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Form **990**

2 2010

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SCANNED

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning and ending Check if applicable C Name of organization D Employer identification number Please use IRS NEVADA SERVICE EMPLOYEES UNION label or Address change SEIU LOCAL 1107 print or Name change type Doing Business As 88-6021265 Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Specific Termin-ated 785 EAST SUNSET ROAD (702)386<u>-8849</u> Instruc-Amended City or town, state or country, and ZIP + 4 752,238. G Gross receipts \$ Applica-LAS VEGAS, NV 89120 H(a) Is this a group return pending F Name and address of principal officer AL MARTINEZ Yes X No for affiliates? SAME AS C ABOVE H(b) Are all affiliates included? _ Yes L Tax-exempt status X 501(c) (5) (insert no) 4947(a)(1) or 527 If "No," attach a list (see instructions) J Website: ► WWW.SEIUNV.ORG H(c) Group exemption number ▶ Trust X Association K Form of organization: Corporation L. Year of formation: 1985 M State of legal domicile: NV Part I Summary Briefly describe the organization's mission or most significant activities A LABOR UNION FOR THE BETTERMENT Activities & Governance AND ADVANCEMENT OF ITS MEMBERS. Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 43 43 Number of independent voting members of the governing body (Part VI, line 1b) 4 36 Total number of employees (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 0. 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T, line 34 7b 0. **Current Year Prior Year** Contributions and grants (Part VIII, line 1h) 5,732,744. 6,080,886 Program service revenue (Part VIII, line 2g) 1,926. 3,402. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 1<u>5,833</u>. 16,092. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 6,098,645. 5,752,238. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 members-(Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,643,643 2,407,153. 15 16a Professional fundraising fees (Pap IX, column (A), line 11e) fungialsing opportune (Party, column (D), line 25) b 3,258,257 2,840,703. er expenses (Part IX, columno), lines 11a-11d, 11f-24f) al expenses Add lines 13-1/4 just equal Part IX, column (A), line 25) 17 5,247,856. <u>5,901,900</u>. 18 Revenue less expenses Subtract line 18 from line 12 504,382. 196,745 19 Net Assets or Fund Balances **Beginning of Current Year** End of Year 798,950. 483,633 Total assets (Part X, line 16) 34,295. 223,360 Total liabilities (Part X, line 26) 260,273 764,655 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 05/20/10 Sign Signature of officer Here AL MARTINEZ, PRESIDENT Type or print name and title Check if Preparer's identifying number (see instructions) Preparer's Paid selfsignature employed > Preparer's Firm's name (or EIN > LINDQUIST LLP Use Only yours if self-employed). THREE POINTE DRIVE, SUITE 317 Phone no. \triangleright (714)257-0100 CA 92821-3681 BREA, X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

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

16

4e Total program service expenses ►\$

Other program services (Describe in Schedule O)

including grants of \$

Form **990** (2009)

4d

) (Revenue \$

(Expenses \$

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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		100	
	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		
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		Х
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		Х
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		Х
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		х
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		Х
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	i
•	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			
	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			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
۰	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	}	i	
	Part X, line 16? If "Yes," complete Schedule D, Part IX.	İ	ļ	Ì
•	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	1	X
12Δ	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
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
	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		Х
15	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		X
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18_		_X_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
	and the second s	Form	000	เวกกดา

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Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did 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,			
	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			
	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		<u> </u>
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		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	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		<u> </u>
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	'		
	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			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete	}		
	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			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	<u></u>	X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was		ļ	
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			1
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	ļ	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	-	X
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	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	1	}	}
	If "Yes," complete Schedule R, Part V, line 2	<u>35</u>		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	<u> </u>	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		Ì	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		Form	990	(200

Form 990 (2009) SEIU LOCAL 1107

Part 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 27			
	Enter the number of Forms W-2G included in line 1a Enter -0 if not applicable	1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable gaming			
	(gambling) winnings to prize winners?	1	1c_	X	
2a	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 36			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retuined in the control of the control		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	•			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d by this return?	3a_		<u>X</u>
	If "Yes," has it filed a Form 990 T for this year? If "No," provide an explanation in Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	·			
	financial account in a foreign country (such as a bank account, securities account, or other financial.	account)?	_4a		X
D	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		' I	
F-	Financial Accounts		c -		v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	estion?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transalf "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega		<u>5b</u>		
С	Tax Shelter Transaction?	arding Profibiled	5c		
60	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne organization solicit	30		
Qa	any contributions that were not tax deductible?	le organization solicit	6a		x
h	If "Yes," did the organization include with every solicitation an express statement that such contribut	tions or aifts			
b	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods and services		Ì	
	provided to the payor?		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b_		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
	to file Form 8282?	1 1	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a	personal			
	benefit contract?		7e_	ļ. —-	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont		7f_		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required'		7g	 -	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0		7h		-
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or		}		
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exc	ess pusiness noidings	8		
_	at any time during the year?		 •		-
9	Sponsoring organizations maintaining donor advised funds.		9a		
a	Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
b 10	Section 501(c)(7) organizations. Enter				
10	Initiation fees and capital contributions included on Part VIII, line 12	10a			
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1	}	
11	Section 501(c)(12) organizations. Enter		1		
''a	Gross income from members or shareholders	11a		1	
	Gross income from other sources (Do not net amounts due or paid to other sources against]		ļ
~	amounts due or received from them.)	11b]		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		<u> </u>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			<u></u>
			Form	990	(2009)

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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

<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
	Enter the number of voting members of the governing body 1a 43			
b	Enter the number of voting members that are independent 1b 4	<u> </u>		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		X X 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		<u> </u>
6	Does the organization have members or stockholders?	6	<u> X</u>	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		<u>X</u> _
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	i i		
	by the following.		1	
а	The governing body?	8a	_ X	
þ	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		<u>X</u>
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,		1	
	and branches to ensure their operations are consistent with those of the organization?	10b_		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	
11A	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	
þ	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		X
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
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			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	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	1		
	taxable entity during the year?	16a		X
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 ► 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	e 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,	and fina	ıncıal	
	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 organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	ation 🕨		
	B. HARRIS - (702)386-8849			
	33785 EAST SUNSET RD., LAS VEGAS, NV 89120		990	

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year 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 "
- 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	(B)			(0				(D)	(E)	(F)
Name and Title	Average	ĺ.,	Position (check all that apply)		Reportable	Reportable	Estimated			
	hours	-	neck	(all t	that	app	ly)	compensation from	compensation from related	amount of other
	per week	Individual trustee or director						the	organizations	compensation
		ordi	ee			sated		organization	(W-2/1099-MISC)	from the
		truste	al trus		yee	mpen		(W-2/1099-MISC)		organization
		ndual	nstitutional trustee	15	Key employee	Highest compensated employee	Je.			and related organizations
		ם	물	Officer	Æ	Fig.	Former			Organizations
ABDULLAH, RAH										
CHIEF STEWARD	8.00	X	<u>.</u>	X				0.	0.	0.
BOLUNA, SHERRY									_	
CHIEF STEWARD	8.00	X	ļ	X		<u> </u>		0.	0.	0.
BOOCHER, DAVE	0.00									
VICE PRESIDENT - PAST	8.00	X.	_	X	-	├		0.	0.	0.
BRAMWELL, MARVEL	0.00			.		1		0.	0.	0.
CHIEF STEWARD - PAST	8.00	<u> </u>	-	X	-					<u> </u>
BROTHERS, KIMBERLY VICE PRESIDENT	8.00	v		x				0.	0.	0.
CAMPBELL, JOE	8.00	<u> </u>	-	^		1-	-			
CHIEF STEWARD	8.00	x		x				0.	0.	0.
NORINE, CLARK	0.00				-	T	_			
CHIEF STEWARD	8.00	x		X				0.	0.	0.
CLOUTHIER, MICHELLE										
VICE PRESIDENT	8.00	X		X				0.	0.	0.
DIARCHANGEL, NICK					ŀ					_
VICE PRESIDENT	8.00	X		X		_		0.	0.	0.
ELKINS, KIRT							İ	_		
CHIEF STEWARD - PAST	8.00	X		X				0.	0.	0.
ERRINGTON, COURTNEY			1							,
CHIEF STEWARD	8.00	X	_	X	<u> </u>	-		0.	0.	0.
ESTRADA, MICHELLE	0.00							2 156	0	0.
CHIEF STEWARD - PAST	8.00	X	-	X	-	├-		2,156.	0.	<u></u>
ESTRELLA, BECKY	9 00	-		x				0.	0.	0.
VICE PRESIDENT - PAST	8.00	^	├	^	-	┧—	\vdash	<u> </u>	0.	
FREEMAN, DIANE CHIEF STEWARD	8.00	v		x				0.	0.	0.
GIBBONS, MOLLY	0.00	1	1-	<u> </u>	1	+	<u> </u>			
CHIEF STEWARD	8.00	x		x	l		ł	0.	0.	0.
GUARDINO, DON	3.00	<u> </u>	\vdash	*	 			<u> </u>		
CHIEF STEWARD	8.00	x		x				0.	0.	0.
JACKSON-PULLENS, RHONDA		_ <u></u>		† <u> </u>		\top				
VICE PRESIDENT	8.00	$ \mathbf{x} $		X				0.	0.	0.
										Form 990 (2009)

932007 02-04-10

Part VII Section A Office Bit 1	.АЦ 1107								88-6021	265 Page 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)				2)			(D)	(E)	(F)
Name and title	Average			Pos				Reportable	Reportable	Estimated
	hours per	⊢ <u>`</u>	ieck	(all)	ınat	арр	iy)	compensation from	compensation from related	amount of other
	week	ector						the	organizations	compensation
		P P	8			ated	ĺ	organization	(W-2/1099-MISC)	from the
		ustee	trust		 8	Suadu		(W-2/1099-MISC)	,	organization
	}	la la	tona		g S	ye con	_			and related
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
JOHNSON, YONI	-	-	 				-			
CHIEF STEWARD	8.00	x		х				0.	0.	0.
JONES, TREVOR										
TRUSTEE - PAST	8.00	Х		X				0.	0.	0.
KERNEY, TIM	-									
VICE PRESIDENT - PAST	8.00	X		X				0.	0.	0.
KENDRICK, KENDALL	1			Ì						
CHIEF STEWARD - PAST	8.00	X		X			L_	0.	0.	0.
KISLING, SHARON			Ì						_	_
CHIEF STEWARD	8.00	X	ļ	X	_	-		655.	0.	0.
KRAMER, CAROLE				_						_
CHIEF STEWARD	8.00	X	<u> </u>	X	<u> </u>	ļ —		0.	0.	0.
LANE, EDDIE	0.00					1				
VICE PRESIDENT - PAST	8.00	X	-	X		-	-	0.	0.	0.
LOMBARDO, CHUCK	0.00	1,,	ĺ	3,5		Ì	ĺ	0.	0.	_
CHIEF STEWARD	8.00	IX.		X		├	-	<u> </u>	0.	0.
LOVE, DEBORAH	0.00	3.5		77	ł	1	1	0.	0.	
VICE PRESIDENT	8.00	X	-	X		├	 	<u> </u>	0.	0.
MAJORS, DAVID	0.00	7.		,,				0.		_
CHIEF STEWARD	8.00	X	J	X	<u> </u>	_	Ц	101,286.	0.	0.
1b Total			ا فيدرا	ام است		ا د د ۱۵				<u> </u>
2 Total number of individuals (including but	not limited to th	nose	liste	ea a	DOV	e) wi	io r	eceived more than \$100	o,000 in reportable	

Compensation from the organization

Test No

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

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

Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

S X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ROTHNER, SEGALL AND GREENSTONE, 510 SOUTH MARENGO AVENUE, PASADENA, CA 91101	LEGAL	580,970
PDQ PRINTING, INC., 3820 SOUTH VALLEY VIEW BOULEVARD, LAS VEGAS, NV 89103	PRINTING	160,452

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

2

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

		(2009) SEIU	LOCAL 1	L07			88-6021	265 Page 9
Pa	rt VI	II Statement of Reve	nue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts		Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts	b	Membership dues	1b					
am,		Fundraising events	1c					
g is	d	Related organizations	1d		j			
S.E.	е	Government grants (contribut	tions) 1e		_			
er is	f	All other contributions, gifts, gran	nts, and					
들		sımılar amounts not included abo	ove 1f					
<u> </u>	g	Noncash contributions included in lines	s 1a-1f \$		ĺ			
0 8	h	Total, Add lines 1a-1f						· · · · · · · · · · · · · · · · · · ·
ł				Business Code		}		
8	2 a			623000	5,167,195.	5,167,195.		
Program Service Revenue	b	INT'L UNION SU	BSIDY	900004	565,549.	565,549.		
n S	С	·						
e a	d	l						
5	е							
<u>-</u>		All other program service reve	enue	<u> </u>		ļ -		
\rightarrow	9	Total. Add lines 2a-2f			5,732,744.			
	3	Investment income (including	g dividends, intei	est, and	2 100	}		2 400
		other similar amounts)		>	3,402.	 		3,402.
	4	Income from investment of ta	x-exempt bond	proceeds		 		
	5	Royalties		<u>_</u>		 -		
			(ı) Real	(ii) Personal	-			
	6 a		ļ	 				
)	b	•	 	 	1]		
	С	' '			-			
		Net rental income or (loss)	(1) 0 = 11 = 11	<u>~</u>	 	 		
	7 a	Gross amount from sales of	(i) Securities	(II) Other	-			
	4.	assets other than inventory	<u> </u>	 	+			
l	Ľ	Less cost or other basis						
		and sales expenses	<u></u>	 	-			
		Gain or (loss)	L		1			
		d Net gain or (loss) Gross income from fundraisir	na ovente (not					
Other Revenue	0 4	including \$						
Ş		contributions reported on line			j			j
~ H		Part IV, line 18	e 10, 000					
her	ŀ	Less direct expenses	j		-			
δ		Net income or (loss) from fun		>				ĺ
		Gross income from gaming a						
{	J	Part IV, line 19	.0	a				
	h	Less direct expenses		,				
1		Net income or (loss) from gar	ming activities	>	1			
		a Gross sales of inventory, less						
		and allowances		a [_			
Ì	k	Less [,] cost of goods sold		o				İ
		Net income or (loss) from sale	es of inventory_	•				<u> </u>
1		Miscellaneous Reven		Business Code				
ĺ	11 a	REBATES AND RE		900099	16,092.	16,092.	· · · · · · · · · · · · · · · · · · ·	
Ì		·	_					
1	c							
		d All other revenue						
	•	Total. Add lines 11a-11d		>	16,092.	<u> </u>		
	12	Total revenue. See instructions.	·		5,752,238.	5,748,836.	0.	
93200	39 I-10							Form 990 (2009)

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). Do not include amounts reported on lines 6b, (A) (B) (D) Fundraising Total expenses Program service Management and 7b, 8b, 9b, and 10b of Part VIII. ĕxpenses 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 Grants and other assistance to governments. organizations, and individuals outside the US See Part IV, lines 15 and 16 Benefits paid to or for members 5 Compensation of current officers, directors, 101,286. 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) 1,577,927. 7 Other salaries and wages 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 190,025. 402,606. Other employee benefits 135,309. 10 Payroll taxes Fees for services (non-employees) Management а 386,494. b Legal 25.142. Accounting C d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees f 28,056. g 560. 12 Advertising and promotion 340,649. Office expenses 13 22,575. 14 Information technology Royalties 15 333,357. Occupancy 16 196,976. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 15,467. Conferences, conventions, and meetings 19 Interest 20 1,407,948. 21 Payments to affiliates 17,607. 22 Depreciation, depletion, and amortization 10,821 23 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.) 34,130. TRAINING EXPENSE 8,890. BUSINESS TAX 6,739. CONTRIBUTIONS 3,599. d LOSS ON DISPOSAL OF FIX 1,693 DUES & SUBSCRIPTION All other expenses 5,247,856 Total functional expenses. Add lines 1 through 24f 25 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

88-6021265 Page 11

		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	5,792.	1	5,253.
2	Savings and temporary cash investments	414,330.	2	732,136.
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II			
	of Schedule L	<u> </u>	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		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	24,052.	9	19,899
10a	Land, buildings, and equipment cost or other	Ì		
	basis Complete Part VI of Schedule D 10a 229,			
b	Less accumulated depreciation 10b 187,8	39,459.	10c	41,662.
11	Investments - publicly traded securities		11	
12	Investments - other securities See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	483,633.	16	798,950
17	Accounts payable and accrued expenses	4,744.	17	3,059.
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
21 22	Payables to current and former officers, directors, trustees, key employee	es,		
	highest compensated employees, and disqualified persons Complete Pa	rt II		
' Ì	of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties	218,616.	23	31,236
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	223,360.	26	34,295
	Organizations that follow SFAS 117, check here 🕨 🐰 and comp	ete		
:	lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	260,273.	27	764,655
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
27 28 29 30 31 32	Organizations that do not follow SFAS 117, check here	d		
	complete lines 30 through 34.	1		
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	564 655
33	Total net assets or fund balances	260,273.		764,655
34	Total liabilities and net assets/fund balances	483,633.	34	798,950 a Form 990 (2009

	<u> </u>	<u> </u>		
Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 Cash Cash Other MODIFIED CASH			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	_2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a		ļ	
	consolidated basis, separate basis, or both			
	Separate basis X Consolidated basis Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

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

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.

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-	-EZ, Part VI	, line 46 (Political	Campaign Activ	ities), then
• Contract 501(a)(0)				

- 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
- 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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

Name of org	anization NTF177 To 7	SERVICE EMPLOYEES	TINIT ON	Emp	loyer identification number
Tallie of org	112 111211	OCAL 1107	2 ONTON	Linp	-
Part I-A		ganization is exempt unde	er section 501(c) o	or is a section 527 o	88-6021265
L1		ization's direct and indirect politica			<u> </u>
	l expenditures		a campaign dearning in		0.
3 Volunte	•				0.
_					
Part I-B	Complete if the or	ganization is exempt unde	er section 501(c)(3	i).	
1 Enter th	ne amount of any excise tax	x incurred by the organization und	er section 4955	▶ 9	S
2 Enter th	ne amount of any excise tax	x incurred by organization manage	rs under section 4955	▶ 9	\$
3 If the or	ganization incurred a secti	on 4955 tax, did it file Form 4720 f	or this year?		Yes No
4a Was a d	correction made?				Yes No
	" describe in Part IV.	 			() (0)
Part I-C	Complete if the or	ganization is exempt unde	er section 501(c), o	except section 501	
1 Enter th	ne amount directly expende	ed by the filing organization for sec	tion 527 exempt function	on activities S	S0.
2 Enter th	ne amount of the filing orga	inization's funds contributed to oth	er organizations for sec		
exempt	function activities			▶ 9	<u>74,691.</u>
		es Add lines 1 and 2 Enter here ar	nd on Form 1120-POL,	_	E4 601
line 17t)			▶ \$	
4 Did the	filing organization file Forn	n 1120-POL for this year?			└─ Yes X No
		employer identification number (EII			
		the amount paid from the filing or			
		elivered to a separate political orga			
(PAC)	T additional space is neede	ed, provide information in Part IV		FOR CONTINU	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds If none, enter -0-	contributions received and promptly and directly
				Tanas ii rioric, critor o	delivered to a separate
					political organization
					If none, enter -0
	OMMITTEE ON	WASHINGTON, DC			
POLITI	CAL EDUCATI	20036	20-0859683	0	. 74,691.
		}			
					
			<u> </u>		
		1			
			1	1	

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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

NEVADA SERVICE EMPLOYEES UNION

Schedule C (Form 990 or 990-EZ) 2009		1107	LED ONION	88-	6021265 Page 2
Part II-A Complete if the orga	nization is exer	npt under section	on 501(c)(3) and file	ed Form 5768	0021203 Page 2
(election under secti		•			
A Check ► if the filing organization	on belongs to an affil	ated group			
B Check 🕨 🔲 if the filing organization	on checked box A ar	d "limited control" pr	ovisions apply		
Limits (The term "expendi	on Lobbying Exper tures" means amou		.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	ence public opinion (rass roots lobbying)			
b Total lobbying expenditures to influe					
c Total lobbying expenditures (add line	es 1a and 1b)				
d Other exempt purpose expenditures	3				
 Total exempt purpose expenditures 	(add lines 1c and 1d)			
f Lobbying nontaxable amount Enter	the amount from the	following table in bo	th columns		
If the amount on line 1e, column (a) or	(b) is: The lobi	oying nontaxable an	nount is:		
Not over \$500,000	20% of	the amount on line 1e	·		
Over \$500,000 but not over \$1,000,		0 plus 15% of the ex			
Over \$1,000,000 but not over \$1,50			cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,0			ess over \$1,500,000		
Over \$17,000,000	\$1,000,0	000	<u> </u>		
	0504 61 40				
g Grassroots nontaxable amount (ent			}		
h Subtract line 1g from line 1a If zero i Subtract line 1f from line 1c. If zero	•		Ť		
j If there is an amount other than zero	•	line 1, did the organi	zation file Form 4720		<u> </u>
reporting section 4911 tax for this y		inte 11, did the organi.	zation me Form 4720		Yes No
reporting section 4911 tax for this y		raging Period Unde	r Section 501(h)	<u> </u>	
	tions that made a s	ection 501(h) election	on do not have to comp es 2a through 2f on pa		
	Lobbying Exper	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))			-		
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures			<u> </u>		

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 SEIU LOCAL 1107

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501/b)) (election under section 501(h)).

	(a)	(Ł)
	Yes	No	Amo	unt
During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
intentions, or published or broadcast statements? Its to other organizations for lobbying purposes? It contact with legislators, their staffs, government officials, or a legislative body? It contact with legislators, their staffs, government officials, or a legislative body? It contact with legislators, their staffs, government officials, or a legislative body? It and lines 1c through 11 It the activities in line 1 cause the organization to be not described in section 501(c)(3)? It is es, "enter the amount of any tax incurred under section 4912 It is es," enter the amount of any tax incurred by organization managers under section 4912 It is filling organization incurred a section 4912 tax, did it file Form 4720 for this year? It complete if the organization is exempt under section 501(c)(4), section 501(c)(6). It is esubstantially all (90% or more) dues received nondeductible by members? It the organization make only in-house lobbying expenditures of \$2,000 or less? It the organization agree to carryover lobbying and political expenditures from the prior year? B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I "Yes." It is, assessments and similar amounts from members It is, assessments and similar amounts from members It is, assessments and similar amounts from members It is, assessments and similar amounts from members It is, assessments and similar amounts from members It is, assessments and similar amounts on line 2c exceeds the amount on line 3, what portion of the excess for which the section 527(f) tax was paid). It is a section for the excess of nondeductible section 162(e) dues section served the amount on line 2c exceeds the amount on line 3, what portion of the excess is the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures (see instructions) I supplemental Information I have been a legislative body and political expendi				
i Other activities? If "Yes," describe in Part IV				
j Total Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912		ì		_
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?				
	ion 501(c)	(5), or se	ction	
50 I (C)(6).			Yes	No
				- ''
Ware authorizative all (000), as more) duca recovered pendaductible by members?				l
,		1		
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	tion 501(c) art III-A, lii	2 3 (5), or se	ction nswered	
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 "Yes."	tion 501(c) art III-A, li	2 3 (5), or se ne 3 is a	ction nswered	
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 P. "Yes." Dues, assessments and similar amounts from members	art III-A, lii	2 3 (5), or se	ction nswered	
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 P "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	art III-A, lii	2 3 (5), or se ne 3 is a	ction nswered	
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 P. "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, lii	(5), or se ne 3 is an	ction nswered	
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 Pi"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poli expenses for which the section 527(f) tax was paid). a Current year	art III-A, lii	2 3 (5), or se ne 3 is an	ction nswered	
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 P. "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). a Current year b Carryover from last year	art III-A, lii	2 3 (5), or se ne 3 is an 1 2a 2b	ction	
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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

Name of the organization

NEVADA SERVICE EMPLOYEES UNION

SETH LOCAL 1107

Employer identification number

Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
-	organization answered "Yes" to Form 990, Part IV, line		of Acodemics Complete it the
-	5	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		(-)
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	lead funds
•	are the organization's property, subject to the organization's	_	Yes No
6	Did the organization inform all grantees, donors, and donor a	•	
•	for charitable purposes and not for the benefit of the donor of		•
	impermissible private benefit?	or deficit advisor, or for any enter purpos	Yes No
Pai		ganization answered "Yes" to Form 990.	
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or p		istorically important land area
	Protection of natural habitat	· —	rtified historic structure
	Preservation of open space	Trescrivation of a ce	ruled historic structure
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	n of a conseniation easement on the last
_	day of the tax year	ned conservation contribution in the form	TO A CONSERVATION GASCINEIR ON THE IAST
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic str	aucture included in (a)	2c
d	Number of conservation easements included in (c) acquired	• •	2d
3	Number of conservation easements modified, transferred, re		
3	year	leased, extinguished, or terminated by a	to organization adming the tan
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe		f
3	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		
0	and section 170(h)(4)(B)(ii)?	ve satisfy the requirements of section 17	Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expens	
9	include, if applicable, the text of the footnote to the organiza		
	conservation easements		5 5ga
Pa	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
12	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		
	the footnote to its financial statements that describes these		, , , , , , , , , , , , , , , , , , , ,
b	If the organization elected, as permitted under SFAS 116, to		ance sheet works of art, historical treasures.
b	or other similar assets held for public exhibition, education, of		
	these items:	of rescaron in landing and of public conve	g control and real and a second and a second as a seco
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		▶ \$ ▶ \$
_	If the organization received or held works of art, historical tre	pactures, or other similar assets for finance	
2	the following amounts required to be reported under SFAS 1		indi gairi, provide
_		To relating to these terms	> \$
a	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		* *

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932051 02-01-10

Schedule D (Form 990) 2009

NEVADA SERVICE EMPLOYEES UNION

	dule D (Form 990) 2009 SEIU LOC									Page 2
Par	t III Organizations Maintaining Co	llections of A	rt, Hist	orical Tr	easures, o	r Othe	er Simila	ır Asse	ts (contin	nued)
3	Using the organization's acquisition, accession	n, and other record	is, check	any of the	following that	t are a s	ignificant ι	se of its	collection	ıtems
	(check all that apply)									
а	Public exhibition	c	ı 🗀 r	oan or excl	hange progra	ms				
b	Scholarly research	e		Other	5. 5					
С	Preservation for future generations	_								
4	Provide a description of the organization's coll	ections and explai	n how th	ev further th	ne organizatio	nn's exe	mnt nurno	se in Par	· XIV	
5	During the year, did the organization solicit or i							50 III GI	. ///	
_	to be sold to raise funds rather than to be main), O., I., I., G	45500		Yes	□ No
Par	t IV Escrow and Custodial Arrang	ements. Comple	ete if ora	anization ar	swered "Yes	" to For	m 990 Pai	rt IV line		
	reported an amount on Form 990, Part	X, line 21	oto ii org	amzanon a			111 550, 1 &	110, 1110	J, U.	
1a	Is the organization an agent, trustee, custodial	<u> </u>	tiary for o	contribution	s or other as	sets not	included			
	on Form 990, Part X?		alary lor c		o or orner as.	sets not	included		Yes	□ No
h	If "Yes," explain the arrangement in Part XIV a	nd complete the fe	Movena t	abla					7 162	NO
	ii ros, explain the arrangement in realt XIV al	nd complete the it	mownig t	abic						
_	Beginning balance						4-		Amount	
							1c			
a	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance		040				1f		7,,	
	Did the organization include an amount on For	m 990, Part X, line	217					<u> </u>	Yes	∟ No
Pai	If "Yes," explain the arrangement in Part XIV. † V Endowment Funds. Complete if t	<u> </u>		\/	000 Dad	137 1 1				
Fai	——————————————————————————————————————							b l		
_		(a) Current year	(b) Pi	rior year	(c) Two year	s dack	(d) Three y	ars back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses								 	
d	Grants or scholarships								 	
е	Other expenditures for facilities								Ì	
	and programs			.						
f	Administrative expenses								ļ	
g	End of year balance				L				l	
2	Provide the estimated percentage of the year	end balance held a	as							
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Term endowment >%)								
За	Are there endowment funds not in the posses	sion of the organiz	ation tha	it are held a	nd administe	red for t	he organiz	ation	_	
	by								· · · · · · ·	Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	listed as required o	on Sched	iule R?					3b	
4	Describe in Part XIV the intended uses of the									
Pa	rt VI Investments - Land, Buildings	s, and Equipm	ent. Se	e Form 990	, Part X, line	10				
	Description of investment	(a) Cost or o	other	(b) Cost	or other	(c) A	ccumulate	d	(d) Book	value
		basis (investi	ment)	basis	(other)	de	preciation			
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	_			22	9,530.		187,8	58.	41	1,662.
e	- · ·									
	Add lines 1a through 1a (Column (d) must en	ual Form 990 Pari	t X colun	nn (B) line i	10(c))				41	662.

Schedule D (Form 990) 2009

NEVADA SERVICE EMPLOYEES UNION SEIU LOCAL 1107

Schedule D (Form 990) 2009 SEIU LOCAL Part VII Investments - Other Securities. S	AP Form 900 Part V line 10		88-6021265 Page 3
(a) Description of security or category	ee Form 990, Part X, line 12.	(c) Method	of valuation
(including name of security)	(b) Book value	Cost or end-of-ye	
Financial derivatives	 		
Closely-held equity interests			
Other			
			
	+		
	 		
	 		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)			
Part VIII Investments - Program Related.	See Form 990, Part X, line 13		
(a) Description of investment type	(b) Book value	(c) Method	
	(2)	Cost or end-of-ye	ear market value
			_
			· · · · · · · · · · · · · · · · · · ·
			
			
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)	<u> </u>		
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
(8) Description		(B) BOOK Value
Total. (Column (b) must equal Form 990, Part X, col (B) III	ne 15.)		>
Part X Other Liabilities. See Form 990, Part >			
1 (a) Description of liability		b) Amount	
			
Federal income taxes			
Total. (Column (b) must equal Form 990, Part X, col (B) list	ne 25)		
2. FIN 48 Footnote In Part XIV, provide the text of the fo		nancial statements that reports	the organization's liability for
			g,
uncertain tax positions under FIN 48		<u> </u>	

NEVADA SERVICE EMPLOYEES UNION

_	dule D (Form 990) 2009 SEIU LOCAL 1107			88-6	021265	Page 4
Pa		Audited	d Financial State	ement	s	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1			
2	Total expenses (Form 990, Part IX, column (A), line 25)		2			
3	Excess or (deficit) for the year Subtract line 2 from line 1		3			
4	Net unrealized gains (losses) on investments		4			
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments		7			
8	Other (Describe in Part XIV)		8			
9	Total adjustments (net) Add lines 4 through 8		9			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	19				
	t XII Reconciliation of Revenue per Audited Financial Statemen	nts Witi	h Revenue per F	Return	·· -· -· ··	
1	Total revenue, gains, and other support per audited financial statements			1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1				
a	Net unrealized gains on investments	2a		-		
b	Donated services and use of facilities	2b		-		
С.	Recoveries of prior year grants	2c		-		
d	Other (Describe in Part XIV)	_2d		1 _		
е	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1			3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1		1 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-		
b	Other (Describe in Part XIV)	4b		┥╻. │		
c	Add lines 4a and 4b Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			4c		
Par	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents Wi	th Expenses per		rn	
1	Total expenses and losses per audited financial statements		<u>-</u>	11		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25					
_ a	Donated services and use of facilities	2a		1		
b	Prior year adjustments	2b		7		
	Other losses	2c		7		
4	Other (Describe in Part XIV.)	2d		1		
e	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1			3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				_	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV)	4b				
	Add lines 4a and 4b			4c		
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5		
	rt XIV Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III					4, Part
X, lın	e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also comp	lete this p	part to provide any ac	ditional	ınformatıon	
		·				
						

SCHEDULE J-2

Department of the Treasury

Internal Revenue Service

(Form 990)

Continuation Sheet for Form 990

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

► See the Instructions for Form 990.

2009 Open to Public

Name of the Organization

NEVADA SERVICE EMPLOYEES UNION SEIU LOCAL 1107

Inspection
Employer Identification number
88-6021265

Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (A) (B) Average hours per week (C) Position (check all that apply) In applying a significant proportion of the compensation from related organization (W-2/1099-MISC) MANCINI, CHERIE VICE PRESIDENT MANTHEI, DAVE CHIEF STEWARD - PAST MARDESICH, MELISSA VICE PRESIDENT - PAST 8.00 X X X (B) (C) Position (check all that apply) Reportable compensation from the compensation from related organization (W-2/1099-MISC) Week Average hours per week Position (check all that apply) Applying a significant proportion (W-2/1099-MISC) Reportable compensation from related organization (W-2/1099-MISC) W-2/1099-MISC) MANCINI, CHERIE VICE PRESIDENT 8.00 X X 0. 0. 0.	ed of tion e on
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PRESIDENT 40.00 X X 4,900. 0.	0.
MEECE, WES	
CHIEF STEWARD - PAST 8.00 X X 0. 0.	0.
MOORE, PATRICIA	
SECRETARY 8.00 X X 0. 0.	0.
MORRIS, EDNA	
CHIEF STEWARD 8.00 X X 434. 0.	0.
NOEL, SAM	
VICE PRESIDENT 8.00 X X 0. 0.	0.
OCAMPO, ALEX	
VICE PRESIDENT 8.00 X X 0. 0.	0.
OSBORNE, ASHLEY	
VICE PRESIDENT 8.00 X X 0. 0.	0.
OWENS, CINDY	
CHIEF STEWARD - PAST 8.00 X X 0. 0.	0.
PETERS, DAVE	
TRUSTEE - PAST 8.00 X X 0. 0.	0.
PIENA, BUTCH	
CHIEF STEWARD 8.00 X X 0. 0.	0.
PIERCE, JEFF	
CHIEF STEWARD 8.00 X X 0. 0.	0.
PRESTON, TRACEY	
EXECUTIVE VICE PRESIDENT 8.00 X X 0. 0.	0.
REYES, MADALYN	•
CHIEF STEWARD 8.00 X X 0. 0.	0.
RIVERA, MARIE VICE PRESIDENT 8.00 X X 0.	0.
ROBERTS, NOREEN	0.
CHIEF STEWARD 8.00 X X 0. 0.	
RODELA, MILES	0.
VICE PRESIDENT 8.00 X X 0. 0.	U.
SANDOVAL-LUNA, AIDA CHIEF STEWARD - PAST 8.00 X X 0. 0.	<u> </u>
	0.

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

Schedule J-2 (Form 990) 2009

SCHEDULE J-2

Department of the Treasury Internal Revenue Service

(Form 990)

Continuation Sheet for Form 990

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

► See the Instructions for Form 990.

2009
Open to Public Inspection

Name of the Organization

NEVADA SERVICE EMPLOYEES UNION SEIU LOCAL 1107

Employer Identification number 88-6021265

Part I Continuation of Officers, D		ust	ees	s, K	еу	Em	ple	oyees, and Highes	t Compensated	Employees
(A)	(B)			(((D)	(E)	(F)
Name and title	Average]		Pos				Reportable	Reportable	Estimated
	hours per	(CI	neck	all t	nat	арр	iy)	compensation from	compensation from related	amount of other
	week					ye.		the	organizations	compensation
		rector	i			emplo		organization	(W-2/1099-MISC)	from the
		60.0	활			sated		(W-2/1099-MISC)		organization
		truste	al trus		yee	mp eu				and related organizations
		ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			,
GARRELTS CLORES	 	르	<u>=</u>	₽	Key	呈	귤			
SARDELIS, GLORIA CHIEF STEWARD	8.00	.		x				0.	0.	0.
SERRANO, ALFREDO	8.00	₽	 -	Λ		├	}	- 0.	<u>U.</u>	
VICE PRESIDENT	8.00	x		х			İ	5,117.	0.	0.
SHOTT, PAUL	- 0.00		_			\vdash		3,117.		<u> </u>
CHIEF STEWARD	8.00	x		x				0.	0.	0,•
SMITH, VENITA			_				_			
VICE PRESIDENT	8.00	Х		x				0.	0.	0.
SMITH, MARY										
CHIEF STEWARD - PAST	8.00	X		X		L.		0.	_0.	0.
STEVENS, GWEN		1		1	ĺ	1				
TRUSTEE	8.00	X	<u> </u>	X		_		0.	0.	0.
STEWART, GARY		l						054		
CHIEF STEWARD	8.00	X	├	X	-	 	-	254.	0.	0.
STRASSER, JERRI	1 0 00									
CHIEF STEWARD	8.00	X	├	X	_	┢	 —	0.	0.	0.
TILLMAN, ROSHANDA	0 00	v		x			l	0.	0.	0.
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TRUSTEE	8.00	x		x				0.	0.	0.
VOLZ, TIM	0.00		1					<u> </u>		
CHIEF STEWARD	8.00	x		x				0.	0.	0.
WITBECK, RAY	3,00	1	Г			1				
TREASURER	8.00	X		x	İ	ļ		252.	0.	0.
HAMEL, SHAUNA				Γ						
PRESIDENT - PAST	0.00	X		X		<u>L.</u>		0.	0.	0.
MARSH, APRIL			ĺ		İ		1			_
VICE PRESIDENT - PAST	0.00	X	<u> </u>	X	L_	<u> </u>		0.	0.	0.
JOHNSON, MARILYN						ĺ				
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TALLEY, STUART		ŀ					1	12 201		
VICE PRESIDENT - PAST	8.00	├	}_	X		 -	-	13,391.	0.	0.
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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 O

(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

NEVADA SERVICE EMPLOYEES UNION SEIU LOCAL 1107

Employer identification number 88-6021265

FORM 990, PART VI, SECTION A, LINE 6: THE CLASSES OF MEMBERS INCLUDE A

PRESIDENT, AN EXECUTIVE VICE PRESIDENT, A SECRETARY, A TREASURER, AND THREE

TRUSTEES. IN ADDITION, MEMBERS ALSO INCLUDE A VICE PRESIDENT FROM EACH

BARGAINING UNIT, AT LEAST ONE CHIEF STEWARD FROM EACH CHAPTER AND THE

GENERAL MEMBERSHIP OF THE LOCAL.

FORM 990, PART VI, SECTION A, LINE 7A: THE GENERAL MEMBERSHIP OF THE LOCAL

HAVE THE RIGHT TO ELECT MEMBERS OF THE LOCAL'S GOVERNING BOARD AS THEIR

TERMS EXPIRE.

FORM 990, PART VI, SECTION B, LINE 11: THE ORGANIZATION PROVIDED ALL

MEMBERS OF THE GOVERNING BODY WITH A COPY OF THE FORM 990 VIA MAIL. THE

FORM 990 WAS REVIEWED BY THE EXECUTIVE DIRECTOR, THE PRESIDENT, AND THE

FINANCE COMMITTEE PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION REGULARLY AND

CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH THE CONFLICT OF INTEREST

POLICY DURING THEIR BOARD MEETINGS. ALL DECISIONS AND TRANSACTIONS MUST BE

APPROVED BY THE EXECUTIVE BOARD. IF A CONFLICT OF INTEREST IS NOTED,

APPROVAL IS DENIED. ALL OFFICERS AND EMPLOYEES OF THE LOCAL ARE EXPECTED

TO FOLLOW THE CONFLICT OF INTEREST POLICY.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS

AVAILABLE TO THE PUBLIC UPON REQUEST.

Schedule O (Form 990) 2009

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

932211
02-03-10

SCHEDULE O

(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

Department of the Treasury
Internal Revenue Service

Name of the organization

NEVADA SERVICE EMPLOYEES UNION SEIU LOCAL 1107

Employer identification number 88-6021265

00 0021203
FORM 990, PART XI, FINANCIAL STATEMENTS AND REPORTING, LINE 1: THE
MODIFIED CASH BASIS OF ACCOUNTING WAS USED.
FORM 990, PART XI, LINE 2C: THE LOCAL'S FINANCE COMMITTEE ASSUMES
RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT, THE FINANCIAL STATEMENTS AND
THE SELECTION OF AN INDEPENDENT ACCOUNTANT. THE LOCAL'S OVERSIGHT
PROCESS DURING THE TAX YEAR HAS NOT CHANGED.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2009 Open to Public

OMB No 1545-0047

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ▶ See separate instructions. ► Attach to Form 990. NEVADA SERVICE EMPLOYEES UNION

Employer identification number Inspection Direct controlling 88-6021265 entity Identification of Related Tax-Exempt Organizations (Complete of 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 Total income ਉ Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) Legal domicile (state or foreign country) Primary activity 9 SEIU LOCAL 1107 Name, address, and EIN of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service Part II Parti

EMPLOYEES UNION SEIU Direct controlling entity NEVADA SERVICE LOCAL 1107 status (if section Public charity 501(c)(3)) Exempt Code section 527 Legal domicile (state or foreign country) NEVADA POLITICAL ACTION COMMITTEE. Primary activity NEVADA SERVICE EMPLOYEES INTERNATIONAL UNION LOCAL 1107 ISSUES COMMITTEE - 2, 3785 EAST 89120 Name, address, and EIN of related organization SUNSET ROAD, LAS VEGAS, NV

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

932161 02-04-10

Schedule R (Form 990) 2009

NEVADA SERVICE EMPLOYEES UNION

SEIU LOCAL 1107

Schedule R (Form 990) 2009

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.)

Page 2

88-6021265

5	General or managing partner? Yes No				related	(h) Percentage ownership			90) 2009
9	Code V.UBI amount in box 20 of Schedule K-1 (Form 1065)	:			ad one or more	(g) Share of Perend-of-year ov assets			Schedule R (Form 990) 2009
3	(n) Disproportionate allocations?				because it h	f total			Sche
[(g) Share of end-of-year assets				rt IV, line 34	Share of total income			
	Share of total S Income en				o Form 990, Pa	(d) Type of entity (C corp, S corp, or trust)			
		:			ered "Yes" t	(d) Direct controlling entity			
	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)				ation answe) Direct c			
-					f the organiz	(c) Legal domicile (state or foreign country)			25
	(d) Direct controlling entity				Trust (Complete II	(b) Primary activity			2
	(c) Legal domicile (state or foreign country)				poration or x year.)	<u> </u>			
	(b) Primary activity				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 frust during the tax year.)	<u>Z</u> c			
	(a) Name, address, and EIN of related organization				Part IV Identification of Related Org	(a) Name, address, and EIN of related organization			932162 02-04-10

88-6021265 Page 3.

NEVADA SERVICE EMPLOYEES UNION SEIU LOCAL 1107

Schedule R (Form 990) 2009 SEIU LOCAL 110

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line 34,
Part IV
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Note Complete line 1 if any entity is listed in Parts II III or IV of this schedule	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ž
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	-	
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		×
b Gift, grant, or capital contribution to other organization(s)	1p	×
c Gift, grant, or capital contribution from other organization(s)	10	×
d Loans or loan guarantees to or for other organization(s)	10	×
e Loans or loan guarantees by other organization(s)	-1 -	×
f Sale of assets to other organization(s)	14	×
g Purchase of assets from other organization(s)	19	×
h Exchange of assets	#	×
i Lease of facilities, equipment, or other assets to other organization(s)	Ţ	×
: constitution of the state o	÷	>
 Leave Of Jacumes, equipment, of other assets from our of other programment of the programment of services or membership or fundrations for other organization(s) 		×
		×
_	-t	×
n Sharing of paid employees	4	×
o Reimbursement paid to other organization for expenses	+	×
p Reimbursement paid by other organization for expenses	qt	×
q Other transfer of cash or property to other organization(s)	19	×
r Other transfer of cash or property from other organization(s)	1-1-1	×
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	saction thresholds	
(a) Name of other organization(s)	(b) (c) Transaction Amount involved type (a·r)	
	(in) od(;	
(2)		
(3)		1
(4)		}
(5)		Ì
181	Schedule B (Form 990) 204	8
52163 02-04-10	Schedule R (Form 990) 2009	3

NEVADA SERVICE EMPLOYEES UNION

Page 4 ' •

88-6021265

SEIU LOCAL 1107 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.

(a)	(4)	(0)	9	(e)	Θ	(b)	ε
ND bac sompto seeds	Vivitae veemad	alicite	Are all partners	Share of end-of-		Code V-UBI	
narre, address, and Ein of entity	יייים ל מכוניוני	_	section 501(c)(3) organizations?	year assets	tionate allocations?	amount in box 20 of Schedule K-1	managing partner?
		country)	Yes No			(Form 1065)	- 1
							_
	1						
	1						
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	1						
				1			-
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	Γ						
				:			
						Schedule R (Form 990) 2009	າ 990) 2009

2009 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

990

Current Year Deduction		17,386.	221.	17,607.	17,607.								
Current Sec 179				0	0								
Accumulated Depreciation		160,072.	10,189.	170,261.	170,261.	 	-						
Basis For Depreciation		218,845.	10,685.	229,530.	229,530.								
Reduction In Basis				0	0								
Bus % Excl									_				
Unadjusted Cost Or Basis		218,845.	10,685.	229,530.	229,530.							_	
No o		16	16					·					
Life		000.	000°								_		
Method		SL		-									
Date Acquired		VARIESSL	VARIESSL					 					
Description	MACHINERY & EQUIPMENT	4FURNITURE	,	* 990 PAGE 10 TOTAL MACHINERY & EQUIPM	* GRAND TOTAL 990 PAGE 10 DEPR	 							
Asset		-	<u>u)</u>					 					

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Form **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

The a separate application for each return			
If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of the Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously	s form)		<u> </u>
Part 1 Automatic 3-Month Extension of Time. Only submit original (no copies needed)	Tiled For		
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and co Part I only	mplete	•	-
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request a o file income tax returns	an extens	sion of time	
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extensionated below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronot automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or cyou must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic www.irs.gov/efile.and.click.on.e-file.for.Chanties & Nonprofits	nically if onsolida	(1) you want the a ited Form 990-T li	idditional
Type or Name of Exempt Organization	Empl	oyer identificatio	n number
orint NEVADA SERVICE EMPLOYEES UNION		0 6021265	
SEIU LOCAL 1107 File by the date for Number, street, and room or suite no. If a P.O. box, see instructions	8	8-6021 <u>265</u>	
tue date for Number, street, and from or suite no if a P O box, see instructions and a positive street, and from or suite no if a P O box, see instructions and a positive street, and from or suite no if a P O box, see instructions and a positive street, and from or suite no if a P O box, see instructions and a positive street, and from or suite no if a P O box, see instructions and a positive street, and from or suite no if a P O box, see instructions and a positive street, and from or suite no if a P O box, see instructions are suite no if a P O box, see instructions and a positive street, and from or suite no if a P O box, see instructions are suite no if a P O box, see i			
City, town or post office, state, and ZIP code For a foreign address, see instructions LAS VEGAS, NV 89120			
Check type of return to be filed (file a separate application for each return)			
X Form 990 Form 990-T (corporation) Form 990-T (sec 401(a) or 408(a) trust) Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 990-F Form 990-T (trust other than above) Form 990-F Form 1041-A Form 990-F	5227 6069		
B. HARRIS The books are in the care of 33785 EAST SUNSET RD LAS VEGAS, NV	8912	0	
Telephone No. ► (702)386-8849 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 it is for part of the group, check this box and attach a list with the names and EINs of a			
1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time u AUGUST 15, 2010 , to file the exempt organization return for the organization named is for the organization's return for ► X calendar year 2009 or ► tax year beginning , and ending		The extension	
2 If this tax year is for less than 12 months, check reason Initial return Final return		Change in accour	nting 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	3a	\$	
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	26	•	
tax payments made Include any prior year overpayment allowed as a credit Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	3b	<u> </u>	
deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).			
See instructions	Зс	\$	N/A
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and For	m 8879-	EO for payment in	structions
LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.			(Rev. 4-2009)