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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

► The organization may have to use a copy of this return to satisfy state reporting requirements

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

OMB No 1545-0047

Open to Public Inspection

-	For t	he 2009 calen	dar year,	or tax year beginn	ing		, 2009,	and endir	ng					
В	Check	ıf applıcable] _n .	C				<u></u>		D Employ	er Identif	ication Nun	ber	_
	Па	ddress change	Please use IRS label				.on			91-	02682	:35		
	\prod_{N}	ame change	or print or type.	of North Am						E Telepho	ne numbe	er		
	Н	itial return	See specific	1330 N. Cal						509	-328-	6660		
	\vdash	ermination	Instruc- tions.	Spokane, WA	99201-	2316								
	\vdash	mended return	1 101131							G Gross receipts \$ 614,333.				
	\vdash		F Name :	and address of principal	officer				H(a) Is this	a group retur			7	X No
	□^	pplication pending	1	As C Above	omcei					affiliates inc			Yes Yes	ĤN₀
-						1047(-)) (1) [7.507		attach a list		ructions)] .63	□,
<u> </u>		exempt state		(c) (3)~ (insert no)	4947(a))(1) or [527	}			010		
<u>1</u>		bsite: ► N/		. 🗖 - 🛅		1				exemption n		012		
K		n of organization	X Corpora	ation Trust	Association	Other >	LY	ear of Forma	tion 190	6 M	State of le	gal domicile	WA	
Ra	Г .	Summ	ary											
	1			ganization's missio	on or most s	ignificant activ	/ities: _Op	<u>eratio</u>	n of L	aborer	s_Un:	L <u>on</u>		
9		<u>Organiz</u> a	ation_											
Б														
Activities & Governance	,	Charles has be		if the organization										
ĝ	2			bers of the govern				osea or m	ore man z	23% OF ILS	assets			13
જ	4			nt voting members				1b)			4			$-\frac{13}{13}$
ţ	5			yees (Part V, line		9 200, (, 0	vi,io	,			5		_	4
.₹	6			teers (estimate if r							6			0
¥	7a	Total gross u	ınrelated t	ousiness revenue f	rom Part VI	II, column (C),	, line 12				7a			0.
	b	Net unrelated	d business	s taxable income f	rom Form 99	90-T, line 34					7 b			0.
									F	rior Year		Curr	ent Ye	ar
•	8	Contributions	s and gran	its (Part VIII, line	1h)									
Revenue	9	Program ser	vice reven	ue (Part VIII, line	2g)					712,1			579,	097.
eve	10	Investment II	ncome (Pa	art VIII, column (A), lines 3, 4,	and 7d).				32,1	.12.		33,	620.
Œ	11			III, column (A), lın							506.			616.
	12	Total revenu	e — add l <u>ı</u>	nes 8 through 11 (must equal	Part VIII, colu	mn (A), lır	ne 12)		745,8	397.		614,	333.
	13	Grants and s	ımılar am	ounts paid (Part I)	(, column (A	(), lines 1-3)								
	14	Benefits paid	d to or for	members (Part IX	, column (A)), line 4)								
•	15	Salaries, oth	er comper	nsation, employee	benefits (Pa	art IX, column	(A), lines	5-10)		333,4	109.		<u>3</u> 53,	544.
13e	16a	Professional	fundraisir	ng fees (Part IX, co	olumn (A), lı	ne 11e)				-		<u>-</u> -		
Expenses	ļ			nses (Part IX, colu	•						******		12.3	
Щ	l		•	IX, column (A), lin					27 27 4 4 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4	321,5			314,	
		Total expens	ses (Faiti	nes 13-17 (must e	cs Harriu,		EIVE)		654,				
	18	Total expens	es Auu II	a Cubbantina 10	quai Fait in	, coldinate A	THE ROT F	72					<u>667,</u>	
	19	Revenue les	s expense	s Subtract line 18				101		90,9			<u>-53,</u>	
16 Q						№ МОМ	1 201	11 1 1		nning of Y			of Yea	
Net Assets Fund Balanc	20	Total assets			["			RS	<u> </u>	1,206,1		<u> </u>	<u> 184,</u>	
ž Ę	21	Total liabilitie	•		1	000	ENI I	IT !		35,0				992.
	22	Net assets o	r fund bal	ances. Subtract lin	e 21 from li	ne 2 0 Gリ	EN, U			l,171,1	[63.]	1,	<u>148,</u>	<u>493.</u>
ΙŖa	ittill		ure Bloc											
		Under penaltu	es of perjury, and complete	I declare that I have exa Declaration of preparer	mined this retur	n, including accom	panying sche	edules and sta	atements, and	d to the best knowledge	of my kna	wledge and	belief, it	: IS
		R	1	1 - 1.	11	•			ĺ		. 10			
Siç		- Mic	Mard	(1) seci	rel					10-21	7-70			
He	re	Signature	of officer	, < 1	,				Da	ate				
		1/10	hard	L. Jelde	2/	Bus.m	anage	'S						
		Type or p	orint name an	a title										
_							D	Date		heck if elf		parer's ider e instruction	itifying ni is)	umber
Pa		Preparer's		// ·)	ı	١,	ر ماراء		mployed *	النت			
Pre	e- rer's	signature		1000 M	2 red	<u> </u>		10/23	10		N	<u>'A</u>		
Us		Firm's name (n, CPA									
On		yours if self employed),	► <u>PO</u>	Box 6466					E		I/A			
		address, and ZIP + 4			217-6466				P	hone no	(509		<u>-0762</u>	2
				with the preparer :								X Yes	`	No
BA	A Fo	r Privacy Act	and Pape	rwork Reduction A	Act Notice, s	ee the separa	te instruct	tions.		TEEA0113	L 12/29/0	oo For	m 990	(2009)

_	1 990 (2009) Laborers International Union	91-026823	<u> </u>	Pa	age 2
Par	Statement of Program Service Accomplishments				
1	Briefly describe the organization's mission				
•	On white of Inhance Union Operation				
	Operation of Laborers Union Organization				
	·				-
	Did the organization undertake any significant program services during the year which were not listed on the	e prior			
_	Form 990 or 990-EZ?	- F	Yes	X	Ma
			res [△	No
	If 'Yes,' describe these new services on Schedule O		-	_	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	es?	Yes [X	No
	If 'Yes,' describe these changes on Schedule O		_		
4		v eynenses Sec	tion 501	1/c)/3	85
7	Describe the exempt purpose achievements for each of the organization's three largest program services be and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and a	illocations to oth	ers, the	total	,
	expenses, and revenue, if any, for each program service reported				
		·			
4 a	a (Code:) (Expenses \$ including grants of \$) (Re)
	Labor Organization - To provide collective bargaining and job place	ement servi	ces	to	
	its members, and to strive for improvement of conditions for worker	rs Total			
	membership was 820 members, including retirees, during 2009.				
	membership was ozu members, including recitees, during zous.				
			. _		
			-		-
		2			
4t	(Code ⁻) (Expenses \$ including grants of \$) (Re	evenue \$)
			-		
		-	. – – –		
				_	
40	c (Code:) (Expenses \$ including grants of \$) (Re	evenue \$)
					-
			-		
			. 		
		 			
40	Other program services (Describe in Schedule O)				
	(Expenses \$ including grants of \$) (Revenue \$)		
46	Total program service expenses ▶				

Q.	16 14 Office Kirst of Required Octionalies			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
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		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? '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	
•	 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 tot assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII 	al		3
	 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported Part X, line 16? If 'Yes,' complete Schedule D, Part IX 	2 . 1 . 30		
	● Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	T ng	steet P	
	 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 		٠,	
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	Х	
12/	A Was the organization included in consolidated, independent audited financial statement for the tax Yes N		,	
13	year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ı	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? <i>If 'Yes,' complete Schedule F, Part I</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		х
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		Х
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		Х
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		х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		x
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X

Checklist of Required Schedules (continued) Yes No 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 Х 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 Х 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 23 Х 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, and 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 c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 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 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 25Ь Schedule L. Part I 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 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III 28 Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV X 28a **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedúle L, Part IV 28b Х c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M. 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M30 X Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 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 Х 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 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 34 Х line 1 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 Х 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 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 37 Х Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? 38 Note. All Form 990 filers are required to complete Schedule O

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Form 990 (2009)

38

			Yes	No
1	a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of US Information Returns Enter -0- if not applicable 0			
	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1 c	-	
2	a 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 2 a 4		,	
2	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
	b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule O</i>	3ь		
4	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
1	b If 'Yes,' enter the name of the foreign country ►			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_5a		Х
1	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
•	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5с		
6	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Х
ı	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6ь	-	
7	Organizations that may receive deductible contributions under section 170(c).			
i	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
1	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
	d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d	,		
•	e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
	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-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			-
-	a Did the organization make any taxable distributions under section 4966?	9a		
	b Did the organization make any distribution to a donor, donor advisor, or related person?	9ь		
10	Section 501(c)(7) organizations. Enter	,		
ä	a Initiation fees and capital contributions included on Part VIII, line 12			٧.
ı	b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter		İ	
ä	a Gross income from other members or shareholders		ļ	
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	*,		
12 <i>a</i>	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	o If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	* */		

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Form 990 (2009)

Section A. Governing Body and Management

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.

					Yes	No			
1 a	Enter the number of voting members of the governing body	1 a	13						
ŀ	Enter the number of voting members that are independent	1b	13]					
2	Did any officer, director, trustee, or key employee have a family relationship or a business re officer, director, trustee or key employee?	elation	ship with any other	2					
3	Did the organization delegate control over management duties customarily performed by or	under	the direct supervision		-				
4	of officers, directors or trustees, or key employees to a management company or other pers Did the organization make any significant changes to its organizational documents	on?	•	3		$\frac{X}{X}$			
•	since the prior Form 990 was filed?								
5 6	Did the organization become aware during the year of a material diversion of the organization boes the organization have members or stockholders? See Schedule O	n's as	sets?	5 6	Х	<u>X</u>			
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? See Schedule Q b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? See Sch Q									
ı		•		7b	Х				
8	Did the organization contemporaneously document the meetings held or written actions under the following:	ertaker	n during the year by	,/ b		ل ﴿ مِنْ			
ä	The governing body?			8a	Х				
ŀ	Each committee with authority to act on behalf of the governing body?			8b	Х				
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who ca organization's mailing address? If 'Yes,' provide the names and addresses in Schedule Q	annot b	e reached at the	9		Х			
	tion B. Policies (This Section B requests information about policies not								
Reve	enue Code)	•	•						
					Yes	No			
10 <i>a</i>	Does the organization have local chapters, branches, or affiliates?			10a		X			
t	of Yes, does the organization have written policies and procedures governing the activities and branches to ensure their operations are consistent with those of the organization?	of such	chapters, affiliates,	10Ь					
11	Has the organization provided a copy of this Form 990 to all members of its governing body	before	filing the form?	11		X			
11/	ADescribe in Schedule O the process, if any, used by the organization to review this Form 99	0 S	ee Schedule O	100	*				
122	Does the organization have a written conflict of interest policy? If 'No,' go to line 13			12a		X			
ŧ	Are officers, directors or trustees, and key employees required to disclose annually interests to conflicts?	that c	ould give rise	12b					
•	Does the organization regularly and consistently monitor and enforce compliance with the posterior of the constant of the post of the constant	olicy?	lf 'Yes,' describe in	12c					
	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 persons, comparability data, and contemporaneous substantiation of the deliberation and de	appro	val by independent		*.***	¥.			
á	The organization's CEO, Executive Director, or top management official			15a	******	Χ			
t	Other officers of key employees of the organization			15b		X			
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)			5	Ŕ.				
16	Did the organization invest in, contribute assets to, or participate in a joint venture or similal entity during the year?	r arran	gement with a taxable	16a		X			
t	of 'Yes,' has the organization adopted a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	n to ev	aluate its participation						
	status with respect to such arrangements?			16b					
	tion C. Disclosures		_						
17									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a inspection indicate how you make these available. Check all that apply.	and 990	D-T (501(c)(3)s only) a	vaılab	le for	public			
	Own website X Another's website X Upon request								
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents available to the public See Schedule O	ments,	conflict of interest pol	licy, a	nd fina	ancial			
20	State the name, physical address, and telephone number of the person who possesses the Rick Seidel 1330 N. Calispel, Spokane, WA 99201 509-32		_	anızat	ion.				
				. – – .					

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

- 1 a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organizations'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 employees'

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

(A)	(B)				 c)	-		(D)	(E)	(F)
Name and Title	Average hours	Posi	ition (-	k all 1	that app	• •	Reportable	Reportable	Estimated
	per week	individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Thomas Murray	}									
Exec. Board	1	X						0.	0.	0.
Dave Castle										
Recording Secr	1	X		Х	L		L_	0.	0.	0.
Jeff Kerr	ĺ									
Exec. Board	1	X			L		<u></u>	0.	0.	0.
Steve Harris										
Vice President	1	X		X				0.	0.	0.
David Hawkins							ĺ			
Delegate	40	X			X		L	59,774.	0.	0.
Mark Roders								ļ		
Delegate	1	X			X			59,774.	0.	0.
Ralph Fishburn										
President	5	X		Χ				0.	0.	0.
Jackie Lautenschlager							ŀ			
Board auditor	1	X						0.	0.	0.
Patrick Hall	_									
Board auditor	1	X						0.	0.	0.
Scott Holstrom	_					·			ł	
Sgt at Arms	1	X		X				0.	0.	0.
Richard Seidel									_	
Business Mgr	40	Х			X			69,810.	0.	0.
Jack Rupp	_									_
Exec. Board	1	X						0.	0.	0.
Sharon Scanlon										_
Board Auditor	1	X						0.	0.	0.
						(10/00				F 000 (0000)

Part VII Section A. Officers, Directors, Trus (A)	(B)	\ey			c)	e s,	and	(D)	(E)	(F)
Name and Title	Average			-	-	that a	pply)		Reportable	1 ' '
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	compensation from related organization (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
					L					
								·		
								- ,,,,		
								1		
1 b Total							•	189,358.	C	
2 Total number of individuals (including but not limited from the organization ► 0	d to the	se li	sted	l abo	ove)	who	o red	ceived more than	\$100,000 in repo	ortable compensation
 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such if 4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater the individual 	<i>ndıvıdua</i> portable han \$15	ol e cor 0,00	npe 10?	nsat <i>If 'Y</i>	ion es'	and com	othe plete	er compensation e Schedule J for s	from such	Yes No 3 X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sch Section B. Indonesidant Contractors	ompens hedule J	ation <i>for</i>	n fro suc	m a h pe	ny ersoi	unre 7	late	d organization for	services	5 X
Complete this table for your five highest compensate compensation from the organization	ed ınde	pend	lent	con	trac	tors	tha	t received more the	nan \$100,000 of	
(A) Name and business address	s		-					(B) Description of	of Services	(C) Compensation
							_			
2 Total number of independent contractors (including	but not	lımıt	ted t	to th	ose	liste	ed a	bove) who receive	ed more than	
\$100,000 in compensation from the organization										,

Pa	irt.VI	III Statement of R	evenue				-	
4	25000				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
IFTS, GRANTS AR AMOUNTS	1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d							
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contribus included in Ins 1a-1f					la de		
δ¥	h	Total. Add lines 1a-1f	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	- "	Total: / da lines ta 11		Business Code	1256Ka. 5.10560a	7 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4		CONTRACTOR AND
PROGRAM SERVICE REVENUE	2a b c	Membership Dues &	-	Business Code	579,097.	579,097.		
AM SER	d e							
Ä	f	All other program service	ce revenue					
2	g	Total. Add lines 2a-2f		-	579,097.	And Sec. of State		100 C
	4	Investment income (incother similar amounts) Income from investmen Royalties	_	•	33,620.			33,620.
	_	· · · · · · · · · · · · · · · · · · ·	(ı) Real	(II) Personal	1.00 C. 2.00 C.	10 mm 1 m		5.2345986 37 586
	63	Gross Rents	(7)	(1) (1)		7.5 \		
								
		Less rental expenses						
		Rental income or (loss)		1	7-			
	d	Net rental income or (lo	ss)	· ·				
		Gross amount from sales of	(i) Securities	(II) Other		4		
		assets other than inventory			2 - 2 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -		- T	
	_	Less cost or other basis and sales expenses				Date in State of Stat	u _{n fan} g	
		Gain or (loss)						
	d	Net gain or (loss)		>	1 h	1 2 271,000	Funt 200000 00 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
OTHER REVENUE		Gross income from function (not including \$ of contributions reported					and a superior	
2	;	See Part IV, line 18		a				
皇		Less direct expenses		b				
5		Net income or (loss) fro	m fundraising	events ►			y + der. 17 3620	
		Gross income from gam See Part IV, line 19	•	a				
	b I	Less direct expenses		b	200	i de la companya de l	1	Control #
	c I	Net income or (loss) fro	m gaming acti	/ities ►				
	10a Gross sales of inventory, less returns and allowances							492 449
	b Less cost of goods sold b		b		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 2	di di	
į	c l	Net income or (loss) fro	m sales of inve	entory >				
	Miscellaneous Revenue Business Code		Business Code					
	11 a _	11a Miscellaneous Income			1,616.	1,616.		
	b							
	c							
	d /	All other revenue						
		Total. Add lines 11a-11d	!	>	1.616	Part Control of the C		
		Total revenue. See instr		▶	614,333.	580,713.	0.	33,620.
					011,000.			

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	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
6b,	7b, 8b, 9b, and 10b of Part VIII.		expenses	general expenses	_expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21			:	
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	189,358.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	47,087.			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	68,391.			
9	Other employee benefits	31,470.		-	
10	Payroll taxes	17,238.			
	Fees for services (non-employees)	1,7250.		 	
	Management			 	
	D Legal			-	
	: Accounting	5,044.			
	Lobbying	3,044.		 	
	Prof fundraising svcs See Part IV, In 17				
	Investment management fees			 	
	1 Other	1,130.			_
•	·	1,130.			 _
_	Advertising and promotion Office expenses	8,505.		 	
13	Information technology	0,303.			
14 15	Royalties				
16	Occupancy	15,412.		 	
17	Travel	8,499.		 	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0,455.			
19	Conferences, conventions, and meetings	1,770.			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	14,615.			
23	-	8,544.			
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)				
	Per Capita expenses	208,810.			
1	Officer allowances & agent exp	11,900.			
(Local union membership exp.	8,514.			
•	Dues and subscriptions	5,598.			
•	Delegate expenses	4,693.			
1	All other expenses.	11,166.			
25	Total functional expenses Add lines 1 through 24f	667,744.			
26	Joint costs. Check here SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA				· · · .	Form 990 (2009

BAA

Form 990 (2009)

Balance Sheet Part X (B) End of year (A) Beginning of year 169,215 1 130,216. Cash - non-interest-bearing 2 110,270. 151,581. 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 47,633 4 14,833. 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) 6 and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 8 Inventories for sale or use 8,991 9 4,325 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis 10a 227,391. Complete Part VI of Schedule D 10b 107,543. 134,463. 10 c 119,848. **b** Less accumulated depreciation. 229,364. 669,022. 11 11 Investments — publicly-traded securities 12 12 Investments - other securities See Part IV, line 11 13 13 Investments - program-related. See Part IV, line 11 14 14 Intangible assets 506,254. 15 94,660. 15 Other assets See Part IV, line 11 1,206,190. 1,184,485. Total assets Add lines 1 through 15 (must equal line 34) 16 16 Accounts payable and accrued expenses 35,027. 17 35,992. 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities. Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II 22 of Schedule L Secured mortgages and notes payable to unrelated third parties. 23 23 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities Complete Part X of Schedule D 35,027. 26 35,992 Total liabilities. Add lines 17 through 25 X and complete lines Organizations that follow SFAS 117, check here 27 through 29 and lines 33 and 34. 1,171,163. 1,148,493. 27 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets é Organizations that do not follow SFAS 117, check here and complete FUND lines 30 through 34. 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, and equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 1,171,163. 33 1,148,493. 33 Total net assets or fund balances 1,206,190. 34 1,184,485. 34 Total liabilities and net assets/fund balances.

TEEA0111L 01/30/10

Form 990 (2009) Laborers' International Union	91-0268235		Pa	ge 12
Part XI Financial Statements and Reporting				
			Yes	No
1 Accounting method used to prepare the Form 990: Cash X Accrual Other				
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	Х	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversi review, or compilation of its financial statements and selection of an independent accountant?		2c		X
If the organization changed either its oversight process or selection process during the tax year, explain Schedule O				
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year we consolidated basis, separate basis, or both	ere issued on a			
X Separate basis Consolidated basis Both consolidated and separate basis				
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth Audit Act and OMB Circular A-133?		За		Х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3ь		

ВАА

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

OMB No 1545-0047

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

t the o	rganization answered 'Y	es, to Form 990,	Part IV, line 3,	, or Form 990-EZ, Pa	art VI, line 46 (Politica	l Campaign Activities), then

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

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

- 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

• 5	Section 501(c)(4), (5), or_(6) o	rganizations: Complete Part III			
Name	of organization		·	Employer identifica	ation number
	oorers'_Internation			91-026823	
Pai	rt I-A Complete if the or	rganization is exempt under section	on 501(c) or is a s	section 527 organiz	zation.
1	Provide a description of the	organization's direct and indirect political o	ampaign activities in	Part IV	- ·
2	Political expenditures			▶\$	
3_	Volunteer hours				
Pai	rt I-B Complete if the or	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	▶\$	
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	▶\$	-
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year?		Yes No
48	Was a correction made?				Yes No
ŀ	f 'Yes,' describe in Part IV				
Pai	rt I-C Complete if the or	rganization is exempt under section	on 501(c), excep	t section 501(c)(3).	
		pended by the filing organization for section			
2	Enter the amount of the filing function activities	g organization's funds contributed to other	organizations for sec	tion 527 exempt	
3	Total of exempt function exp	enditures Add lines 1 and 2 Enter here a	nd on Form 1120-PO	^{L,} ▶\$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes X No
5	made For each organization contributions received that w	and employer identification number (EIN) listed, enter the amount paid from the filingere promptly and directly delivered to a se the (PAC). If additional space is needed, pre-	ng organization's fund parate political organ	ds Also enter the amou	nt of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
			<u> </u>		

Schedule C (Form 990 or 990-EZ) 20	09 Laborers']	International Unio	on	91-026	8235 Page 2
	the organizatio	n is exempt under se			
A Check ► If the fill	ing organization bel	ongs to an affiliated group			
_		cked box A and 'limited co	ntrol' provisions apply	,	
(The term	Limits on Lobbyi 'expenditures' mea	ng Expenditures – ans amounts paid or incurr	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendit	tures to influence pi	ıblıc opınıon (grass roots lo	bbying)		
b Total lobbying expendit	tures to influence a	legislative body (direct lobb	oying)		
c Total lobbying expendit	tures (add lines 1a a	and 1b)			
d Other exempt purpose	-				
e Total exempt purpose	expenditures (add li	nes 1c and 1d)			
f Lobbying nontaxable ai both columns	mount Enter the an	nount from the following tab	ole in		
If the amount on line 1e, co	lumn (a) or (b) is.	The lobbying nontaxable a	mount is.		· ·
Not over \$500,000		20% of the amount on line 1e		1, .	* **
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the excess	over \$500,000	*, *	, S.
Over \$1,000,000 but not over	\$1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000		
Over \$1,500,000 but not over	\$17,000,000	\$225,000 plus 5% of the excess of	over \$1,500,000		
Over \$17,000,000		\$1,000,000			· · · ; # } · ·
g Grassroots nontaxable	amount (enter 25%	of line 1f)			
h Subtract line 1g from li	ne 1a If zero or les	s, enter -0-			
i Subtract line 1f from lin	ne 1c If zero or less	s, enter -0-			
j If there is an amount of section 4911 tax for this	ther than zero on ei s year?	ther line 1h or line 1i, did tl	ne organization file Fo	orm 4720 reporting	Yes No
(Som	ne organizations tha	4-Year Averaging Period U it made a section 501(h) ele is below. See the instruction	Inder Section 501(h) ection do not have to	complete all of the five	
		ying Expenditures During			
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable 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))		See			
f Grassroots lobbying expenditures					
				C-L-J.J. 0 /F	n 990 or 990-F7\ 2009

Schedule C (Form 990 or 990-EZ) 2009 Laborers' International Union 91-0268235

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)).

	(a)	(b)
	Yes	No	Amount
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?	-	-	
f Grants to other organizations for lobbying purposes?	ļ		
	-	<u> </u>	
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 1i			
- · · · · · · · · · · · · · · · · · · ·		- 	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	ļ		
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?	4 > 45>		
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or s	ection 501(c)(6).
			Vac Na
1 Were substantially all (90% or more) dues received nondeductible by members?			Yes No
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			
			2 X
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	/->/F>		3 X
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line	(C)(D)	, or s	rection 501(c)(b)
m = 0 m m m, quodiono r and 2 are anomored to Ott in rate in A, inte	J 13 a	11344	icu ics.
1 Dues, assessments and similar amounts from members		1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
a Current year		2a	
b Carryover from last year		2b	-
c Total		2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.		3	
		3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poli expenditure next year?	ss itical	4	0.
5 Taxable amount of lobbying and political expenditures (see instructions)		5	0.
Part IV Supplemental Information			
Complete this part to provide the descriptions required for Part I-A line 1. Part I-B line 4. Part I-C line 5. a	nd Parl	I II-B	line 1i
Also, complete this part for any additional information	,,a , a,,	· · · · · · · · · · · · · · · · · · ·	

Schedule C (Form 990 or 990-EZ) 2009 Laborers' International Union	91-0268235 P	age 4
Schedule C (Form 990 or 990-EZ) 2009 Laborers' International Union Rart IV: Supplemental Information (continued)		<u> </u>
_#		
	~~	
		-
		· – – –

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions Open to Public Inspection

OMB No 1545-0047

Inspection
Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization

Laborers' International Union

Employer localinous on maniber

of	North America LU #238		91-0268235
Pai	TI Organizations Maintaining Donor	Advised Funds or Other Similar Fun	ds or Accounts Complete if
	the organization answered 'Yes' to	o Form 990, Part IV, line 6.	
		(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 dor	nor advisors in writing that the assets held in de	onor advised
_	funds are the organization's property, subject	to the organization's exclusive legal control?	∐Yes ∐ No
6	purpose conferring impermissible private bene	the benefit of the donor or donor advisor or for	any other Yes No
	t II Conservation Easements Comple		to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by		
	Preservation of land for public use (e g , r	ecreation or pleasure) Preservation of	of an historically important land area
	Protection of natural habitat	Preservation of	of certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization last day of the tax year	on held a qualified conservation contribution in	the form of a conservation easement on the
			Held at the End of the Year
á	Total number of conservation easements		2a
ŀ	Total acreage restricted by conservation easer	nents	2b
•	Number of conservation easements on a certification	fied historic structure included in (a)	2c
	Number of conservation easements included in	n (c) acquired after 8/17/06	2d
3	Number of conservation easements modified,	transferred, released, extinguished, or termina	ted by the organization during the tax
	year ►		
4	Number of states where property subject to co	nservation easement is located >	_
5	Does the organization have a written policy reand enforcement of the conservation easemer	garding the periodic monitoring, inspection, ha	ndling of violations, Yes No
6	Staff and volunteer hours devoted to monitoring the year ▶		
7	Amount of expenses incurred in monitoring, in during the year ▶	specting, and enforcing conservation easemer	nts \$
۰	Does each conservation easement reported or	line 2(d) above satisfy the requirements of co	
8	170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	Time Z(d) above satisfy the requirements of Se	Yes No
9	conservation easements	o the organization's financial statements that o	describes the organization's accounting for
Pai	Organizations Maintaining Colle Complete if the organization answers	ctions of Art, Historical Treasures, or wered 'Yes' to Form 990, Part IV, line	r Other Similar Assets 8.
1 a	If the organization elected, as permitted under treasures, or other similar assets held for pub- the text of the footnote to its financial stateme	ic exhibition, education, or research in furthera	nent and balance sheet works of art, historical ance of public service, provide, in Part XIV,
ŀ	o If the organization elected, as permitted under treasures, or other similar assets held for publi amounts relating to these items	SFAS 116, to report in its revenue statement iic exhibition, education, or research in furthera	and balance sheet works of art, historical ance of public service, provide the following
	(i) Revenues included in Form 990, Part VIII,	line 1	- \$
	(ii) Assets included in Form 990, Part X		- \$
2	If the organization received or held works of a amounts required to be reported under SFAS	rt, historical treasures, or other similar assets t 116 relating to these items.	for financial gain, provide the following
2	Revenues included in Form 990, Part VIII, line		► \$
	Assets included in Form 990, Part X		▶ \$

Schedule D (Form 990) 2009 Labo	rars' Inta	rnational Uni	O.D.	01_02	C022E		D 6
Part III Organizations Mainta				91-02 or Other Similar As		continu	Page 2
Using the organization's acquisit items (check all that apply):	·						
a Public exhibition		d 🗀 Loan	or exchange programs				
b Scholarly research		e Othe					
c Preservation for future gener	rations		'				
Provide a description of the organization		ctions and explain ho	ow they further the orga	nization's exempt purp	ose in		
5 During the year, did the organiza assets to be sold to raise funds	ation solicit or re	eceive donations of a	ort, historical treasures,	or other similar	□ v	Г	¬
					Yes	- 1	No_
Part IV Escrow and Custodia 9, or reported an amo	ount on Form	990, Part X, line	e 21.	ered Yes to Form !	990, Pa	art IV,	line
1a Is the organization an agent, true included on Form 990, Part X?	stee, custodian,	or other intermedian	y for contributions or ot	her assets not	Yes		No
b If 'Yes,' explain the arrangement						, L	NO
an res, explain the arrangement	citi at Air air	a complete the follow	virig table.		Amour		
c Beginning balance				1c	Amour	Ц	
d Additions during the year				1 d			
e Distributions during the year				1e			
f Ending balance				1f			
2a Did the organization include an a	amount on Form	000 Part V June 21	2	[11]		г	¬
b If 'Yes,' explain the arrangement		1 990, Fait A, line 21	•		Yes	, [No
Part V Endowment Funds Co		anization answei	rad 'Vas' ta Farm 0	00 Port IV June 10			
art V Lindowillent Funds Co							
1 a Paginning of year balance	(a) Current ye	ar (b) Prior ye	ar (c) Two years bad	* *	 ``	Four year	rs back
1 a Beginning of year balance				***		; ;	<u> </u>
b Contributions				**************************************	, ; 	<u>` 🧗 -</u>	
c Net Investment earnings, gains, and losses							
d Grants or scholarships.			- Take			2.220.	. 33.
 Other expenditures for facilities and programs 							
f Administrative expenses					42.8%	/34/	
g End of year balance				414	1 3		Ş
2 Provide the estimated percentag	e of the year en	d balance held as:					
a Board designated or quasi-endov	wment >	と					
b Permanent endowment	ક						
c Term endowment ►	98						
3a Are there endowment funds not organization by	in the possession	on of the organization	n that are held and adm	inistered for the		Yes	No
(i) unrelated organizations					3a(i)	163	110
(ii) related organizations					3a(ii)	-	
b If 'Yes' to 3a(II), are the related of	organizations lie	tad as required on S	chedule P2				
4 Describe in Part XIV the intended					_3b	L	L
Part VI Investments—Land, B				line 10		<u></u>	
Description of investment) Cost or other basis			/\	Post 17	
	(4	(investment)	basis (other)	(c) Accumulated Depreciation	(0)	Book V	aiue
1a Land	<u> </u>		144 600	F0 041			
b Buildings	<u> </u>		144,680.	58,041.		<u>86</u>	<u>,639.</u>
c Leasehold improvements	<u> </u>		50.001				
d Equipment	L		50,884.	20,419.		<u>30</u>	<u>,</u> 465.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

119,848.

BAA

Schedule D (Form 990) 2009

e Other

31,827.

29,083.

2,744.

Schedule D (Form 990) 2009 Laborers' Interna	tional Union		91-0268235	Page 3
Part VII Investments—Other Securities See Fo	orm 990, Part X, lin	e 12. N/A		
(a) Description of security or category (including name of security)	(b) Book value	(c) ! Cost or e	Method of valuation and-of-year market value	····
Financial derivatives				
Closely-held equity interests			<u> </u>	
Other				

			<u>-</u>	
		-		
			· · · · · · · · · · · · · · · · · · ·	
		-		
		-	·	
		· · · · · · · · · · · · · · · · · · ·	·	
				
Table (Column (h) must soud Form 200 Part V and (P) to a 100		·		*
Total. (Column (b) must equal Form 990 Part X, col (B) line 12)	7	100	v.v	** **
Part VIII Investments—Program Related (See I			· · · · · · · · · · · · · · · · · · ·	
(a) Description of investment type	(b) Book value	(c) N	Method of valuation	
		Cost or e	nd-of-year market value	
				
		·····	<u> </u>	
				
				<u> </u>
		-		
				
Total (Column (b) must equal Form 990, Part X, Col (B) line 13)		V. 1884 1884 1884		
Part IX Other Assets (See Form 990, Part X,	line 15)			
	scription		(b) Book	value
Certificates of Deposit				4,660.
	-			
	· · · · · · · · · · · · · · · · · · ·			
<u> </u>				

				• • •
Total. (Column (b) must equal Form 990, Part X, col.(B), li	no. 15)			14 660
Part X Other Liabilities (See Form 990, Part)			<u> </u>	4,660.
- · · · · · · · · · · · · · · · · · · ·				
(a) Description of Liability	(b) Amount		ê	
Federal Income Taxes		_		
		_		
		_		
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				}
		_		
		_		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ►				
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. FIN 48 Footnote In Part XIV, provide the text of the footn	note to the organization	s financial statements	that reports the organization	le habile.

		91-0268235	Page 4
Ŗa	Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII,column (A), line 12)		614,333.
2	Total expenses (Form 990, Part IX, column (A), line 25)		667,744.
3	Excess or (deficit) for the year Subtract line 2 from line 1		-53,411.
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities	-	
6	Investment expenses		
7	Prior period adjustments		20 741
8	Other (Describe in Part XIV) See Part XIV		30,741.
9	Total adjustments (net) Add lines 4 through 8		30,741.
	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9 Reconciliation of Revenue per Audited Financial Statements With Revenue per	Peturn	-22,670.
	Total revenue, gains, and other support per audited financial statements	1 1	614,333.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1	014,555.
	Net unrealized gains on investments		
	Donated services and use of facilities 2b		
_	Recoveries of prior year grants.		
	I Other (Describe in Part XIV)		
	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	614,333.
_	Amounts included on Form 990, Part VIII, line 12, but not on line 1	3 3	014,555.
	Investments expenses not included on Form 990, Part VIII, line 7b		
	O Other (Describe in Part XIV)		
	: Add lines 4a and 4b	4c	
	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	614,333.
	tiXIIII Reconciliation of Expenses per Audited Financial Statements With Expenses per		014,555.
	Total expenses and losses per audited financial statements	1	667,744.
	Amounts included on line 1 but not on Form 990, Part IX, line 25	\$4.4	
	Ponated services and use of facilities 2a		
	Prior year adjustments 2b		
	Other losses 2c		
	Other (Describe in Part XIV)		
	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	667,744.
_	Amounts included on Form 990, Part IX, line 25, but not on line 1:	7.34	
	Investments expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV)		
	Add lines 4a and 4b	4c	
	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	5	667,744.
	tXIV Supplemental Information		
Com line	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this mation	IV, lines 1b and part to provide a	2b, Part V, iny additional
			.
<u>-</u> -			

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Schedule **D** (Form 990) 2009

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Scriedule D (Form 990) 2009 Laborers Internacional Union	91-0200233	Page 5
Rank XIV Supplemental Information (continued)		
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#### SCHEDULE O (Form 990)

# **Supplemental Information to Form 990**

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

Open to Public Inspection

of North America LU #238	91-0268235
Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder	
The organization is a labor organization, formed for the benefi	t of it's membership.
Members are those who work in the trade and pay their dues for	representation.
Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Bod	Y
The membership elects the officers and board members every thre	e years at the
regularly held elections.	
Form 990, Part VI, Line 7b - Decisions of Governing Body Approval by Members or	Shareholders
The board of directors brings actions to the membership for app	roval at the regular
meeting. Minutes document the actions taken at meetings.	
Form 990, Part VI, Line 11 - Form 990 Review Process	
Form 990 draft is provided to management and key officers for r	eview and approval
before it is filed, but not to all members.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
Upon request, governing documents and annual tax returns are av	ailable for review by
the public. The tax return is also available to the public via	www.Guidestar.org.
Form 990, Part XI, Line 2 - Change of Oversight or Selection Process	
Financial statement draft is reviewed and approved by managemen	t for issuance.
Journal entries are approved by the competent, designated indiv	idual.
	<del>-</del>
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	·

Schedule O (Form		Page 2
Name of the organization	Laborers' International Union	Employer identification number
	of North America LU #238	91-0268235
<b>_</b>		
<del>-</del>		
		<b> </b>
		<del></del>

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

2009

OMB No 1545-0047

Open to Public Inspection

(F)
Direct controlling entity (F)
Direct controlling
entity Part II Identification of Related Tax-Exempt Organizations (Complete If the organization answered 'Yes' to Form 990, Part IV, line 34 because it had Employer Identification number 91-0268235 (E)
Public charity status (if section 501(c)(3)) (E) End-of-year assets Part I Identification of Disregarded Entities (Complete of the organization answered 'Yes' to Form 990, Part IV, line 33.) **(b)** Exempt Code section Complete if the organization answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 Attach to Form 990. P See separate instructions. (**D)** Total income (C)
Legal domicile (state or foreign country) (C) Legal domicile (state or foreign country) (B) Primary activity (B) Primary activity one or more related tax-exempt organizations during the tax year.) Laborers' International Union of North America LU #238 (A) (A) Name, address, and EIN of related organization (A) Name, address, and EIN of disregarded entity Name of the organization

Schedule R (Form 990) (2009)

TEEA5001L 02/05/10

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

N/A

Page 2

Schedule R (Form 990) 2009 Laborers' International Union of North America LU #238

[Partill | Identification of Related Organizations Taxable as a Partnership (Complete of 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.)

	(J) General or managing partner?	2							
	Gene mans parti	Yes							
	Code V-UBI amount in box 20 of Schedule	K-1 (Form 1065)							
	(H) Disproportionate allocations?	Yes No							
al .)	Share of total income Share of end-of-year assets								
security in the one of more related organizations treated as a partitle still the lax year.)									
ed as a partificion	Predominant income (related, unrelated, excluded	sections 512-514)							
חוובמנוסווט נוכם	(C) (D) Legal Direct domicile controlling entity frequent								
ומוכח חלו		country)							
	(B) Primary Activity								
35	( <b>A</b> ) Name, address, and EIN of related organization			                 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	                 		

<b>Parative</b> Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answer Interested as a corporation or trust during the tax year.)	<b>axable as a Cor</b> d organizations	rporation or Tr	rust (Complete	if the organizations the	a Corporation or Trust (Complete of the organization answered 'Yes' to Form 990, Part IV intons treated as a corporation or trust during the tax year.)	es' to Form 990, Pa	ן.  > 'צ
(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	Type of entity (C corp, S corp, or trust)	Legal domicile Direct Type of entity (State or foreign controlling entity (C corp, S corp, country)  (C)  (C)  (C)  (C)  (C)  (C)  (C)  (	( <b>G)</b> Share of end-of-year assets	(H) Percentage ownership
Laborers Int'l Union -Segregated Account 1330 N. Calispel St.	Segregated		Laborers				
Spokane, WA 99201	political fund	WA	Internationa 1 Union 238	Corp	500.	847.	100.00

Schedule R (Form 990) (2009)

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Page 3

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Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			Yes	å
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:			1	•
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		×
<b>b</b> Gift, grant, or capital contribution to other organization(s)		1 p		×
c Gift, grant, or capital contribution from other organization(s)		10		×
d Loans or loan guarantees to or for other organization(s)		7		×
e Loans or loan quarantees by other organization(s)		7 4		i×
				:
f Sale of assets to other organization(s)		1		×
g Purchase of assets from other organization(s)		10		×
h Exchange of assets		두		×
i lease of facilities equinoment or other assets to other organization(s)		-		>
		_		<
j Lease of facilities, equipment, or other assets from other organization(s)		1j		×
k Performance of services or membership or fundraising solicitations for other organization(s)		1 1		×
l Performance of services or membership or fundraising solicitations by other organization(s)		1		X
<b>m</b> Sharing of facilities, equipment, mailing lists, or other assets		E	×	
n Sharing of paid employees		-	×	
o Reimhirsement haid to other organization for expenses		-		>
Comparison some year to concern or government of the concern of th		2		4
<b>p</b> Reimbursement paid by other organization for expenses		1 1		×
a Other transfer of cash or property to other organization(s)		-		>
The transfer of each or property from other organization(c)				
	100000000000000000000000000000000000000	- 1	<	
Le in the diswer to diff of the decorates hes, see the historicals for information of who must complete this line, including covered relationships and transaction (meshods	and transaction thresho	Spic		
(A) Name of other organization	(B) Transaction type (a-r)	(C) Amount involved	nvolve	g
(1) Laborers Int'l Union -Segregated Account	ī		יט	500.
(2)				
(3)				
(4)				
(5)				
(9)				
BAA TEEASON3 0206310	Schedule	Schedule <b>R</b> (Form 990) (2009)	061	600

Schedule R (Form 990) 2009 Laborers' International Union of North America LU #238

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 asset or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships

(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	Are all partners section 501(c)(3) organizations?	(E) Share of end-of-year assets	(F) Disproportionate allocations?	(G) Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(H) General or managing partner?
			Yes No		Yes No	,	Yes No
BAA		TEEA5004L 02/05/10				Schedule <b>R</b> (Form 990) (2009)	n 990) (2009

2009

# Schedule D, Part XIV - Supplemental Information

Page 6

Laborers' International Union of North America LU #238

91-0268235

Schedule D, Part XI, Line 8 Other Changes In Net Assets Or Fund Balances

Unrealized gain in investments

Total \$ 30,741.

Form <b>8868</b>	(Rev 4-2009)	Page 2
• If you a	re filing for an Additional (Not Automatic) 3-Month Extension, complete on	
Note. Only	complete Part II if you have already been granted an automatic 3-month ex	tension on a previously filed Form 8868.
	re filing for an Automatic 3-Month Extension, complete only Part I (on page	
Partie	Additional (Not Automatic) 3-Month Extension of Time. Only	file the original (no copies needed).
	Name of Exempt Organization	Employer identification number
Type or	Laborers' International Union	
print	of North America LU #238	91-0268235
	Number, street, and room or suite number. If a P O. box, see instructions.	For IRS use only
File by the extended	Lori A. Pierson, CPA	
due date for filing the	PO Box 6466	
return, See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	於中華自身經過機構的發展的過程可能
	Spokane, WA 99217-6466	
Check type	of return to be filed (File a separate application for each return):	
Form 9	90 Form 990-PF	Form 1041-A Form 6069
Form 9	90-BL Form 990-T (section 401(a) or 408(a) trust)	Form 4720 Form 8870
X Form 9	90-EZ Form 990-T (trust other than above)	Form 5227
STOP! Do	not complete Part II if you were not already granted an automatic 3-month	extension on a previously filed Form 8868.
The box	ks are in care of. ► Rick Seidel	
	one No. ► 509-328-6660 FAX No. ►	
<ul><li>If the o</li></ul>	rganization does not have an office or place of business in the United State:	s, check this box
• If this is	${f s}$ for a Group Return, enter the organization's four digit Group Exemption Nu	ımber (GEN)
whole grou	p, check this box $ ightharpoonup$ . If it is for part of the group, check this box $\cdot$ . $ ightharpoonup$	and attach a list with the names and EINs of all
	ne extension is for.	
4 I requ	est an additional 3-month extension of time until 11/15 , 20	10.
5 For c	alendar year 2009, or other tax year beginning, 20	) , and ending , 20 .
6 If this	tax year is for less than 12 months, check reason: Initial return	Final return   Change in accounting period
7 State	in detail why you need the extension . The Taxpayer is in t	he process of an independant year
end	audit. Additional time is respectfully request	ed in order to complete the audit
whi	ch will compile the data needed to file a compl	ete and accurate return.
8a If this	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tenfundable credits. See instructions.	tative tax, less any
paym	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable ents made. Include any prior year overpayment allowed as a credit and any form 8868	amount paid previously
c Balar with f	ce Due. Subtract line 8b from line 8a. Include your payment with this form, TD coupon or, if required, by using EFTPS (Electronic Federal Tax Paymen	or, if required, deposit t System). See instrs 8c\$
	Signature and Verification	on
Under penaltie correct, and co	s of perjury, I declare that I have examined this form, including accompanying schedules and stateme implete, and that I am authorized to prepare this form.	nts, and to the best of my knowledge and belief, it is true,
Signature	Title CPA	Date ► \$\10\10
BAA	FIFZ0502L 03/11/09	Form <b>8868</b> (Rev 4-2009)