions, and exceptions)	200-		x
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	 	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	 -	
Ç	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was	28c		x
20	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	29		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	 	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
31	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	J .	_	1
UZ.	Schoolule N. Part II	32	ŀ	X
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		х
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	Х	
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		x
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	L	X.
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O.	38	Х	
		Form	990 (2000)

Form **990** (2009

Pan	t V Statements Regarding Other IRS Filings and Tax Compliance					Γ
		ı	ı		Yes	No_
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		148	,		ĺ
	U.S. Information Returns. Enter -0- if not applicable	1a	140	*		
	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 r	1b	ble gaming			
		eporte	ible garring	1c	x	'
	(gambling) winnings to prize winners?		1			
	filed for the calendar year ending with or within the year covered by this return	2a	66	:		
	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X	•
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see		 ictions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered			3a		x
	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	autho	rity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		X
	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			1-3
	Financial Accounts.					١.,
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 transaction	action'	?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarders.				ŀ	
	Tax Shelter Transaction?			5c	↓	<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t	he org	janization solicit			
	any contributions that were not tax deductible?			6a	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions	or gifts		l	
	were not tax deductible?			6b	X	<u> </u>
	Organizations that may receive deductible contributions under section 170(c).			_ I	-	- ====
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	good	s and services	1_		7.7
	provided to the payor?			7a	 	<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	 	 -
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	vas rec	quirea	7.		х
	to file Form 8282?	7 d		7c	 -	<u> </u>
	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		nal	1		ļ
e	bid the organization, during the year, receive any funds, directly of indirectly, to pay premiums on a benefit contract?	persor	ilai	7e	~ `	<u>x</u>
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conf	tract?	•	7 1	† ·	X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required			7g	†	<u> </u>
9 h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-		eaured?	7h		\vdash
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or			1 .	ļ. <i>:</i>	;
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exc			<u> </u>		Ì
	at any time duning the year?			8		2 \
9	Sponsoring organizations maintaining donor advised funds.				T	<u> </u>
а	Did the organization make any taxable distributions under section 4966?			9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:			-		
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		_	-	
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.		1	*2] r '
а	Gross income from members or shareholders	11a		_	-	-
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b		⊣	- J.	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	ո 1041	l?	12a	 	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	<u> </u>	=	1	<u> </u>
				Form	a 990	(2009)

36-2125555 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

sec	tion A. Governing Body and Management			
	Enter the number of voting members of the governing body		Yes	<u>No</u>
			-	1
Ъ	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	2	X	: -
2	officer, director, trustee, or key employee?	-	_^	
3		ا م		v
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	х	
6	Does the organization have members or stockholders?	6	^	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	70	х	
L	governing body?	7a 7b	X	
_		-	<u> </u>	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			· ' .
_	by the following.		X	A M1
a	The governing body?	8a 8b	X	
D	Each committee with authority to act on behalf of the governing body?	60	Λ	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		X
200	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			
	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Yes	No
102	Does the organization have local chapters, branches, or affiliates?	10a	163	X
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	ioa		43
U	and branches to ensure their operations are consistent with those of the organization?	10b		
44	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Х	
11 44 A				
	Describe in Schedule O the process, if any, used by the organization to review this Form 990 Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	IZA		
U	to conflicts?	12b		
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
·	In Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent	<u> </u>		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	}) · ;
а	The organization's CEO, Executive Director, or top management official	15a	х	^ ~~ ^
h	Other officers or key employees of the organization	15b	Х	
~	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			
	taxable entity during the year?	16a	`	X
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	1,55		
_	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	1		
17	List the states with which a copy of this Form 990 is required to be filled NONE			
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 X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	ncial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion:	•	
	STEVEN POWELL-SECRETARY/TREAS (847) 294-5064	-		
_	10400 HIGGINS RD, ROSEMONT, IL 60018			
		Form	990	20091

932008 02-04-10

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."

Check this box if the organization did not compensate any current officer, director, or trustee

- 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	Jinpensate an	<u>y cu</u>	11011		,001	, unc	,010	, or tradice		
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average			Pos				Reportable	Reportable	Estimated
,	hours	(cl	heck	all	that	app	ly)	compensation from	compensation from related	amount of other
	per week	ector						the	organizations	compensation
	week	ndividual trustee or director	, g	<u> </u>		ated		organization	(W-2/1099-MISC)	from the
		ustee	nstitutional trustee		8	npeus		(W-2/1099-MISC)		organization
		lual tr	tonal	١	Key employee	st con	<u>_</u> ا			and related
		l div	Institu	Officer	Keyer	Highest compensated employee	를			organizations
CLINT BROWN		 	_	_		\vdash			—	
VICE PRESIDENT	40.00			х	ĺ			106,147.	0.	15,056.
LISA CATANZARO	10100							200,220		
EXECUTIVE VICE PRESIDENT	40.00			х				160,942.	0.	15,056.
DAVID HENDRIX										
VICE PRESIDENT	40.00	}		X			ļ	56,206.	0.	14,779.
CATHERINE HOWE										
VICE PRESIDENT	40.00			X				67,950.	0.	14,851.
JEFFREY JAYKO										
VICE PRESIDENT	40.00			X		L.		93,442.	0.	14,996.
MAYNARD JEROME					ŀ	-				
EXECUTIVE VICE PRESIDENT	40.00	<u> </u>	<u> </u>	X	<u> </u>	<u> </u>	<u></u>	180,459.	0.	15,056.
ROBERT KLEICH JR. (NEW)									_	
VICE PRESIDENT	40.00	ļ	ļ	X	ļ	<u> </u>		64,860.	0.	14,836.
ANDREW O'KEEFE						1				44.000
VICE PRESIDENT	40.00	1	<u> </u>	X	₩	₩	<u> </u>	91,761.	0.	14,988.
BRADLEY POWELL	40.00				İ		ļ	02 465		14 006
VICE PRESIDENT	40.00	-	-	X	├	┼	<u> </u>	93,467.	0.	14,996.
RONALD POWELL	1 40 00			٠,				255 166		17 065
PRESIDENT	40.00	\vdash	-	X		 	<u> </u>	255,166.	0.	17,065.
STEVEN POWELL	40.00			x	Ì			237,059.	0.	19,694.
SECRETARY-TREASURER MAMIE PRATT	40.00	-	┢	┢≏	┼	╁	╁─	237,039.	0.	13,034.
VICE PRESIDENT	40.00			x				60,494.	0.	14,809.
PAUL SCHAEFER	40.00	+-	i	^	\vdash	\vdash	\vdash	00,454.	· · · · · · · · · · · · · · · · · · ·	14,005.
VICE PRESIDENT	40.00			X	ŀ			106,939.	0.	15,056.
PATRICK STATTER	40.00	<u> </u>		123	1			100,333.		1370331
RECORDER	40.00			x				94,167.	0.	14,996.
KATHRYN WAHL	10.00	1	_		\vdash	1	†	32/20.0		
VICE PRESIDENT	40.00			x				106,627.	0.	15,056.
MOISES ZAVALA		1		† <u></u>	T	1	T			
VICE PRESIDENT	40.00			x				74,311.	0.	14,889.
RODNEY ZELASKO										
BUSINESS REPRESENTATIVE	40.00	<u> </u>		X				91,722.	0.	
932007 02-04-10								<u> </u>		Form 990 (2009)

932007 02-04-10

Form **990** (2009)

08810X11

Form 990 (2009) LOCAL 881									<u> 36-2125</u>	555 Page 8
Part VII Section A. Officers, Directors, Tru	stees, Key Er	nploy	/ees	, ar	nd F	ligh	est	Compensated Employ	ees (continued)	
· (A)	(B)			(C	;)			(D)	(E)	(F)
Name and trtle	Average				tion			Reportable	Reportable	Estimated
	hours	(che	eck:	all t	hat	app	ly)	compensation	compensation	amount of
	per	횮		- 1				from the	from related	other compensation
	week	불				pg .		organization	(W-2/1099-MISC)	from the
		şte (raste	İ		pensa		(W-2/1099-MISC)	(** 2), (** *** *** *** ***	organization
			ona T		ploye	t com		, ,		and related
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Богтег			organizations
GLORIA AUGELLO (PAST)				\dashv						
VICE PRESIDENT	1.00			\mathbf{x}				1,000.	0.	0.
MARY BARTHEL									İ	
VICE PRESIDENT	1.00			X				5,153.	0.	0.
GARLAND BLAKELY										
VICE PRESIDENT	1.00	\sqcup	_	X				2,057.	0.	0.
SUSAN FELLNER			ı							
VICE PRESIDENT	1.00		_	X		<u> </u>		1,496.	0.	0.
GLORIA GONZALES	1 00		- 1			i		1 057		
VICE PRESIDENT	1.00	┝		X		-		1,957.	0.	0.
THERESA GRATZ	1 00	1 1	ļ					1 000	0.	0.
VICE PRESIDENT	1.00	\vdash	\dashv	X			_	1,988.		<u> </u>
THOMAS HANCOCK	1.00			x				1,496.	0.	0.
VICE PRESIDENT	1.00	1	\dashv	^		-		1,430.		
GEORJEAN HILKO VICE PRESIDENT	1.00	1 1	i	x				4,853.	0.	0.
KENT MADISON	1.00	++	-	Λ			 	±,033.		
VICE PRESIDENT	1.00			X				1,902.	. 0.	0.
KATHRYN EGGERT (NEW)	1.00	1 1			\vdash	-	1	1/5020		
VICE PRESIDENT	1.00		ı	X				1,814.	0.	0.
1b Total						▶		2,111,261.		276,178.
2 Total number of individuals (including but n	ot limited to th	nose l	liste	d al	oove	e) wi	ho r	eceived more than \$10	0,000 in reportable	
compensation from the organization									·	8
										V-a Na

	compensation from the organization			8
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3	ļ	X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization	-		
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X	ļ
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to	1 -		
	the organization? If "Yes," complete Schedule J for such person	5	<u> </u>	X

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
THE KARMEL LAW FIRM, P.C., 221 NORTH LASALLE STREET SUITE 1307, CHICAGO, IL	LEGAL SERVICES	293,505.
	_	

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

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Form **990** (2009)

Form 990 (2				36-2125	555 Page 9
rait viii	Statement of Nevende	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
gran Toun	Federated campaigns Membership dues 1b Fundraising events 1c	=			- T
ΣE e	Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above 1d			~ -	
Contrib and ot u 6	Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f .			-	
2 a	MEMBERSHIP DUES AND AS 900099		14126670.		
Program Service Revenue Revenue Revenue					
_ '	All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest, and	14126670.		2 2 7	
4 5	other similar amounts). Income from investment of tax-exempt bond proceeds Royalties	279,254.			279,254.
6 a	(i) Real (ii) Personal 37,803.			1 1 1 2 2 2 2	
b c d	Less: rental expenses Rental income or (loss) Net rental income or (loss)	37,803.	37,803.		
	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses (i) Securities (ii) Other 15,000.			- 	
d	Gain or (loss) −2. Net gain or (loss)	-2.	-2.		_
Other Revenue	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a				
Other o	Less: direct expenses b Net income or (loss) from fundraising events			-	,
9 a	Gross income from gaming activities See Part IV, line 19 a Less: direct expenses b			·	
С	Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances a			- ,	
	Less cost of goods sold b Net income or (loss) from sales of inventory Miscellaneous Revenue Business Cod	e		<i>z</i>	
11 a	MISCELLANEOUS 900099				3,767.
ı	Total. Add lines 11a-11d	3,767		0.	283,021
932009 02-04-10	Total revenue. See instructions.	11444/492	. 14164471.	1 0	Form 990 (2009

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp		not required to comp	lete columns (B), (C), ar	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	254,363.		e trans	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	27,961.			, ,
3	Grants and other assistance to governments, organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16			***	·
4	Benefits paid to or for members	38,000.			· · ·
5	Compensation of current officers, directors, trustees, and key employees	2,383,456.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	2,127,851.			
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	91,768.			
9	Other employee benefits	650,602.	=		
10	Payroll taxes	354,226.			
11	Fees for services (non-employees):				
а	Management				<u> </u>
b	Legal	298,543.			
C	Accounting	56,044.			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		·		
f	Investment management fees	10,299.			
g	Other			<u> </u>	
12	Advertising and promotion	75,603.		ļ. <u> </u>	
13	Office expenses	338,835.			
14	Information technology .				
15	Royalties				
16	Occupancy	362,284.			
17	Travel	264,820.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		_		
19	Conferences, conventions, and meetings	51,085.	 	<u> </u>	
20	Interest	5 546 000			
21	Payments to affiliates	5,746,000.	· · · · -	 	
22	Depreciation, depletion, and amortization	139,411.			
23	Insurance	46,427.			
24	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.)	210 000	·	, , , , , , , , , , , , , , , , , , , ,	
a b	MEMBERSHIP COMMUNICATIO TRANSFER TO PAC FUND	312,820. 198,047.			
c	COLLECTIVE BARGAINING &	169,671.	·-		
d	LABOR EDUCATION	80,048.			
e	DATA PROCESSING	39,924.			
f	All other expenses	4,513.	-		
25	Total functional expenses. Add lines 1 through 24f	14,122,601.			
26	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 fundraising solicitation				
					Form 990 (2000)

om 990 Part X			<u> </u>	212555 Page 11
artx	Datance Sneet	(A)		(B)
		Beginning of year		End of year
1	Cash - non-interest-bearing	507,063.	1	356,625.
2	Savings and temporary cash investments	5,690,079.	2	6,160,032.
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	150,172.	4	44,903.
5	Receivables from current and former officers, directors, trustees, key		- 4	•
	employees, and highest compensated employees. Complete Part II	,		a strain service
	of Schedule L	1,200.	5	1,100.
6	Receivables from other disqualified persons (as defined under section		_	
	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete	, , , , , , , , , , , , , , , , , , , ,		. ,
i	Part II of Schedule L	2,100.	6	2,500.
y 7	Notes and loans receivable, net		7	
Assets 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	Inventories for sale or use		8_	
ž 9	Prepaid expenses and deferred charges	62,847.	9_	72,801.
10a	Land, buildings, and equipment cost or other			
	basis. Complete Part VI of Schedule D 10a 2,220,617.	* * * * * * * * * * * * * * * * * * * *	٠.,	, , , , , , , , , , , , , , , , , , , ,
t	Less: accumulated depreciation 10b 1,638,955.	633,287.	10c	581,662.
11	Investments - publicly traded securities	1,886,090.	11	2,368,734.
12	Investments - other securities See Part IV, line 11	2,248,223.	12	2,498,266.
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	382,545.	15	358,696.
16	Total assets. Add lines 1 through 15 (must equal line 34)	11,563,606.	16	12,445,319.
17	Accounts payable and accrued expenses	568,356.	17	530,317.
18	Grants payable		18	050 540
19	Deferred revenue	238,102.	19	259,710.
20	Tax-exempt bond liabilities		20	
စ္က 21	Escrow or custodial account liability. Complete Part IV of Schedule D	· · · · · · · · · · · · · · · · · · ·	21	
≝ 22	Payables to current and former officers, directors, trustees, key employees,			
21 22 22 22 22 22 22 22 22 22 22 22 22 2	highest compensated employees, and disqualified persons. Complete Part II	. ,	_	
- I	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	200 504	24	002 751
25	Other liabilities Complete Part X of Schedule D	998,681.	25	883,751.
26	Total liabilities. Add lines 17 through 25	1,805,139.	26	1,673,778.
	Organizations that follow SFAS 117, check here X and complete	**	1	
S es	lines 27 through 29, and lines 33 and 34.	0 750 467	l	10 771 541
E 27	Unrestricted net assets	9,758,467.	i	10,771,541.
Net Assets or Fund Balances	Temporarily restricted net assets		28	
힏 29	·		29	2 2 2 3
프	Organizations that do not follow SFAS 117, check here and			** ***
<u>ة</u>	complete lines 30 through 34.		,	- 1
§ 30	•		30	
န္မို 31	•		31	
<u>ਦੇ</u> 32		0.750.467	32	10 771 EA1
Z 33		9,758,467.	33	10,771,541. 12,445,319.
34	Total liabilities and net assets/fund balances	11,563,606.	34	12,445,319. Form 990 (2009)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form **990** (2009)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2009

Open to Public
Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C

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

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

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

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

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

f 1	the org	anization	answered	"Yes,"	to Form	990, Pa	art IV,	line 5	(Proxy	Tax), then
-----	---------	-----------	----------	--------	---------	---------	---------	--------	--------	------------

 Section 501(c)(4), (5), or (6) organiza 	tions: Complete Part III.		· · · · · · · · · · · · · · · · · · ·	
Name of organization			Emple	oyer identification number
LOCAL 8	81 UNION			<u> 36-2125555</u>
Part I-A Complete if the org	panization is exempt und	ler section 501(c) o	r is a section 527 or	rganization.
1 Provide a description of the organiz	zation's direct and indirect politic	al campaign activities in		
2 Political expenditures			▶\$	
3 Volunteer hours		•		
Part I-B Complete if the org	ganization is exempt und	ler section 501(c)(3).	
1 Enter the amount of any excise tax	incurred by the organization und	der section 4955	. >\$	
2 Enter the amount of any excise tax	incurred by organization manag	ers under section 4955	▶\$	
3 If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV.				. \(\(\alpha\)
Part I-C Complete if the org	ganization is exempt und	ler section 501(c), (except section 501(c)(3).
1 Enter the amount directly expended	, ,	•		
2 Enter the amount of the filing organ	uzation's funds contributed to ot	her organizations for sec	_	
exempt function activities			►\$	
3 Total exempt function expenditures	s. Add lines 1 and 2 Enter here a	and on Form 1120-POL,	. .	
line 17b	·		► \$	
4 Did the filing organization file Form				└ Yes
5 Enter the names, addresses and er				
For each organization listed, enter that were promptly and directly del		· ·	-	
(PAC). If additional space is needed			FOR CONTINUA	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
(a) Name	(b) Address	(C) EIN	filing organization's	contributions received and
			funds. If none, enter -0	promptly and directly
				delivered to a separate political organization
				If none, enter -0
UFCW LOCAL 881 PAC	ROSEMONT, IL			
	60018	06-1808805	0.	198,047.
				ļ. <u>.</u>
		_		1

932041 02-04-10

LHA

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

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 Part II-A Complete if the org	LOCAL 881 panization is exe	UNION mpt under section	on 501(c)(3) and fi	36-2 led Form 5768	125555 Page 2
(election under sec	tion 501(h)).				
A Check f the filing organiza	tion belongs to an aff	liated group.			
3 Check 🕨 🔲 if the filing organiza	tion checked box A a	nd "limited control" pr	rovisions apply.	γ	
	ts on Lobbying Expe ditures" means amou		l.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infli	uence public opinion (grass roots lobbying)	••		
b Total lobbying expenditures to infli	uence a legislative bo	dy (direct lobbying)			
c Total lobbying expenditures (add l	nes 1a and 1b)				
d Other exempt purpose expenditure	es				
e Total exempt purpose expenditure	es (add lines 1c and 1	d) .			
f Lobbying nontaxable amount. Ent	er the amount from th	e following table in bo	oth columns		
If the amount on line 1e, column (a) o	or (b) is: The lot	bying nontaxable an	nount is:		* ** *
Not over \$500,000	20% of	the amount on line 1	Э	*	*
Over \$500,000 but not over \$1,00	0,000 \$100,00	00 plus 15% of the ex	cess over \$500,000.	,	
Over \$1,000,000 but not over \$1,5	500,000 \$175,00	00 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000 \$225,0	00 plus 5% of the exc	ess over \$1,500,000.		
Over \$17,000,000	\$1,000	000.		•	•
g Grassroots nontaxable amount (er	•				
h Subtract line 1g from line 1a If zer	•	•		<u> </u>	
i Subtract line 1f from line 1c. If zero	· ·				J
j If there is an amount other than ze		line 1i, did the organi	zation file Form 4720	ſ	¬ ¬
reporting section 4911 tax for this				· · _ · · · !	Yes No
	zations that made a		er Section 501(h) on do not have to com nes 2a through 2f on p		
	Lobbying Expe	nditures During 4-Ye	ear Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount	* ***	``			
(150% of line 2a, column(e))	`* +	1		ļ · · · ·	
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount	No the	a	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
(150% of line 2d, column (e))	, J. J.				

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2009 LOCAL 881 UNION 36-2125555 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)).

	(8	3)		b)
	Yes	No	Ām	ount
During the year, did the filing organization attempt to influence foreign, national, state or	*		۹.,	-
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)?			1	
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities? If "Yes," describe in Part IV				
j Total. Add lines 1c through 1ı				
a 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				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			<u> </u>	<u> </u>
art III-A Complete if the organization is exempt under section 501(c)(4), section	ion 501(c))(5), or s	ection	
501(c)(6).			,	,
			Yes	<u> </u>
Were substantially all (90% or more) dues received nondeductible by members?		. 1	X	ļ
		. 2	Х	<u> </u>
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 a	ion 501(c art III-A, li	2 3)(5), or s	ection	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes."	ion 501(c art III-A, li	2 3)(5), or s	ection	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes." Dues, assessments and similar amounts from members	art III-A, li	2 3)(5), or s ine 3 is a	ection	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes." Dues, assessments and similar amounts from members	art III-A, li	2 3)(5), or s ine 3 is a	ection	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	art III-A, li	2 3)(5), or s ine 3 is a	ection	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	art III-A, li	2 3)(5), or sine 3 is a	ection	
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Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public Inspection

Employer identification number Name of the organization 36-2125555 LOCAL 881 UNION Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds Total number at end of year 1 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1

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

the following amounts required to be reported under SFAS 116 relating to these items

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide

Schedule D (Form 990) 2009

(ii) Assets included in Form 990, Part X

a Revenues included in Form 990, Part VIII, line 1b Assets included in Form 990, Part X

Schedule D (Form 990) 2009

Part VII Investments - Other Securities. Se	e Form 990, Part X, line 12			
(a) Description of security or category (including name of security)	(b) Book value		Method of valua end-of-year mar	
Financial derivatives				
Closely-held equity interests				
Other				
POOLED FUNDS	2,265,766.	END-OF-YEAR		
INLAND SECURITIES	232,500.	END-OF-YEAR	R MARKET	VALUE
				<u>-</u>
				
		<u> </u>		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)	2,498,266.		•	1
Part VIII Investments - Program Related. s	ee Form 990, Part X, line 13	3		
(a) Description of investment type	(b) Book value		Method of valua	
(a) becompained introduction type	(D) Book value	Cost or	end-of-year mar	ket value
				
	<u> </u>	· -		
			-	, <u></u>
				· <u>-</u>
· · · · · · · · · · · · · · · · · · ·	<u> </u>	•		
				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)	-		· -	
Part IX Other Assets. See Form 990, Part X, line	15.			
	Description	· · · · · · · · · · · · · · · · · · ·		(b) Book value
				-
		·. <u> </u>		
			<u>.</u>	
 				<u> </u>
				-
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X,				<u> </u>
(a) December of helidic	mic 23.	(b) Amount		
1. (a) Description of liability Federal income taxes			•	
ACCRUED PAYROLL - NET		240,437.	•	•
ACCRUED REAL ESTATE TAXES		16,772.		
ANNUITY CONTRACTS (DEFERRED			-	~ ^
COMPENSATION)		358,696.		•
ACCRUED RETIREMENT BENEFITS I	PAYABLE	161,718.		
DEFERRED RENT		106,128.	_	-
				- mil i i i
Total. (Column (b) must equal Form 990, Part X, col (B) lin	e 25.)	883,751.		

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

932053 02-01-10

Sche	dule D (Form 990) 2009 LOCAL 881 UNION			<u> 36-</u> :	2125555 Page 4
Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audite	d Financial State	ment	
1	Total revènue (Form 990, Part VIII, column (A), line 12)		1		14,447,492.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		14,122,601.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		. 3		<u>324,891.</u>
4	Net unrealized gains (losses) on investments		. 4		688,183.
5	Donated services and use of facilities	-	5		
6	Investment expenses		. 6		
7	Pnor period adjustments		. 7		
8	Other (Describe in Part XIV)		8		<u>57,967.</u>
9	Total adjustments (net) Add lines 4 through 8		9		746,150.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and Audited Financial Statements	nd 9	h Povenue nor P	otur	1,071,041.
Pai	t XII Reconciliation of Revenue per Audited Financial Stateme	ents vvit	ii nevellue per n	1 1	
1	Total revenue, gains, and other support per audited financial statements			1	15,135,675.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1	COO 103		
а	Net unrealized gains on investments	_2a	688,183.		
b	Donated services and use of facilities	2b			
С	Recovenes of pnor year grants	2c		-	
d	Other (Describe in Part XIV)	2d			600 102
е	Add lines 2a through 2d			2e	688,183.
3	Subtract line 2e from line 1			3	14,447,492.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		. :	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	- · · · · · · · · · · · · · · · · · · ·		
b	Other (Describe in Part XIV.)	4b			
С	Add lines 4a and 4b			4c	14,447,492.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XIII Reconciliation of Expenses per Audited Financial Statem	onte W	ith Evpenses per	5 Pot	
Pa		ICIILO VV	itii Experises per	1	14,064,634.
1	Total expenses and losses per audited financial statements				14,004,034.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1		1	
а	Donated services and use of facilities	2a		1 .	
b	Prior year adjustments	2b		∤ ⊺	
C	Other losses	2c	140 000	- }	
d	Other (Describe in Part XIV.)	2d	140,080.	7	140,080.
е	Add lines 2a through 2d		•	2e	13,924,554.
3	Subtract line 2e from line 1			3	13,924,554.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1		~	
а	•	4a	100 047	┥	
	Other (Describe in Part XIV.)	. 4b	198,047.	1	100 047
С	Add lines 4a and 4b			4c	198,047.
5 D2	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) rt XIV Supplemental Information			5	14,122,601.
		III. limaa da	and 4: Port IV lines 1	b and	2h Part V line 4: Part
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part				
X, lin	e 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also com	ipiete this	part to provide arry ad	uniona	ai information.
	DE UT LINE O OBJED AD HIGHWENING.				
PAI	RT XI, LINE 8 - OTHER ADJUSTMENTS:				
~	NACE THE BLOCK AGOITHM				
CH	ANGE IN PAC ACCOUNT				
ר א כד	DE VIII IING OD OMUGD ADIIICMMENMO.				
PA	RT XIII, LINE 2D - OTHER ADJUSTMENTS:		 		
אַגּם	C DONATIONS: 140080.				
LW.	C DOMUTIONS: T#0000.				
וגם	RT XIII, LINE 4B - OTHER ADJUSTMENTS:				
- 1	KI AIII, BING 4D CHIEK ADOUDINGAID.				

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Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 LOCAL 881 UNION	36-2125555 Page 5
Schedule D (Form 990) 2009 LOCAL 881 UNION Part XIV Supplemental Information (continued)	
TRANSFERS TO PAC: 198047.	

SCHEDULE	Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

1 '	
2009	Cpen to Public
2009	Inspection

2 Employer identification number 36-2125555 X Yes 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection General Information on Grants and Assistance LOCAL 881 UNION criteria used to award the grants or assistance? Name of the organization Part I

ļ			
	, line 21, for any	space is needed	(h) Purpose of grant or assistance
	res" to Form 990, Part IV	1 (Form 990) if additional	(f) Method of (g) Description of valuation (book, non-cash assistance
	anization answered "	art IV and Schedule I-	(f) Method of valuation (book,
ed States.	Complete if the org	han \$5,000. Use P	(d) Amount of (e) Amount of
t funds in the Unite	e United States.	nt received more t	(d) Amount of
toring the use of grant	d Organizations in th	s box if no one recipie	(c) IRC section
ocedures for mon	Governments an	\$5.000. Check thi	(b) EIN
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	1 (a) Name and address of organization
2 Des	Part II		1 (a)

recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	\$5.000. Check this	box if no one recipient	received more tha	an \$5,000. Use Pa	rt IV and Schedule I-1	(Form 990) if addition	al space is neec'ed
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOCAL 86D HARDSHIP FUND P.O. BOX 1514 MUSCATINE, IA 52761	42-6068073	501(C)(5)	10,000,	4*0	N/A	N/A	TO SUPPORT UFCW MEMBERS DURING LOCKCUT
CHICAGO JOBS WITH JUSTICE 330 SOUTH ASHLAND AVENUE CHICAGO, IL 60601	80-0111994	501(C)(3)	2,000	0	N/A	N/A	JOBS WITH JUSTICE EDUCATION FUND
ACTION NOW 209 WEST JACKSON CHICAGO II. 60606	26-1396958	501(C)(4)	11 000	0	N/A	N/A	EVENT SPONSCR
CITIZEN ACTION/ILLINOIS 27 EAST MONROE STREET CHICAGO, IL 60603		501(C)(4)	6,250,	0	N/A	N/A	TO SUPPORT FUBLIC INTEREST ANI SOCIAL CHANGE
GLENWOOD SCHOOL 500 WEST 187TH STREET GLENWOOD, IL 60425	36-2167087	501(C)(3)	23,000.	0	N/A	N/A	CHILDHOOD EDUCATION
PEGGY BROWNING FUND 1818 MARKET ST PHILDELPHIA, PA 19103	23-2887086	501(C)(3)	5,000,	0.	N/A	N/A	CHARITABLE DONATION

Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations

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

Schedule I (Form 990) 2009

Page 2

36-2125555

Schedule I (Form 990) 2009 LOCAL 881 UNION

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIPS FOR STUDENTS ATTENDING COLLEGE	ın	000 8	0	€/ <i>X</i>	N/A
FLOWERS AND BIBLES	100		19,961,		FLOWERS AND BIBLES FOR DECEASED MEMBERS FAMILIES,
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	de the informatio	n required in Part I, I	ine 2, and any other	additional information.	
SCHEDULE I, PART I, LINE 2: THE LOCAL	CAL CARE	CAREFULLY REVIEWS		ALL REQUESTS FOR	
DONATIONS PRIOR TO THEIR APPROVAL	AND DISB	ISBURSEMENT.	APPROVAL	IS GRANTED	
ONLY TO REPUTABLE ORGANIZATIONS WH	WHO HAVE S.	SATISFIED T	THE BOARD'S	DUE	
DILIGENCE. THE BOARD PERFORMS NO	SUBSEQUE	SUBSEQUENT MONITORING REGARDING	ING REGARD	ING THE USE	
OF DONATIONS AND GRANTS. ALL RECORDS		RDING DISB	URSEMENT O	REGARDING DISBURSEMENT OF FUNDS ARE	
MAINTAINED AT THE LOCAL'S OFFICE.					

Schedule I (Form 990) 2009

Department of the Treasury Internal Revenue Service SCHEDULE 1-1 (Form 990)

Continuation Sheet for Schedule I (Form 990)

OMB No 1545-0047 Open to Public

Employer identification number Inspection 36-2125555 Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) ► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. LOCAL 881 UNION Name of the organization Part

Schedule I-1 (Form 990) 2009 (h) Purpose of grant or assistance EMPLOYEE FREE CHOICE WORKERS RELIEF FUND CAMPAIGN (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) N/A (e) Amount of non-cash assistance 100,000, (d) Amount of cash grant 10,000 For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) IRC section if applicable 501(C)(5) 501(C)(5) 56-2585698 53-0220586 (p) EIN PATRICK CUDAHY WORKERS RELIEF FUND (a) Name and address of organization or government UFCW INTERNATIONAL UNION 1775 K. STREET, N.W. WASHINGTON DC 20006 MILWAUKEE, WI 53226 2001 N. MAYFAIR RD ΕĦΑ

SCHEDULE J (Form 990)

Compensation Information

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

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

LOCAL 881 UNION

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

2009 Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

➤ Attach to Form 990. ➤ See separate instructions.

Inspection Employer identification number

36-2125555

Pa	rt 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 in Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.		-	-
	First-class or charter travel Housing allowance or residence for personal use			
	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 (e.g., maid, chauffeur, chef)			١.
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	1b		X
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	X	<u> </u>
			-	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply.	}		1
	Compensation committee Written employment contract			
	Independent compensation consultant	Ì	'	-
	Form 990 of other organizations Approval by the board or compensation committee	ł		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization.			X
а	Receive a severance payment or change-of-control payment?	4a	х	
þ	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	^	X
С	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			
	Out and the FOM NOV and FOM NAV annual state and annual annual annual state lines F. O.			
_	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	_		
5			-	
_	contingent on the revenues of The organization?	5a		İ
d	Any related organization?	5b		
IJ	If "Yes" to line 5a or 5b, describe in Part III		1	
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
U	contingent on the net earnings of:		-	
9	The organization?	6a		
h	Any related organization?	6b		
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
•	not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
•	initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	_		T
•	Regulations section 53 4958-6(c)?	9		

Schedule J (Form 990) 2009

LOCAL 881 UNION

Schedule J (Form 990) 2009 LO

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

	(B) Breakdown of W-2	own of W	-2 and/or 1099-MI	and/or 1099-MISC compensation	(0)	(Q)	(E)	(F)
(A) Name	(i) Base compensation	tion	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported in prior Form 990 or Form 990-EZ
	(1) 155,036.	36.	5,906.	0	0	15,056.	175,998.	0
LISA CATANZARO	(ii) 0.	0.	5,906.	19.497.	0	15.056.	195.515.	000
MAYNARD JEROME		0	1 [4 I		0
	208,	631.	7,949.	38,	2,341.	14,724.	272,231.	0
KONALD POWELL	200	770	7 /31	08 858	0 638	15 056	256 753	000
STEVEN POWELL	~	0	١ ١	7	7	٧ .		0
	(0)							
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	(i)							
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	6							
	(ii)							
	(3)							
	(ii)							
	(E)							
	(ii)							

Schedule J (Form 990) 2009

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Schedule J (Form 990) 2009

SCHEDULE J-2

Department of the Treasury

Internal Revenue Service

1 (Form 990)

Continuation Sheet for Form 990

2009

➤ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

➤ See the Instructions for Form 990.

Open to Public Inspection

Name of the Organization

Employer Identification number

LOCAL: 88									36-212	
Part I Continuation of Officers, D	irectors, Tr	ust	ee:	s, K	ey	Em	plo	yees, and Highes	t Compensated I	Employees
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	١		Pos				Reportable	Reportable	Estimated
	hours	(CI	heck	k all 1	that	app	ly)	compensation from	compensation from related	amount of other
	per week			,				the	organizations	compensation
	Week	횮				nptoy		organization	(W-2/1099-MISC)	from the
		ig i	_			ted e		(W-2/1099-MISC)	-	organization
		ste	ruste		l 。	pensa				and related
		la E	ton at		ploye	tcom				organizations
		individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
CHERYL MAY		-	Ι_	Ť	-	-				
VICE PRESIDENT	1.00			x				1,496.	0.	0.
MICHAEL MCCALL										
VICE PRESIDENT	1.00	ļ	ļ .	X				2,053.	0.	0.
JANET PARSE										
VICE PRESIDENT	1.00	L_	<u> </u>	x		L		1,957.	0.	0.
MARY REID (PAST)				1						
VICE PRESIDENT	1.00		L	X	ļ		<u> </u>	900.	0.	0.
MILDRED SHANNON	1		l	ł	ĺ					
VICE PRESIDENT	1.00	lacksquare		X			L	1,496.	0.	0.
THOMAS TYSKA		İ								_
VICE PRESIDENT	1.00			X		_	<u> </u>	1,897.	0.	0.
HELEN VEDNER						1			_	
VICE PRESIDENT	1.00	lacksquare	↓_	X	$ldsymbol{f eta}$		<u> </u>	1,801.	0.	0.
DELORES WALLERSTEDT (PAS	1	ļ								
VICE PRESIDENT	1.00	\vdash	₩	X	_	ļ	<u> </u>	600.	0.	0.
VALERIE WICINSKI	1 00							0.053		
VICE PRESIDENT	1.00	1	-	X	├	<u> </u>	_	2,053.	0.	0.
DIANE ZABALY	1 00			٠,	ŀ			1 766		
VICE PRESIDENT	1.00	-	-	X	├─	 		1,766.	0.	0.
DOROTHY ZAKRZEWSKI	1.00			x				1,400.	0.	0.
VICE PRESIDENT PATRICIA VARDALOS	1.00	1		^	├	\vdash	\vdash	1,400.		
COMPTROLLER	40.00				Ì	x		128,407.	0.	15,056.
COMPTROLLER	40.00					<u> </u>	H	120,407.		13,030.
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2009

SCHEDULE L

~ (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

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. ▶ See separate instructions.

2009

Open To Public Inspection

Name of t	he organizati										Employer			umber
D41	<u> </u>		AL 881				504()(1)				<u> 36-21</u>	<u> 2555</u>	5	
Part I				•		3) and section 990, Part IV, I		=		7 Parl	t V. lina 10)h		
1					On rolling	550, 1 ait 14, 1		_		-	<u>. v, iii ie 40</u>	, , , , , , , , , , , , , , , , , , ,	(c) Corr	ected?
	(a) Na	me of disc	qualified pers	son			(b) D	escription o	f transa	ction			Yes	No
						<u> </u>								
														
	-			<u> </u>									-	
	_													
												-		
2 Enter	the amount o	of tax impo	sed on the c	organization	managers	or disqualifie	ed persons	s during the	year un	der				
	on 4958			-					•	-	> \$			
3 Enter	the amount o	of tax, if an	y, on line 2,	above, reim	bursed by	the organiza	tion	•	•		▶ \$			
Part II	Loans to	and/or	From Int	erested	Persons	<u> </u>								
	Complete i	f the orga	nization ansv	vered "Yes	on Form	990, Part IV, I	ine 26, or	Form 990-E	Z, Part V	/, line 3	38a.			
	lame of intere		(b) Loan t			nal principal	(d) Bala	ance due		ln "C		proved pard or	(g) W	
per	son and purp	ose	the orgai		an	nount			_	ault?	cómn	nrttee?	agreer	
11 AD	VANCES	a ¢10	То	From X	 	1,100.		1,100.	Yes	No X	Yes	No	Yes	No X
	VANCES VANCES			X	 	2,500.		$\frac{1}{2},500.$		X	X	<u> </u>		X
<u> </u>	VILICED	C QIO	<u> </u>			2,300.		27500.			 -	<u> </u>		
						_								
			<u> </u>		<u> </u>			2 600		<u> </u>		<u> </u>		
Part III	Grants	or Assis	tance Ber	efiting l	ntereste	<u> </u>		<u>3,600.</u>						<u> </u>
1 412111	_J					990, Part IV,								
	(a) Name of in			103		onship betwe		ted person	and		(c) An	nount ar	nd type o	 f
		<u> </u>					ganization					assistai	nce	
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	_									-				
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	- .					_				+-				
Part IV	Busines	s Trans	actions In	volving	Interest	ed Person	s.							
				-		990, Part IV,				Ι.			(a) Sha	inng of
1	(a) Name of ir	nterested p	person	, , ,		ıp between ır d the organız		(c) Amo transa		(0	transact) transact		organiz	ation's ues?
				.									Yes	No
						- · · · · · -								
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				- -	-									
LHA For	Privacy Act a	nd Paper	work Reduc	tion Act N	otice, see	the				Sched	ule L (For	rm 990 d	or 990-E	Z) 2009

SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS

Instructions for Form 990 or 990-EZ.

SCHEDULE 0

- (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

LOCAL 881 UNION

Employer identification number 36-2125555

POWELL, HAS TWO SONS EMPLOYED AS OFFICERS OF THE LOCAL, STEVE POWELL, SECRETARY-TREASURER AND BRAD POWELL, VICE-PRESIDENT. FORM 990, PART VI, SECTION A, LINE 6: AN ACTIVE MEMBER IS A MEMBER WHO HAS SATISFIED THE REQUIREMENTS FOR MEMBERSHIP AND IS STILL EMPLOYED UNDER THE JURISDICTION OF THE LOCAL UNION. AN ACTIVE MEMBER PAYS FULL DUES AND HAS FULL VOTING RIGHTS. FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS OF THE LOCAL ELECT THE GOVERNING BODY. FORM 990, PART VI, SECTION A, LINE 7B: CERTAIN DECISIONS ARE SUBJECT TO APPROVAL BY MEMBERSHIP. FORM 990, PART VI, SECTION B, LINE 11: A COPY OF THE FORM 990 WAS PROVIDED TO THE ORGANIZATION'S GOVERNING BODY FOR FORMAL BOARD REVIEW AND APPROVAL PRIOR TO ITS FILING. FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR THE PRESIDENT, LOCAL UNION OFFICERS, AND OTHER KEY EMPLOYEES IS ORIGINATED AND APPROVED BY THE GOVERNING BODY IN ACCORDANCE WITH THE GUIDELINES SET BY THE LOCAL'S	LOCAL 881 UNION 36-212555
SECRETARY-TREASURER AND BRAD FOWELL, VICE-PRESIDENT. FORM 990, PART VI, SECTION A, LINE 6: AN ACTIVE MEMBER IS A MEMBER WHO HAS SATISFIED THE REQUIREMENTS FOR MEMBERSHIP AND IS STILL EMPLOYED UNDER THE JURISDICTION OF THE LOCAL UNION. AN ACTIVE MEMBER PAYS FULL DUES AND HAS FULL VOTING RIGHTS. FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS OF THE LOCAL ELECT THE GOVERNING BODY. FORM 990, PART VI, SECTION A, LINE 7B: CERTAIN DECISIONS ARE SUBJECT TO APPROVAL BY MEMBERSHIP. FORM 990, PART VI, SECTION B, LINE 11: A COPY OF THE FORM 990 WAS PROVIDED TO THE ORGANIZATION'S GOVERNING BODY FOR FORMAL BOARD REVIEW AND APPROVAL PRIOR TO ITS FILING. FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR THE PRESIDENT, LOCAL UNION OFFICERS, AND OTHER KEY EMPLOYEES IS ORIGINATED AND APPROVED BY THE GOVERNING BODY IN ACCORDANCE WITH THE GUIDELINES SET BY THE LOCAL'S	FORM 990, PART VI, SECTION A, LINE 2: THE PRESIDENT OF THE LOCAL, RON
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HAS SATISFIED THE REQUIREMENTS FOR MEMBERSHIP AND IS STILL EMPLOYED UNDER THE JURISDICTION OF THE LOCAL UNION. AN ACTIVE MEMBER PAYS FULL DUES AND HAS FULL VOTING RIGHTS. FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS OF THE LOCAL ELECT THE GOVERNING BODY. FORM 990, PART VI, SECTION A, LINE 7B: CERTAIN DECISIONS ARE SUBJECT TO APPROVAL BY MEMBERSHIP. FORM 990, PART VI, SECTION B, LINE 11: A COPY OF THE FORM 990 WAS PROVIDED TO THE ORGANIZATION'S GOVERNING BODY FOR FORMAL BOARD REVIEW AND APPROVAL PRIOR TO ITS FILING. FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR THE PRESIDENT, LOCAL UNION OFFICERS, AND OTHER KEY EMPLOYEES IS ORIGINATED AND APPROVED BY THE GOVERNING BODY IN ACCORDANCE WITH THE GUIDELINES SET BY THE LOCAL'S	SECRETARY-TREASURER AND BRAD POWELL, VICE-PRESIDENT.
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CONSTITUTION AND BYLAWS.	THE GOVERNING BODY IN ACCORDANCE WITH THE GUIDELINES SET BY THE LOCAL'S
	CONSTITUTION AND BYLAWS.

AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST AT THE LOCAL'S MAIN OFFICE

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

Schedule O (Form 990) 2009

932211
02-03-10

FORM 990, PART VI, SECTION C, LINE 19: THE LOCAL MAKES GOVERNING DOCUMENTS

SCHEDULE O

Department of the Treasury

Internal Revenue Service

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

LOCAL 881 UNION	36-2125555
DURING REGULAR BUSINESS HOURS WITH ADVANCE NOTICE.	
SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS	5:
(A) NAME OF INTERESTED PERSON:	
11 ADVANCES @ \$100 EACH TO 11 OFFICERS AND KEY EMPLOYEES	· · · · · · · · · · · · · · · · · · ·
(A) PURPOSE OF LOAN:	
ADVANCES FOR EXPENSES TO BE INCURRED IN FIRST YEAR OF EMP	PLOYMENT.
(A) NAME OF PERSON: 25 ADVANCES @ \$100 EACH TO 25 EMPLOYE	EES.
(A) PURPOSE OF LOAN:	
ADVANCES FOR EXPENSES TO BE INCURRED IN FIRST YEAR OF EMP	PLOYMENT.
	

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Part

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

2009 Open to Public Inspection OMB No 1545-0047

Employer identification number 36-2125555

LOCAL 881 UNION Name of the organization

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

Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) End-of-year assets e Total income ਉ Legal domicile (state or foreign country) Primary activity Name, address, and EIN of disregarded entity Part II

501(c)(3)) 527 ILLINOIS TO ACCEPT CONTRIBUTIONS AND MAKING EXPENDITURES TO LOCAL POLITICIANS UFCW LOCAL 881 POLITICAL ACTION COMMITTEE 36-3276557, 10400 WEST HIGGINS ROAD 60018 IL ROSEMONT

Direct controlling entity

status (if section Public charity

Exempt Code

Legal domicile (state or

Primary activity

Name, address, and EIN

of related organization

foreign country)

section

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

932161 02-04-10

Schedule R (Form 990) 2009

36-2125555 Page 2

Schedule R (Form 990) 2009 LOCAL 881 UNION

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

(6)	3	3	5	9		9	3	3	6	9
Name, address, and EIN of related organization	ctivity	Legal domicile (state or foreign country)	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)		total ne	Share of end-of-year assets	tion- ions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	6 Pag.
			-							
Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	janizations Taxable as a Corp poration or trust during the tax	ooration or 1 c year.)	rust (Complete if t	he organizatio	in answered "Yes	" to Form 990, Pa	ırt IV, line 34	because it h	ad one or more r	elated
(a) Name, address, and EIN of related organization	Z c	Prın	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(d) Type of entity (C corp, S corp, or trust)	(f) Share of total income		(g) Share of Peend-of-year ov	(h) Percentage ownership
								· · · · · · · · · · · · · · · · · · ·		
832182 02-04-10			32					Sch	Schedule B (Form 990) 2009	90) 5009

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Page 3

36-2125555

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			Yes
 Duning the tax year, and the organization engage in any of the following transactions with one or more related organizations listed in Parts into a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity 	in Parts ii-iv c		Ta X
b Gift, grant, or capital contribution to other organization(s)			×
c Gift, grant, or capital contribution from other organization(s)			1c X
d Loans or loan guarantees to or for other organization(s)			DI X
e Loans or loan guarantees by other organization(s)			1e X
f Sala of accate to other organization(e)			×
	:		
	:		1
h Exchange of assets			1
i Lease of facilities, equipment, or other assets to other organization(s)			1i X
i Tease of facilities, equipment, or other assets from other organization(s)			×
k Performance of services or membership or fundraising solicitations for other organization(s)	-		×
m Sharing of facilities, equipment, mailing lists, or other assets			1m X
n Sharing of paid employees			th X
 Reimbursement paid to other organization for expenses 	: :	:	10
p Reimbursement paid by other organization for expenses	٠		dt X
			-
q Other transfer of cash or property to other organization(s)			19 X
r Other transfer of cash or property from other organization(s)			1 X
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	relationships and transac	ction thresholds	
(a) Name of other organization(s)		(b) Transaction type (a-r)	(c) Amount involved
(1) UFCW LOCAL 881 POLITICAL ACTION FUND		В	198,047.
•			
[2]			
(3)			
(4)			
(5)			
(6) 932 163 02-04-10		Schec	Schedule R (Form 990) 2009
		,,,,	~~~~ /~~~ ··· · · · · · · · · ·

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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.

that was not a related organization. See instructions regarding exclusion for certain investment partnerships.	lusion for certain investment partners	nips.					
(a)	(q)		9	(e)	£	(6)	Ξ
Name, address, and EIN of entity	Primary activity	Legal domicıle (state or foreign	Ave all partners section 501(c)(3) organizations?	Share of end-of- year assets	Dispropor- tionate allocations?	amount in box 20	General or managing partner?
			Yes No	- 1	Yes No	(Form 1365)	ויו
							_
						_	
			_				
		l					
							_

932164 02-04-10

Schedule R (Form 990) 2009

Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box	▶ [X]
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).	
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form	n 8868
Part 1 Automatic 3-Month Extension of Time. Only submit original (no copies needed).	
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete	
Part I only	▶ □
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension to file income tax returns.	on of time
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1 (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidate you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of the www.irs.gov/efile and click on e-file for Chanties & Nonprofits.	I) you want the additional ed Form 990-T. Instead,
Type or Name of Exempt Organization Employ	yer identification number
print 1003 1 001 1771 07	212555
File by the	-2125555
Number, street, and room or surte no. If a P.O. box, see instructions. 10400 W. HIGGINS RD.	
City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
ROSEMONT, IL 60018	THE SER
Check type of return to be filed(file a separate application for each return):	Child ASSISTANC
Form 990 Form 990-T (corporation) Form 4720	•4
Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5227	MAY 17 2010
Form 990-EZ Form 990-T (trust other than above) Form 6069	RECEIVED
☐ Form 990-PF ☐ Form 1041-A ☐ Form 8870	
STEVEN POWELL-SECRETARY/TREAS. The books are in the care of 10400 HIGGINS RD, ROSEMONT, IL - 60018	
Telephone No ▶ (847) 294-5064 FAX No ▶	
If the organization does not have an office or place of business in the United States, check this box	▶ □
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the	
DOX . If it is for part of the group, check this box and attach a list with the names and EINs of all members	s the extension will cover.
1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2010 , to file the exempt organization return for the organization named above. The	ne extension
is for the organization's return for:	
► X calendar year 2009 or	
tax year beginning, and ending	
2 If this tax year is for less than 12 months, check reason: Initial return Final return Ch	nange in accounting period
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	
nonrefundable credits. See instructions.	<u> </u>
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	
tax payments made. Include any prior year overpayment allowed as a credit.	5
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	
deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	s N/A
See instructions.	
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO	for payment instructions.
HA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.	Form 8868 (Rev. 4-2009)