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Department of the Treasury

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CHARLES A MOSIER Secretary-Treasurer

Edward L Hulse

Fairfield, NJ 07004

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Firm's name 🕨 Hulse & Associates PC

Firm's address 🕨 350 Passaic Avenue

preparer's name

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)

2010

OMB No 1545-0047

Open to Public

The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2010 calendar year, or tax year beginning 01-01-2010 and ending 12-31-2010 D Employer identification number B Check if applicable LABORERS NEW JERSEY HEAVY AND GENERAL CONSTRUCTION LABORERS DISTRICT COUNCIL 22-3759813 Address change Doing Business As Name change E Telephone number ☐ Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite (973) 589-5050 700 RAYMOND BOULEVARD Terminated G Gross receipts \$ 275,599 City or town, state or country, and ZIP + 4 NEWARK, NJ 07105 Amended return Application pending Name and address of principal officer **H(a)** Is this a group return for affiliates? Yes No ANTONIO S OLIVEIRA 700 RAYMOND BOULEVARD **H(b)** Are all affiliates included? NEWARK, NJ 071052909 If "No," attach a list (see instructions) H(c) Group exemption number ► 0121 501(c)(3) **✓** 501(c) (5) **◄** (insert no) Tax-exempt status ☐ 4947(a)(1) or ☐ 527 L Year of formation 2001 M State of legal domicile NJ Summary Briefly describe the organization's mission or most significant activities TO UNIFY ALL OF THE ECONOMIC AND OTHER FORCES OF THE AFFILIATED LOCAL UNIONS IN ITS AREA, AS A CENTRAL REPRESENTATIVE BODY OF SUCH TO TAKE SUCH PROPER AND LAWFUL ECONOMIC ACTION TO Activities & Governance ACCOMPLISH AND EFFECTUATE THE WELFARE OF ITS AFFILIATED LOCAL UNIONS AND MEMBERS 2 Check this box 📂 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . 0 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . 5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) . 5 6 Total number of volunteers (estimate if necessary) 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 0 Program service revenue (Part VIII, line 2g) . 302,500 275,000 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 849 590 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 4 9 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 303,353 275,599 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-Expenses 41.091 44.000 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . 0 b Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . 200,922 192,296 18 242,013 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 236,296 19 Revenue less expenses Subtract line 18 from line 12 . 61,340 39,303 (Assets or | nd Balances | **Beginning of Current End of Year** Year 20 177,533 Total assets (Part X, line 16) . . 138,230 21 Total liabilities (Part X, line 26) 0 22 Net assets or fund balances Subtract line 21 from line 20 177,533 138,230 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. 2011-05-05 Signature of officer Date

┌Yes ┌No May the IRS discuss this return with the preparer shown above? (see instructions) \dots

Edward L Hulse

Check if self

Cat No 11282Y

employed 🕨

Firm's EIN

Phone no 🕨 (973) 882-

Form 990 (2010)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

Briefly describe the organization's mission

THE DISTRICT COUNCIL IS AFFILIATED WITH THE LABORERS' INTERNATIONAL UNION OF NORTH AMERICA AND CHARTERED BY IT ITS MEMBERSHIP CONSISTS OF 11 DELEGATES FROM THE AFFILIATED LOCAL UNIONS 472 AND 172 THE DISTRICT COUNCIL IS AN INTERMEDIATE BODY CHARGED WITH THE RESPONSIBILITY TO UNIFY ALL OF THE ECONOMIC AND OTHER FORCES OF THE AFFILIATED LOCAL UNIONS IN ITS AREA, AS A CENTRAL REPRESENTATIVE BODY OF SUCH LOCAL UNIONS, IN ORDER TO EFFECTUATE THE FOLLOWING OBJECTS (A) TO FULFILL THE OBJECTS OF THE INT'L UNION AS SPECIFIED IN ARTICLE II, SECTION I OF THE INT'L UNION CONSTITUTION (B) TO PROMOTE UNITY OF ACTION IN DEALING WITH EMPLOYERS (C) TO COORDINATE AND CONSOLIDATE THE ACTIVITIES OF ITS VARIOUS AFFILIATED LOCAL UNIONS THAT HAVE A COMMON INTEREST (D) TO FOSTER HARMONY AND UNITED ACTION BETWEEN ITS AFFILIATED LOCAL UNIONS (E) TO MAINTAIN UNIFORMITY IN THE CONDUCT OF THE BUSINESS OF ITS AFFILIATED LOCAL UNIONS LOCATED IN METROPOLITAN AREAS, WHEN NECESSARY TO ESTABLISH COORDINATION AND AVOID

2			rogram services during the year wh		es 🔽 No
	If "Yes," describe t	hese new services on Sched	ule O		
3		n cease conducting, or make • • • • • • •	significant changes in how it condu	cts, any program	es 🔽 No
	If "Yes," describe t	hese changes on Schedule C			
4	Section 501(c)(3)	and 501(c)(4) organizations	each of the organization's three larg and section 4947(a)(1) trusts are r evenue, if any, for each program serv	equired to report the amount o	
4a	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
	IRS ACTIVITY CODE 2 472 AND 172 OF THE WITH EMPLOYERS, FO	61 IN THE HEAVY AND GENERAL CO STATE OF NEW JERSEY THE DC H.	PROVEMENT OF CONDITIONS OF WORKERS DISTRUCTION INDUSTRY FOR THE 9,094 M AS THE AUTHORITY TO NEGOTIATE, BARGAI ED LOCAL UNIONS AND TO ENFORCE AND F	EMBERS AS OF 12-31-10 OF THE AFF N FOR AND ENTER INTO UNDERSTAN	ILIATED LOCAL UNIONS DINGS AND AGREEMENTS
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	-				
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	Other program co	rvices (Describe in Schedul	20)		
+u	(Expenses \$	•	•) (Revenue \$)
 4е	Total program ser				·

Part IV	Che	cklist	of Re	auired	Sche	dules
	CIIC	LKIISL	UI NO	uuncu	30110	uuics

			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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2		No
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		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
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		No
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		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a		No
b	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.	11b		No
c	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.	11c		No
d	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 Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	16		Νο
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 (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

	990 (2010)			Page 4
Par	t IV Checklist of Required Schedules (continued)			
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		No
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		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
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-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
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? <i>If</i> "Yes," complete Schedule L, Part I	25a		No
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		No
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		No
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		No
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			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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? <i>If</i> "Yes," complete Schedule R, Part I	33		No
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		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νο
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	Yes	

Form 990 (2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
la	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		Νο
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			
b	return	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	ZD	res	
Ba	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νο
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		No
	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		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ā	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		Νo
ia	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		Νο
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		Νο
,	Organizations that may receive deductible contributions under section 170(c).			
а	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		
	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 was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
3	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		Νο
)	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		Νo
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Νο
.0	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Νo
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
L 3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		Νo
b	Enter the amount of reserves the organization is required to maintain by the states			
c	In which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand			
14-	Did the organization receive any nayments for indeer tanning convices during the tay year?	1.1-		NI ~
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		N o N o

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule C							. 🗸

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any	2	Yes	
3	other officer, director, trustee, or key employee?	_	res	
4	supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was	3		No
5	filed? Did the organization become aware during the year of a significant diversion of the organization's assets? .	4 5	Yes	No
		6	V	NO
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		N
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		Νο
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
		11a	Yes	
Ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by		, 03	
	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			NI -
	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
ь	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		No
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			
_ -	(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of			

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization CHARLES A MOSIER SEC-TREAS
 700 RAYMOND BLVD
 NEWARK, NJ 071052909
 (973) 589-5050

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any 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 neither the org (A)	(B)						, , , ,			(F)
Name and Title	A verage hours		from the from related c					Estimated amount of other		
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	rrom related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) WILLIE HAGGAN EXEC BOARD MBR	3 00	х		х				1,500	0	0
(2) ROGER ELLIS AUDITOR	3 00			х				3,000	0	0
(3) NABIH SHEHATA EXEC BOARD MBR	3 00	х		х				3,600	0	0
(4) LOUIS A GIAMMARINO BUSINESS MGR	12 00	х		х				6,300	0	1,638
(5) GERARD J ISABELLA SERGEANT-AT-ARM	3 00			х				1,250	0	0
(6) FRANK A DIANTONIO EXEC BOARD MBR	3 00	х		х				3,600	0	0
(7) DONALD E HIBBS Vice President	3 00	х		х				3,000	0	0
(8) DAVID L BRANIN AUDITOR	3 00			х				3,600	0	0
(9) CHARLES A MOSIER SECRETARY-TREAS	12 00	х		х				9,000	0	2,340
(10) BRIAN DIANTONIO AUDITOR	3 00			х				3,600	0	0
(11) ANTONIO S OLIVEIRA BUSINESS MGR	12 00	х		х				6,250	0	1,170
(12) ANTONIO DOS SANTOS EXEC BOARD MBR	3 00	х		х				1,500	0	0
(13) ANTHONY CAPACCIO President	12 00	х		х				9,000	0	2,340

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per		tion that a	(che				(D Report compen from	table sation	(E) Reportable compensation from related		(F) Estima imount o compens	ated fother
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organizat 2/1099-	ion (W-	organizations (W- 2/1099- MISC)		from t rganızatı relat organıza	the on and ed
1b	Sub-Total				•	٠.		>						
С	Total from continuation sheets						-							
d	Total (add lines 1b and 1c) .							<u> </u>	<u> </u>	55,200				7,488
2	Total number of individuals (inc \$100,000 in reportable compe					tea	above) Wnc	received	more tha	ın			
													Yes	No
3	Did the organization list any fo r on line 1a? <i>If</i> "Yes," complete Sc				e, k	eye •	mploy •	ee, o	or highest o	ompens	ated employee	3		Νο
4	For any individual listed on line organization and related organiz													
5	Individual	receive or accri		• nensa	• ition	• fror	nanvi	• unrel	· · ·	· ·	or individual for	4		Νο
•	services rendered to the organi										•	5	Yes	
Se	ection B. Independent Cor	ntractors												
1	Complete this table for your five \$100,000 of compensation from	e highest comper		ndep	ende	ent c	ontrac	tors	that rece	ived mor	e than			
	Na	(A) me and business add	dress							Descr	(B) aption of services		(C Comper	
												_		

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 ▶0

		2010)					Р	age 9
Part \	,,,,	Statement of Reven	ue		(A) Total revenue	or	(C) Unrelated business	
						exempt function revenue		excluded from tax under sections
								512, 513, or 514
nts nts	1a	Federated campaigns	1a					
concributions, gills, grants and other similar amounts	b	Membership dues	. 1b					
, E		Fundraising events						
ᇫᆖ	d	Related organizations	. 1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants similar amounts not included above	, and 1f					
- G	g	Noncash contributions included in li	nes 1a-1f \$					
유	h	Total. Add lines 1a-1f			0			
9				Business Code				
Program Service Revenue		Membership Dues & Assessments		900099	275,000	275,000		
9. 18.	b c							
Ž.	d							
<u>ş</u>	e							
gran	f	All other program service re	venue					
<u>\$</u>	а	Total. Add lines 2a-2f			275,000			
		Investment income (includir						
		and other similar amounts)			590			590
		Income from investment of tax-ex	_		0			
	5	Royalties	(ı) Real	(II) Personal				
	6a	Gross Rents	(I) Real	(II) F ersonar				
		Less rental expenses						
	c	Rental income or (loss)						
		Net rental income or (loss)			0			
			(ı) Securities	(II) O ther				
		Gross amount from sales of						
		assets other than inventory						
		Less cost or other basis and						
		sales expenses Gain or (loss)						
	d	Net gain or (loss)			0			
e E		Gross income from fundraisi (not including	ng events					
Other Revenue		\$						
ř		of contributions reported on See Part IV, line 18						
<u>ਦ</u>			а					
5		Less direct expenses .			0			
-		Net income or (loss) from ful Gross income from gaming a	ctivities See Part IV, line 19 . a					
				ь				
	С	Net income or (loss) from ga	ming activities		0			
		Gross sales of inventory, les returns and allowances	s a					
		Less cost of goods sold .	_					
-	С	Net income or (loss) from sa	les of inventory	l no si	0			
•	112	Miscellaneous Revenue		Business Code 900099	9	9		
	ь							
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d			0			
			•					
	12	Total revenue. See Instructi	ons		275,599	275,009		59

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).									
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisin <u>g</u> expenses				
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0							
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0							
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0							
4	Benefits paid to or for members	0							
5	Compensation of current officers, directors, trustees, and key employees	36,288							
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	3,600							
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	936							
9	Other employee benefits	0							
LO	Payroll taxes	3,176							
а	Fees for services (non-employees) Management	0							
ь	Legal	0							
c	Accounting	10,250							
d	Lobbying	0							
e	Professional fundraising services See Part IV, line 17	0							
f	Investment management fees	0							
g	Other	2,305							
2	Advertising and promotion	15,000							
3	Office expenses	563							
4	Information technology	0							
5	Royalties	0	+						
6	Occupancy	0							
7	Travel								
8	Payments of travel or entertainment expenses for any federal, state, or local public officials	0							
.9	Conferences, conventions, and meetings	7,207							
0	Interest	7,207							
1	Payments to affiliates	36,909							
2	Depreciation, depletion, and amortization	36,909							
2 3	Insurance	62							
4	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)	02							
а	LERPEF CONTRIBUTIONS	120,000							
b									
c									
d									
e									
f	All other expenses	0							
25	Total functional expenses. Add lines 1 through 24f	236,296	0	0					
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation								

Part X Balance Sheet (B) (A) Beginning of year End of year 9,604 1 9,753 128.626 167,780 2 Savings and temporary cash investments 2 3 0 3 4 0 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 0 Schedule L . . . 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 0 6 0 7 Notes and loans receivable, net 0 8 8 Prepaid expenses and deferred charges 9 0 10a Land, buildings, and equipment cost or other basis Complete Part 10a VI of Schedule D ь Less accumulated depreciation 10b 10c 0 0 11 11 0 12 12 Investments—other securities See Part IV, line 11 0 13 13 Investments—program-related See Part IV, line 11 . . 0 14 14 15 0 15 16 138.230 16 177,533 Total assets. Add lines 1 through 15 (must equal line 34) . . . 17 17 Accounts payable and accrued expenses . 18 18 19 19 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 25 Other liabilities Complete Part X of Schedule D 26 26 0 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets 138,230 27 177,533 Temporarily restricted net assets 28 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 🕨 🥅 and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 138,230 33 177,533 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 138,230 177,533 34

Pal	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		-	275,599
2	Total expenses (must equal Part IX, column (A), line 25)	2			236,296
3	Revenue less expenses Subtract line 2 from line 1	3			39,303
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1	138,230
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		1	177,533
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		•	୮	•
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of to audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c		No
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3a	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?	9	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the r audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		No

DLN: 93493126000221

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► 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 V, line 46 (Political Campaign Activities),

- ◆ 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

⊬Se	ction 501(c)(4), (5), or (6) organ	es," to Form 990, Part IV, Line 5 izations Complete Part III	· · · · ·	· · ·	
	me of the organization ORERS NEW JERSEY HEAVY AND GENE	RAI		Employer	identification number
	NSTRUCTION LABORERS DISTRICT COL			22-37598	313
ar	t I-A Complete if the or	ganization is exempt und	er section 501(c) or is a section	527 organization.
1	Provide a description of the or	ganization's direct and indirect p	olitical campaign act	civities in Part IV	
2	Political expenditures			▶	\$
3	V olunteer hours				
Paı	t I-B Complete if the or	ganization is exempt und	er section 501(c)(3).	
1	Enter the amount of any excis	e tax incurred by the organization	under section 4955	5	▶ \$
2	Enter the amount of any excis	e tax incurred by organization ma	nagers under sectio	n 4955	- \$
3	If the organization incurred a s	section 4955 tax, did it file Form	4720 for this year?		┌ Yes
4a	Was a correction made?				┌ Yes
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt und	er section 501(c) except section	501(c)(3).
1	Enter the amount directly exp	ended by the filing organization fo	r section 527 exemp	pt function activities	- \$
2	Enter the amount of the filing of exempt funtion activities	organization's funds contributed t	o other organizations	s for section 527 I	* \$
3	Total exempt function expend	itures Add lines 1 and 2 Enter h	ere and on Form 112	.0-POL, line 17b	• ¢
4	Did the filing organization file				Ţes ∇ No
4 5	Enter the names, addresses a organization made payments amount of political contributio	Form 1120-POL for this year? nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC)	r the amount paid frond frond frond frond frond front	om the filing organization to a separate political	tions to which the filing n's funds Also enter the organization, such as a
	Enter the names, addresses a organization made payments amount of political contributio	nd employer identification numbe For each organization listed, ente ns received that were promptly a	r the amount paid frond frond frond frond frond front	om the filing organization to a separate political	tions to which the filing n's funds Also enter the organization, such as a rmation in Part IV (e) A mount of political contributions received
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC	r the amount paid front the second front the second front fr	om the filing organization to a separate political is needed, provide info	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC	r the amount paid front the second front the second front fr	om the filing organization to a separate political is needed, provide info	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC	r the amount paid front the second front the second front fr	om the filing organization to a separate political is needed, provide info	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC	r the amount paid front the second front the second front fr	om the filing organization to a separate political is needed, provide info	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC	r the amount paid front the second front the second front fr	om the filing organization to a separate political is needed, provide info	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC	r the amount paid front the second front the second front fr	om the filing organization to a separate political is needed, provide info	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC	r the amount paid front the second front the second front fr	om the filing organization to a separate political is needed, provide info	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly a political action committee (PAC	r the amount paid front the second front the second front fr	om the filing organization to a separate political is needed, provide info	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,

Sc	hedule C (Form 990 or 990-EZ) 2010						Page 2
P	art II-A Complete if the organization under section 501(h)).	is ex	cempt under	section 501(c)(3) and fi	led Form 5768	
A B	Check If the filing organization belongs to a Check If the filing organization checked bo			" provisions apply	/		
	Limits on Lobbying E (The term "expenditures" means a)		(a) Filing Organization's Totals	(b) Affiliated Group Totals
<u>1</u> a	Total lobbying expenditures to influence public o	pinion	(grass roots lob	oyıng)			
b	Total lobbying expenditures to influence a legisl	atıve b	ody (direct lobby	ıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1	c and :	Ld)				
f	Lobbying nontaxable amount Enter the amount columns	from th	e following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The	lobbying nontaxa	ble amount is:			
	Not over \$500,000	20%	of the amount on lin	e 1e			
	Over \$500,000 but not over \$1,000,000	\$100	,000 plus 15% of the	excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175	,000 plus 10% of the	excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225	,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,00	00,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1 f)					
_	Subtract line 1g from line 1a If zero or less, ent	-					
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h d	or line 11, did the	organization file F	orm 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t	secti	on 501(h) ele		havè to co		ne five
	Lobbying Exp	endit	ures During 4	l-Year Averag	jing Period		
	Calendar year (or fiscal year						

	Lobbying Expenditures During 4-Year Averaging Period						
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total	
2a	Lobbying non-taxable amount						
b	Lobbying ceiling amount (150% of line 2a, column(e))						
С	Total lobbying expenditures						
d	Grassroots non-taxable amount						
e	Grassroots ceiling amount (150% of line 2d, column (e))						
f	Grassroots lobbying expenditures						

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

	(election under section 501(h)).					
		(a)			(b)	
		Yes	No	,	A moun	nt
1	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					
а	V olunteers?					
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?					
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 lines 1c through 1:		•			
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			1		
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?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	501(c)(5),	or s	ectio	n
	501(c)(6).					
_			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		-	1	Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	Yes	ļ
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	L	Νo
Par	t III-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 answered "Yes".				ectio	n
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).					
а	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				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and					
	political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
Pa	art 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, and Part II-B, line 1i Also, complete this part for any additional information

Identifier Return Reference Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493126000221

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

F Attacii ti	o Form 990. F See Separate instructions.		Iliop	
Name of the organization ABORERS NEW JERSEY HEAVY AND GENERAL CONSTRUCTION LABORERS DISTRICT COUNCIL			oyer identification nu	mber
Part I Organizations Maintaining Donor organization answered "Yes" to Form				olete if the
organization answered Tes to Form	(a) Donor advised funds	(b) Funds and other ac	ounts
Total number at end of year				
Aggregate contributions to (during year)				
Aggregate grants from (during year)				
Aggregate value at end of year				
Did the organization inform all donors and donor a funds are the organization's property, subject to t			sed ┌ Y €	s 「No
Did the organization inform all grantees, donors, a used only for charitable purposes and not for the conferring impermissible private benefit	-	•		s ∏No
art II Conservation Easements. Comple	te if the organization answered "Yes	s" to Form	n 990, Part IV, line 🛚	<u>7. </u>
Preservation of land for public use (e g , recre Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a q easement on the last day of the tax year	☐ Preservation o	f a certified	cally importantly land I historic structure nservation	area
			Held at the End of	the Year
Total number of conservation easements		2a		
b Total acreage restricted by conservation easeme		2b		
Number of conservation easements on a certified	• •	2c		
d Number of conservation easements included in (c) acquired after 8/17/06	2d		
Number of conservation easements modified, trar		nated by th	e organization during	
Number of states where property subject to conse				
Does the organization have a written policy regard enforcement of the conservation easements it hol		nandling of	violations, and Ye	s 「No
Staff and volunteer hours devoted to monitoring, in A mount of expenses incurred in monitoring, inspe				
Does each conservation easement reported on lir 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?				s Γ No
In Part XIV, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's finan		se statement, and	,
Organizations Maintaining Collect Complete if the organization answere			ner Similar Assets	5.
If the organization elected, as permitted under SF art, historical treasures, or other similar assets h provide, in Part XIV, the text of the footnote to its	eld for public exhibition, education or res	earch in fui		
If the organization elected, as permitted under SF historical treasures, or other similar assets held if provide the following amounts relating to these ite	or public exhibition, education, or researc			•
(i) Revenues included in Form 990, Part VIII, lin	e 1		► \$	
(ii) Assets included in Form 990, Part X			► \$	
If the organization received or held works of art, he following amounts required to be reported under S		s for finan		
Revenues included in Form 990. Part VIII. line 1			▶ \$	

b Assets included in Form 990, Part X

Par	t III	Organizations Maintaining Co	llections of Art	<u>, His</u>	tori	<u>cal Tr</u>	easur	es, or C	the	r Similar A	ssets (c	ontınued)
3		ng the organization's accession and othens (check all that apply)	r records, check any	of th	ie foll	owing t	hat are	a significa	ant us	se of its collec	tion	
а	Γ	Public exhibition		d	Γ	Loan	orexcha	ange prog	rams			
b	Γ	Scholarly research		e	Γ	O ther						
c	Γ	Preservation for future generations										
4		vide a description of the organization's co : XIV	ollections and expla	ın hov	v they	/ furthe	r the or	ganızatıor	ı's ex	empt purpose	ın	
5		ing the year, did the organization solicit o ets to be sold to raise funds rather than t			,					ılar	┌ Yes	┌ No
Pa	rt IV	Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	d "Y	es" to Form	990,	
1a		he organization an agent, trustee, custod uded on Form 990, Part X?						other ass	ets r	not	☐ Yes	┌ No
b	If"\	es," explain the arrangement in Part XIV	/ and complete the	follow	ıng ta	able		г	ı			
								-	_	A	mount	
с	_	Jinning balance						-	1c			
d		ditions during the year						-	1d			
e		tributions during the year						-	1e			
f		ling balance						L	1 f		_	
2a		the organization include an amount on Fo		21?							│ Yes	∏ No
		es," explain the arrangement in Part XIV							_			
Pa	rt V	Endowment Funds. Complete	f the organization (a)Current Year		were Prior \			orm 990, Years Back		<u>t IV, line 10.</u> Three Years Back		ears Back
1a	Bea	inning of year balance	(a)Curient real	(0)	PHOL	Cai	(C)TWO	Tears back	(u)	illiee Teals back	(e)i oui i	ears back
 Ь		ntributions							1			
c		estment earnings or losses										
d		nts or scholarships										
e		er expenditures for facilities programs										
f	Adr	nınıstratıve expenses										
g	End	of year balance										
2	Prov	vide the estimated percentage of the yea	r end balance held a	ıs								
а	Boa	rd designated or quasi-endowment 🕨										
b	Peri	manent endowment 🕨										
С	Terr	m endowment 🕨										
3a		there endowment funds not in the posses	ssion of the organiza	ation t	that a	re held	l and ad	mınıstere	d for	the		T
	_	anization by unrelated organizations								3a	(i) Yes	No
		related organizations		٠. ٠							(ii)	
b		(es" to 3a(II), are the related organization			ched	ule R?				3	вь	i
4	Des	cribe in Part XIV the intended uses of th	e organization's end	lowme	ent fu	nds				<u></u>	•	
Pai	rt VI	Investments—Land, Buildings	s, and Equipme	nt. S	ee F	orm 9	90, Par	t X, line	10.	_		
		Description of investment				a) Cost o sıs (ınve	or other estment)	(b) Cost or basis (ot		(c) Accumula depreciation		Book value
1a	Land											
b	Build	ıngs										
c	Leas	ehold improvements										
d	Equip	oment										
е	Othe	r	<u> </u>									
		d lines 1 s 1 s (Column (d) should say a Fa	OOO Bart V!	(E)	lim-	10/-11				- L		

Investments—Other Securities. See	roi ili 990, Pait X, ilile 12		
(a) Description of security or category	(b)Book value	(c) Method of valuation	
(including name of security)	(2)2001111111	Cost or end-of-year market v	alue
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
		12	
Part VIII Investments—Program Related. See	: гогиг ээо, rait x, ime . T		
(a) Description of investment type	(b) Book value	(c) Method of valuation	ماليم
		Cost or end-of-year market v	aiue
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, In	e 15.		
(a) Descrip	tion	(b) Book v	alue
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		
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Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		

	าts	
1 Total revenue (Form 990, Part VIII, column (A), line 12)	1	275,599
Total expenses (Form 990, Part IX, column (A), line 25)	2	236,296
3 Excess or (deficit) for the year Subtract line 2 from line 1	3	39,303
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 - 8	9	
10 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	39,303
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		<u>'</u>
1 Total revenue, gains, and other support per audited financial statements	1	275,599
A mounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIV) 2d		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	275,599
4 Amounts included on Form 990, Part VIII, line 12, 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		
c Add lines 4a and 4b	4c	
Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	275,599
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1 Total expenses and losses per audited financial statements	1	236,296
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities		
b Prior year adjustments 2b		
c Other losses		
d Other (Describe in Part XIV) 2d	-	
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	236,296
4 A mounts 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	1	
c Add lines 4a and 4b	4c	
Total assessment Additions 3 and 4a /This absolute asset Francis Co. C. 17. 1. 10.	5	236,296
Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)		· · · · · · · · · · · · · · · · · · ·

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier Return Reference Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**Compensation Information**

DLN: 93493126000221

OMB No 1545-0047

Open to Public Inspection

Schedule J

(Form 990)

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990. ► See separate instructions.

Name of the organization LABORERS NEW JERSEY HEAVY AND GENERAL CONSTRUCTION LABORERS DISTRICT COUNCIL **Employer identification number**

22-3759813

Pa	rt I Questions Regarding Compensation	on			
	_			Yes	Νo
1a	11 1 1 1	ovided any of the following to or for a person listed in Form II to provide any relevant information regarding these items			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
b		organization follow a written policy regarding payment or cribed above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to				
	officers, directors, trustees, and the CEO/Executiv	e Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organizatorganization's CEO/Executive Director Check all t				
	Compensation committee	Written employment contract			
	Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	, Part VII, Section A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	l payment from the organization or a related organization?	4a		Νo
ь	Participate in, or receive payment from, a suppleme	ental nonqualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-l	based compensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and p	provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only m	nust complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a, did the organization pay or accrue any			
а	The organization?		5a		
b	Any related organization?		5b		
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a, did the organization pay or accrue any			
а	The organization?		6a		
b	Any related organization?		6b		
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section Apayments not described in lines 5 and 6? If "Yes,"	A, line 1a, did the organization provide any non-fixed describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III	paid or accured pursuant to a contract that was in Regs section 53 4958-4(a)(3)? If "Yes," describe	8		
9	If "Yes" to line 8, did the organization also follow th section 53 4958-6(c)?	he rebuttable presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

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

(A) Name		(B) Breakdown of	W-2 and/or 1099-	MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) WILLIE HAGGAN	(I)	1,500					1,500	
(2) RO GER ELLIS	(1) (11)	3,000					3,000	
(3) NABIH SHEHATA	(1) (11)	3,600					3,600	
(4) GERARD J ISABELLA	(1) (11)	1,250					1,250	
(5) FRANK A DIANTONIO	(ı) (ıı)	3,600					3,600	
(6) DONALD E HIBBS	(ı) (ıı)	3,000		_	_		3,000	_
(7) DAVID L BRANIN	(1) (11)	3,600					3,600	_
(8) BRIAN DIANTONIO	(1) (11)	3,600					3,600	
(9) ANTONIO S OLIVEIRA	(1) (11)	6,250			1,170		7,420	
(10) ANTONIO DOS SANTOS	(ı) (ıı)	1,500					1,500	
(11)								
(12)								
(13)								
(14)					1			
(15)					1			
(16)								

Part III Supplemental Information

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

Ident if ier	Ret urn Ref erence	Explanation
Sch J, Part	Part III,	H&GCL UNION LOCAL 472 (AN UNRELATED ORGANIZATION) PAID GROSS WAGES OF \$250 PER MONTH AND CONSTRUCTION AND GENERAL
III, Addıtıonal	A dditional	LABORERS LOCAL 172 (AN UNRELATED ORGANIZATION) PAID GROSS WAGES OF \$300 PER MONTH TO THEIR RESPECTIVE DELEGATES TO THE
Information	Information	ORGANIZATION WHO ARE NOT COMPENSATED BY THE ORGANIZATION FOR ATTENDANCE AT THE MONTHLY OFFICERS AND EXECUTIVE BOARD
		MEETINGS THE PERSONS RECEIVING SUCH COMPENSATION ARE AS FOLLOWS LOCAL 472 DELEGATES WILLIE HAGGAN \$1,500ANTONIO S
		OLIVEIRA \$1,750DONALD E HIBBS \$3,000ROGER ELLIS \$3,000ANTONIO DOSSANTOS \$1,500GERARD J ISABELLA \$1,250LOCAL 172
		DELEGATES BRIAN DIANTONIO \$3,600FRANKA DIANTONIO \$3,600NABIH SHEHATA \$3,600DAVID L BRANIN \$3,600

Schedule J (Form 990) 2010

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As Filed Data -

DLN: 93493126000221

OMB No 1545-0047

2010

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization LABORERS NEW JERSEY HEAVY AND GENERAL CONSTRUCTION LABORERS DISTRICT COUNCIL Employer identification number

22-3759813

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	THE CONSTITUTION (GOVERNING DOCUMENT) AND ETHICS AND DISCIPLINARY PROCEDURE (CONFLICT OF INTEREST POLICY) IS AVAILABLE THROUGH THE UNITED STATES DEPARTMENT OF LABOR, OLMS, ONLINE PUBLIC DISCLOSURE ROOM THE INFORMATION IS FILED UNDER LABORERS' INTERNATIONAL UNION OF NORTH AMERICA, WHO FILES THE INFORMATION ON BEHALF OF ALL AFIFILIATED ORGANIZATIONS IN ADDITION, OUR ORGANIZATION FILES AN ANNUAL FINANCIAL REPORT WITH THE DEPARTMENT OF LABOR WHICH CAN BE OBTAINED ON THE ONLINE PUBLIC DISCLOSURE ROOM

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	THE WRITTEN CONFLICT OF INTEREST POLICY IS INCLUDED IN THE ETHICS AND DISCIPLINARY PROCEDURE THAT IS PART OF THE CONSTITUTION BY WHICH OUR ORGANIZATION IS GOVERNED ANY MEMBER OR EMPLOYEE OF THE ORGANIZATION CAN CONTACT THE LIUNA (AN AFFILIATED ORGANIZATION ALSO GOVERNED BY THE CONSTITUTION) INSPECTOR GENERAL WITH ANY COMPLAINT ARISING UNDER THE CONSTITUTION, THE ETHICAL PRACTICES CODE, OR ANY OTHER DISCIPLINARY RULE, REGULATION, PRACTICE, OR PROCEDURE ADOPTED BY THE LIUNA GENERAL EXECUTIVE BOARD THE ETHICAL PRACTICES CODE EXPLAINS THE DISCIPLINARY PROCEDURE THAT MUST BE FOLLOWED WHEN NECESSARY AND THE INDEPENDENT OFFICERS WHO ARE ENTRUSTED TO ENFORCE THE CODE THE US DEPARTMENT OF LABOR REQUIRES ALL NON-CLERICAL EMPLOYEES TO REPORT ON FORM LM-30 POTENTIAL SITUATIONS WHERE THERE MAY BE CONFLICTS OF INTEREST THIS INFORMATION IS OPEN TO THE PUBLIC

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 11	Form 990, Part VI, Line 11 Form 990 Review Process	THE PREPARED FORM 990 WAS REVIEWED BY THE EXECUTIVE BOARD AFTER IT WAS FILED WITH THE IRS AT THE MAY 19, 2011 E B MEETING HELD AT THE CROWN PLAZA MONROE, NJ THE REVIEW WAS CONDUCTED BY THE PREPARER'S FIRM AND A PAGE BY PAGE SUMMARY OF THE FORM AND REQUIRED SCHEDULES WAS GIVEN A BRIEF DISCUSSION FOLLOWED AND ANY QUESTIONS BY THE EXECUTIVE BOARD WERE ADDRESSED

Identifier	Return Reference	Explanation
•	Form 990, Part VI, Line 8 Explanation of No Contemporaneously Documentation of	THE EXECUTIVE BOARD GOVERNING BODY DID NOT HAVE ANY COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY AND
	Meetings	THEREFORE NO DOCUMENTATION OF COMMITTEE MEETINGS WAS REQUIRED

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 7a	Form 990, Part VI, Line 7a How Members or Shareholders Elect Governing Body	ALL DELEGATES IN GOOD-STANDING HAVE THE VOTING RIGHTS TO ELECT MEMBERS OF THE EXECUTIVE BOARD GOVERNING BODY FOR A TERM OF (4) YEARS PER ARTICLE VI OF THE DISTRICT COUNCIL CONSTITUTION HOWEVER THE EXECUTIVE BOARD SHALL FILL ANY VACANCIES BY APPOINTMENT IN A PROVISIONAL CAPACITY OF A MEMBER HAVING ALL THE REQUIREMENTS FOR OFFICE

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 6	Form 990, Part VI, Line 6 Explanation of Classes of Members	MEMBERS CONSIST OF DELEGATES FROM AFFILIATED LOCAL UNIONS, WHO HAVE BEEN ELECTED PURSUANT TO THE PROVISIONS DEALING WITH QUALIFICATIONS, NOMINATION AND ELECTION OF OFFICERS, AS PROVIDED FOR IN THE UNIFORM LOCAL UNION CONSTITUTION ALL DELEGATES IN
	or Shareholder	GOOD-STANDING HAVE THE VOTING RIGHTS TO ELECT MEMBERS OF THE EXECUTIVE BOARD GOVERNING BODY PER ARTICLE VI OF THE UNIFORM DISTRICT COUNCIL CONSTITUTION AND TO APPROVE SIGNIFICANT DECISIONS OF THE GOVERNING BODY PER THE CONSTITUTION

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 4		THE CONSTITUTION THAT GOVERNS OUR ORGANIZATION WAS CHANGED TO REFLECT CHANGES CONCERNING QUALIFICATIONS AND NOMINATING PROCEDURES FOR INTERNATIONAL OFFICERS

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 2	Form 990, Part VI, Line 2 Description of Business or Family Relationship of Officers, Directors, Et	FRANK A DIANTONIO, EXECUTIVE BOARD MEMBER AND BRIAN DIANTONIO, AUDITOR HAVE A FAMILY RELATIONSHIP