

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 **2010** Open to Public Inspection

A	For the 2010 cal	endar year, or tax year beginning , and ending	-										
	Check if applicable	C Name of organization LABORERS INTERNATIONAL UNION OF		D Emplo	oyer identification number								
	Address change	NORTH AMERICA - LOCAL 1076			-								
$\vec{\sqcap}$	Name change	Doing Business As		38-	0738510								
님	•	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Teleph	none number								
님	Initial return	760 JOSLYN AVENUE		248	-334-0509								
\sqcup	Terminated	City or town, state or country, and ZIP + 4											
	Amended return	PONTIAC MI 48340		G Gross rece	epts\$ 1,171,022								
$\bar{\square}$	Application pending	F Name and address of principal officer	14.3										
	,, , 3	PAUL GASSEL	H(a) Is this a g	roup return tor a	affiliates? Yes X No								
		760 JOSLYN	H(b) Are all a	iffiliates inclu	ded? Yes No								
		PONTIAC MI 48340	If "N	o," attach a l	ist (see instructions)								
<u></u>	Tax-exempt statu												
<u>J</u>	Website ⁻ ▶ C	onstructionlaborers1076.org	H(c) Group e	xemption nu	mber ▶ 0121								
	Form of organization		ear of formation		M State of legal domicile MI								
F	<u>Partl Su</u>	ımmary											
	1	scribe the organization's mission or most significant activities											
9	THE	LOCAL IS A NONPROFIT ORGANIZATION ESTALISHED TO RE	PRESENT I	TS MEMI	BERS								
Activities & Governance		IN WAGE AND FRINGE BENEFITS MATTERS IN THE CONSTRUCTION INDUSTRY. THE											
ler.	1	L'S PRIMARY AREAS OF JURISDICTION ARE OAKLAND AND I			IES.								
8	2 Check th	is box $lacktriangle$ $lacktriangle$ if the organization discontinued its operations or disposed of more than 25	5% of its net as:	sets	_								
ಷ	3 Number	of voting members of the governing body (Part VI, line 1a)		3	7								
ties		of independent voting members of the governing body (Part VI, line 1b)		4	0								
Ę	1	nber of individuals employed in calendar year 2010 (Part V, line 2a)		5	13								
Ac	ł	nber of volunteers (estimate if necessary)		6									
	1	elated business revenue from Part VIII, column (C), line 12		7a									
_	b Net unre	lated business taxable income from Form 990-T, line 34	Prior Ye	7b	Current Year								
	8 Contribut	ions and grants (Part VIII, line 1h)		2,877	1,072,485								
Revenue	9 Program	service revenue (Part VIII, line 2g)	-,	2,0,,	1,012,403								
ver	10 Investme	ent income (Part VIII, column (A), lines 3, 4, and 7d)	11	6,682	88,441								
ୢଝ	11 Other rev	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,727	10,096								
÷	1	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,286	1,171,022								
,		nd similar amounts paid (Part IX, column (A), lines 1–3)		-,									
36	i	paid to or for members (Part IX, column (A), line 4)		7,374	3,281								
(n) S	4	other compensation, employee benefits (Part IX, column (A), lines 5–10)		7,350	910,196								
benses	16a Professio	onal fundraising fees (Part IX, column (A), line 11e)		··· ' ···									
ē	b Total fun	draising expenses (Part IX, column (D), line 25) ▶											
Ж	17 Other ov	popper (Part IV, column (A), lines 11a, 11d, 11f, 245)	61	2,998	670,003								
	18 Total exp	penses Add lines 13–17 (must equal Part IX, column (At, Infe-25)	1,47	7,722	1,583,480								
	19 Revenue	less expenses Subtract line 18 from line 12		6,436	-412,458								
Sor	832	[8] APR 1 8 2011 [X]	Beginning of Cu		End of Year								
Net Assets or	20 Totalass	sets (Part X, line 16)	4,91	5,593	4,533,197								
let A	21 Total liab	ollities (Part X, line 26)	4 01	5,593	4,533,197								
		111111111111111111111111111111111111111	4,91	3,393	4,555,197								
_		gnature Block ————————————————————————————————————		d many line	dee and bab-6 due								
		perjury, I declare that I have examined this return, including accompanying schedules and statements complete. Declaration of preparer (other than officer) is based on all information of which preparer has		of my knowle	age and belief, it is								
	Nuc, contect, and co	1+ /1/11 -7 PV											
e:	an D :	ALKIMA QUILL	+	l									
	- 1	Signature of officer SARETARY—AR	CASURCE	Date	4-13-11								
ne	ere	Type or print name and title	<u></u>		1-13-11								
_			Date3/	Check	(If PTIN								
Pa		Preparer's signature LAUIN J. SWAINE Preparer's signature , Make C	2/A- Dais/	//x/ L	mployed								
	20250r	THE THE TRANSPORT OF CONTRACT OF VO.		Firm's EIN	38-246659								
	e Only	24520 MEADOWBROOK #200	+	FILLIS EIN F	30 240003								
	· 1	NOTE NO. 40075		Phone so	248-442-9911								
<u></u>		ss this return with the preparer shown above? (see instructions)		Phone no	Yes No								
		eduction Act Notice, see the separate instructions.	_		Form 990 (2010)								
DA		reserve not notice, see the separate manuchems.			1 01111 000 (2010)								

Form 990 (2010)

4693

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		Yes	No Y
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	1		X
3		2		
	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		х
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		
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	x	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		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		Х
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
0	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		<u>X</u>
1	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, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
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		X_
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			v
d	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11c		X
ŭ	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	
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		X
3	ls the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
17	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
1	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	47		v
8	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		X
. •	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	٣		 -
-	If "Yes," complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some			
	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

	AND OF THE PROPERTY OF THE PRO				Pi	age 4
_ <u>P</u>	art IV Checklist of Required Schedules (continued)			 -1	1	
21	Did the arganization report more than \$5,000 of greate and other acceptance to acceptance and acceptance			ŀ	Yes	No
4 1	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			24		x
22			}	21		
~~	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			22	-	х
22	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		}	22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			ł		
	organization's current and former officers, directors, trustees, key employees, and highest compensated				.	
24.	employees? If "Yes," complete Schedule J		}	23	Х	
24a	g process and the second secon		ŀ	1		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b		ľ		1	**
	through 24d and complete Schedule K. If "No," go to line 25		}	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		}	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year					
	to defease any tax-exempt bonds?			24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	•	}	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction					
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I			25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior					
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?					
	If "Yes," complete Schedule L, Part I			25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or				:	
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II			26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,					
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?					
	If "Yes," complete Schedule L, Part III			27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,					
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)				1	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete					
	Schedule L, Part IV		,	28b		X
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? If "Yes," complete Schedule L, Part IV		,	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified					
	conservation contributions? If "Yes," complete Schedule M		ļ	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,					1
	Part I		į	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"					l
	complete Schedule N, Part II			32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		i			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I			33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,					
	IV, and V, line 1			34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			35	ļ	X
а	Did the organization receive any payment from or engage in any transaction with a					İ
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,					
	Part V, line 2	Yes	X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable					
	related organization? If "Yes," complete Schedule R, Part V, line 2			36		
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and					
	19? Note. All Form 990 filers are required to complete Schedule O			38	X	<u>l</u> .

••	The digulation received a contribution of cars, boats, and the digulation line a form 7000 of
}	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?
)	Sponsoring organizations maintaining donor advised funds.
а	Did the organization make any taxable distributions under section 4966?

Did the organization make a distribution to a donor, donor advisor, or related person? b 10 Section 501(c)(7) organizations. Enter

Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter 11

Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12b b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Section 501(c)(29) qualified nonprofit health insurance issuers.

a 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

Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans

Enter the amount of reserves on hand

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

8

9a

12a

13a

14a

10a 10b

11a

11b

13b

13c

693				
	1990 (2010) LABORERS INTERNATIONAL UNION OF 38-0738510			age 6
ra	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b be			
	 "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change O See instructions. 	S III 30	neut	iie
	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
	the state of the s		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 7			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 0	7	1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	7	1	
	any other officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			É
	the year by the following		v	ŧ
a	The governing body?	8a	X	
р	Each committee with authority to act on behalf of the governing body?	8b	Λ	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x
Sec	etion B. Policies (This Section B requests information about policies not required by the Internal Reven		e)	
000	Mon 2.1 Onoice (This occitor & requests information about policies not required by the internal reven	<u>uo oou</u>	Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
	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		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11a		X
b	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	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	<u> </u>
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		۱	
	describe in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	├
14	Does the organization have a written document retention and destruction policy?	14	X	ļ
15	Did the process for determining compensation of the following persons include a review and approval by	İ		ŧ
	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	150	x	Ī
a	The organization's CEO, Executive Director, or top management official	15a 15b	X	
þ	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	130		ļ
16a	The state of the s			ł
IVa	with a taxable entity during the year?	16a	1	x
ь	tense that it is a second to the constraint and the second to the constraint and the second to the s	-133		
-	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			1
	organization's exempt status with respect to such arrangements?	16b		<u> </u>
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available			
	for public inspection Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,			

State the name, physical address, and telephone number of the person who possesses the books and records of the

760 JOSLYN AVENUE

MI 48340

PONTIAC

and financial statements available to the public

organization > PAUL GASSEL

Form 990 (2010)	LABORERS	INTERNATIONAL	UNION	OF	

38-0738510

Page 7

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

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

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 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

Name and Title (1) PAUL GASSEL SECRETARY TREASURER	Average hours per week (describe hours for related organizations in Schedule O)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the
	40.00	I		1		sated		(1.2.1000 MILOO)		organization and related organizations
SECRETARY TREASURED	40.00	1 1						1		
		X		X				116,181	0	62,256
(2) WILLIAM BASS										
BUSINESS MANAGER	40.00	X		X				114,081	0	62,255
(3) JASON CHWALEK										
REP/REC SECRETARY	40.00	X		X				91,548	0	55,719
(4) RICARDO BRIONES										
REPRESENTATIVE	40.00	X						86,348	0	54,757
(5) MICHAEL J BROWN										
REPRESENTATIVE	40.00	X						83,048	O	55,102
(6) DANIEL WATSON										
E-BOARD	1.00	X						2,100	0	0
(7) STEVEN LAMARBE										
PRESIDENT	1.00	$ \mathbf{x} $		X		1		2,100	0	0
(8) STEVEN SOBCZAK										
E-BOARD	1.00	X						2,100	0	0
(9) MICHAEL BUGAJSKI										
AUDITOR	1.00	X						1,800	0	0
10) DALE GOMOLL										
AUDITOR	1.00	X						450	0	0
11) SCOTT POWELL										-
E-BOARD	1.00	X						450	0	0
12)										
(13)										,
(14)										
(15)		Н								
(16)		\Box								

Pa	rt VII Section A. Officers	, Directors, Tru	stee	s, Ke	у Ег	nplo	yees	s, ar	nd Highest Compensated	Employees (continued)				
	(A) Name and Title	(B) Average	Pos	ition (C) k all t	that a	pply)		(E) Reportable	,	(F) Estimated		
	•	hours per week (describe hours for related organizations in Schedule O)	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)	co.	from rganiz ind re	er sation the ation	
(17)													,	
(18)														
(19)														
(20)	···													
(21)		-	,										_	
(22)	· · · · · · · · · · · · · · · · · · ·	-								.				
(23)												···-		
(24)														
(25)				_										
(26)														
(27)													· ·	
(28)							-							
1b	Sub-total					·		>	500,206	***	<u> </u>	2	90,	089
с d_	Total from continuation shee Total (add lines 1b and 1c)	ets to Part VII, S	ectic	on A				>	500,206			2	90,	089
2	Total number of individuals (in reportable compensation from				thos	e lis	ted a	bov	e) who received more than	\$100,000 in				
3	Did the organization list any fo	,			ruste	e k	ev ei	mala	ovee or highest compensati	ted			Yes	No
4	employee on line 1a? If "Yes," For any individual listed on line organization and related organ	' complete Schede e 1a, is the sum	dule of re	J for	suci able	h ind com	lividu ipens	ial satio	n and other compensation	from the		3	77	X
5	Individual Did any person listed on line 1 for services rendered to the or									ndividual	-	5	X	x
Sec	tion B. Independent Contract	ors												
1	Complete this table for your five compensation from the organic	ızatıon	ensa	ted	ndep	end	lent o	conti						
	Name and	(A) I business address							Descrip	(B) ution of services	\longrightarrow	Co	(C) mpensa	ition
														<u> </u>
								-						
				•										
	Tatalaumbaaafiin			, le								,		
2	Total number of independent or received more than \$100,000		_						se listed above) who	0			990	

Pa	rt V	Statement of Revenue 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	nue		****				
	•	,				(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
(0, (0)			T . T				revenue		512, 513, or 514
	1a	Federated campaigns	1a		270 405			,	
PE	b	Membership dues	1b	1,1	72,485	1			
rai rai	C	Fundraising events	1c			‡			
95	đ	Related organizations	1d			1			
Sin	е	Government grants (contributions)	1e			Į.			
출	f	All other contributions, gifts, grants, and similar amounts not included above				1			
클립			1f					`	
S E	g	Noncash contributions included in lines 1a-	1f \$	1					
Program Service Revenue Contributions, gifts, grants and other similar amounts	h	Total. Add lines 1a-1f			•	1,072,485			
- B					Busn Code	‡			
e	2a								,
e e	b	-							
_ુંકે	С								
န	d								
rail	е								
ē	f	All other program service reve	nue				,		
4	g	Total. Add lines 2a–2f			•				
- 1	3	Investment income (including	dıvıden	ds, intere	st,				
		and other similar amounts)			•	88,441			88,441
	4	Income from investment of tax	(-exem	ot bond pr	oceeds 🕨				
	5	Royalties			<u> </u>				
		(ı) Real		(II) P	ersonal	1			
	6a	Gross Rents				1			
- 1	b	Less rental exps				1			
	С	Rental inc or (loss)							
	d	Net rental income or (loss) Gross amount from (1) Sequente							-
	, a	sales of assets (i) Securitie	S	(II)	Other				
		other than inventory				‡			
	b	Less cost or other	,		ļ				
		basis & sales exps							
	С	Gain or (loss)				1			
	d	• , ,	_		•				
9	8a	Gross income from fundraising eve	ents				:		
enne		(not including \$							
Še		of contributions reported on line 10	;)						
Other Reve		See Part IV, line 18	a	_					
Ě		Less direct expenses	b[ŧ
	1	Net income or (loss) from fun-		events	•				<u> </u>
	9a	Gross income from gaming activiti	es					,	
		See Part IV, line 19	а						ŧ
		Less direct expenses	þ						
		Net income or (loss) from gar	r	tivities	•				<u> </u>
	10a	Gross sales of inventory, less							<u> </u>
		returns and allowances	а						‡
		Less cost of goods sold	b						†
	<u> </u>	Net income or (loss) from sale		entory/	•				
	<u> </u>	Miscellaneous Revenu	е		Busn. Code		,		
	11a	MISCELLANEOUS				10,096			10,096
	b					-			ļ
	C				 				ļ.
	d				L				
	9				•	10,096			00 537
	12	Total revenue. See instruction	ns			1,171,022	0	<u> </u>	98,537

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)

	All other organizations must of				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
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	3,281	3,281		· · · · · · · · · · · · · · · · · · ·
5	Compensation of current officers, directors,				
	trustees, and key employees	493,456	406,058	87,398	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	41,924	36,824	5,100	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	251,927	216,778	35,149	
9	Other employee benefits	75,684	65,125	10,559	
10	Payroll taxes	47,205	40,619	6,586	
11	Fees for services (non-employees)				
а	Management	5 600	5 600		
þ	Legal	5,628	5,628	00 204	
	Accounting	29,324		29,324	
	Lobbying				
	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
9	Other				···
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties	53,182	50,524	2,658	
16	Occupancy Travel	50,399	43,367	7,032	
17 18	Payments of travel or entertainment expenses	50,599	43,307	- 1,032	
10	for any federal, state, or local public officials				
19	· · · · · · · · · · · · · · · · · · ·	3,221	3,221		
20	Conferences, conventions, and meetings Interest	3,221	3,221		
21	Payments to affiliates	227,843	227,843		
22	Depreciation, depletion, and amortization	57,679	54,795	2,884	
23	Insurance	<u> </u>			
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24f If	1		1	
	line 24f amount exceeds 10% of line 25, column	İ	1	1	
	(A) amount, list line 24f expenses on Schedule O)	1			
а	MEMBER SOCIAL FUNCTIONS	116,437	116,437		
b	OFFICE EXPENSE	50,855	48,312	2,543	
C	TELEPHONE	19,024	18,073	951	
d	ORGANIZING EXPENSES	17,869	17,869		
е	INSURANCE-GENERAL	13,793	13,103	690	
f	All other expenses	24,749	16,121	8,628	
25	Total functional expenses. Add lines 1 through 24f	1,583,480	1,383,978	199,502	· · · · · · · · · · · · · · · · · · ·
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				
DAA	carripaign and randialoning denotation	l			Form 990 (2010

49 4 49

_P	art X	Balance Sheet					
	, ,				(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			756,184	1	732,445
	2	Savings and temporary cash investments			3,454,371	2	3,053,184
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directors,	trustees, key		,		
		employees, and highest compensated employees. Com	plete Part II of				
		Schedule L				5	·
	6	Receivables from other disqualified persons (as defined	under section				
		4958(f)(1)), persons described in section 4958(c)(3)(B),					
		employers and sponsoring organizations of section 501	(c)(9) voluntary				
w.		employees' beneficiary organizations (see instructions)				6	<u> </u>
Assets	7	Notes and loans receivable, net				7	
188	8	Inventories for sale or use			8		
Q	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment cost or					
		other basis Complete Part VI of Schedule D	10a	664,083	,		; <u>}</u>
	b	Less accumulated depreciation	10b	453,805	255,711	10c	210,278
	11	Investments—publicly traded securities		449,327	11	537,290	
	12	Investments—other securities See Part IV, line 11			12		
	13	Investments—program-related See Part IV, line 11			13		
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equal line 3	4)		4,915,593	16	4,533,197
	17	Accounts payable and accrued expenses		17			
	18	Grants payable			18		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities				_20	
Liabilities	21	Escrow or custodial account liability Complete Part IV	of Schedule D			21	
ij	22	Payables to current and former officers, directors, truste	ees, key				İ
ab		employees, highest compensated employees, and disq	ualified persons				
=		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated thir	· ·			23	
		Unsecured notes and loans payable to unrelated third p	arties			24	
		Other liabilities Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25	a			26	
ès		Organizations that follow SFAS 117, check here ▶	🖔 and complete				į
ž		lines 27 through 29, and lines 33 and 34.			4 045 500		4 500 405
ä	27	Unrestricted net assets			4,915,593		4,533,197
<u> </u>	28	Temporarily restricted net assets			28	-	
Ĕ	29	•	, m .			29	
Ē		Organizations that do not follow SFAS 117, check he	ere 🕨 💹 and				
ō		complete lines 30 through 34.					ļ.
ets	30	Capital stock or trust principal, or current funds				30	
SS	31	Paid-in or capital surplus, or land, building, or equipmen				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or	or other funds		4 015 503	32	A F22 107
Ę	33	Total net assets or fund balances			4,915,593		4,533,197
=	34_	Total liabilities and net assets/fund balances			4,915,593	34	4,533,197

Form **990** (2010)

om	990 (2010) LABORERS INTERNATIONAL UNION OF 38-0738510			Pac	ge 12			
Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response to any question in this Part XI				\Box			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,17					
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,58	33,4	480			
3	Revenue less expenses Subtract line 2 from line 1	3	-41	L2 ,4	458			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))							
5	Other changes in net assets or fund balances (explain in Schedule O)	5	3	30,0	062			
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	4,53	33,:	197			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response to any question in this Part XII				\Box			
				Yes	No			
1	Accounting method used to prepare the Form 990 X Cash Accrual Other				ĺ			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			1	É			
	Schedule O		*********	· · · · · · ·				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
b	Were the organization's financial statements audited by an independent accountant?		2b	X				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight							
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain in			I				
	Schedule O			1	Ĺ			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			1	Ė			
	issued on a separate basis, consolidated basis, or both			I	į			
	Separate basis Consolidated basis Both consolidated and separate basis			1	ĺ			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				Ì			
	the Single Audit Act and OMB Circular A-133?		3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				ĺ			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		<u> </u>			
			Form	990	(2010)			

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

2010
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

• Section 501(c)(4), (5), or (6) organizations Complete Part III

Nar	me of organization	LABORERS INTERNA NORTH AMERICA -			Employer identifi	
Par	rt I-A Con		is exempt under section 501(c	or is a sectio		
1			and indirect political campaign activities			
2	Political expend	•			▶ \$	
3	Volunteer hour	5			· - ·	
					<u> </u>	
Pai	rt I-B Cor	nplete if the organization	is exempt under section 501(c)(3).		
1	Enter the amou	int of any excise tax incurred by t	he organization under section 4955		▶ \$	
2	Enter the amou	int of any excise tax incurred by o	organization managers under section 495	5	> \$	
3	=	ion incurred a section 4955 tax, d	lid it file Form 4720 for this year?			Yes No
	Was a correction					Yes No
	If "Yes," descri				F04/-\/0\	
			is exempt under section 501(c		on 501(c)(3).	
1		int directly expended by the filing	organization for section 527 exempt fund	tion		
_	activities		d		▶ \$	_
2		= *	ds contributed to other organizations for s	ection	. .	
3	527 exempt fur		and 2. Enter here and an Earm 1120 BO	1	~ 5 _	
3	line 17b	inction expenditures. And lines i	and 2 Enter here and on Form 1120-PO	L ,	▶ ¢	
4		ganization file Form 1120-POL fo	or this year?		_	Yes No
5	-	•	tification number (EIN) of all section 527	oolitical organizatio	ons to which the filing	
Ū		• •	ation listed, enter the amount paid from the	-	-	
	•		at were promptly and directly delivered to			
			on committee (PAC) If additional space i			
	•	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
					filing organization's	contributions received and
					funds If none, enter -0-	promptly and directly delivered to a separate
						political organization If
						none, enter -0-
(1)						
(2)						
		·		-		<u> </u>
(3)						
(4)						
					 	·
(5)			1			
(6)						
(6)						
For	Privacy Act and	Paperwork Reduction Act Notic	ce, see the Instructions for Form 990 or	990-EZ.	Schedule C (Form	n 990 or 990-EZ) 2010

•						
Schedule C (Form 990 or 990-EZ) 2010 LAB Part II-A Complete if the organiz						
Part II-A Complete if the organiz section 501(h)).	ation is exem	pt under section :	out(c)(3) and	Tilea Form 5/6	8 (elect	ion under
A Check ► ☐ if the filing organizati	on belongs to	an affiliated group				
B Check ▶ ☐ if the filing organizati				sions apply.		
Limits on Lob			<u> </u>	(a) Filing		(b) Affiliated
(The term "expenditures" n				organization's totals		group totals
1a Total lobbying expenditures to influence pu	blic opinion (grass	roots lobbying)	L			
b Total lobbying expenditures to influence a l		ect lobbying)	-	·		
c Total lobbying expenditures (add lines 1a a	nd 1b)		-			
d Other exempt purpose expenditures	4 4 4 10		-			
e Total exempt purpose expenditures (add lin	•		-		-	
f Lobbying nontaxable amount Enter the arr columns	lount from the folio	wing table in both				
If the amount on line 1e, column (a) or (b) is	The lobbying non	taxable amount is:				
Not over \$500,000	20% of the amount	<u> </u>				
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15%	of the excess over \$500,0	00		······	
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10%	of the excess over \$1,000	,000		Ī	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% o	of the excess over \$1,500,0	000		Ī	
Over \$17,000,000	\$1,000,000					
g Grassroots nontaxable amount (enter 25%	•		-			
h Subtract line 1g from line 1a If zero or less			-			
Subtract line 1f from line 1c If zero or less	•	t. did the areanimetics	file Farm 4720		l	
j If there is an amount other than zero on eit	ner line in or line	ii, did the organization	nie Form 4/20			☐Yes ☐ No
reporting section 4911 tax for this year?	 		<u>-</u>		<u> </u>	165 160
		ing Period Under				- 1
(Some organizations that						tive
columns bei	ow. See the in	structions for line	es za throug	n 21 on page 4.)		
Lobb	ying Expendit	ures During 4-Yea	ar Averaging	Period		
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 20	10	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount (150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						

Schedule C (Form 990 or 990-EZ) 2010

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2010 LABORERS INTERNATIONAL UNION OF

38-0738510

Page 3

Par	t II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	1 5768		
	(election ander economics (m)).	(a)	(1	0)	
		Yes	No	Am	ount	
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	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	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?					
ı	Other activities? If "Yes," describe in Part IV					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		1 1			
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 se	ction		
	501(c)(6).					1
				_	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	X	ļ
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	X	<u> </u>
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	J	X
Pa	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 III-A, "Yes."					
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible 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			
С	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			
	t IV Supplemental Information					
Com	plete 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-E	3, line 1	ı Also,			
com	plete this part for any additional information					

Schedule C (Form 990 or 990-EZ) 2010 LABORERS INTERNATIONAL UNION OF 38-0738510

Part IV · Supplemental Information (continued)

Page 4

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Inspection

Name of the organization Employer identification number LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL 1076 38-0738510 Part 1 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990. Part IV Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) Yes No (i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 S (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items \$ a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X Schedule D (Form 990) 2010

Sche	dule D (Form 990) 2010 LABORERS I	NTERNATIONA	L UNION OF		38-073	3510	Page 2
Pa	rt III Organizations Maintaining	Collections of Art,	Historical Treas	ures, o	r Other Si	milar Assets	(continued)
3	Using the organization's acquisition, accession collection items (check all that apply)	n, and other records, che	ck any of the followin	g that are	a significant	use of its	
а	Public exhibition	d 🗍 Loan	or exchange program	s			
b	Scholarly research	e Other		-			
С	Preservation for future generations	- 🗀					
4	Provide a description of the organization's colle	ections and explain how	they further the organ	nization's e	exempt purpo	ose in Part	
	XIV		,				
5	During the year, did the organization solicit or i				mılar		
	assets to be sold to raise funds rather than to				1 (1)		Yes No
Pa	rt IV Escrow and Custodial Arra		_	ation an	swered "Y	es" to Form	990, Part IV,
	line 9, or reported an amour						
1a	Is the organization an agent, trustee, custodiar	n or other intermediary fo	or contributions or oth	er assets	not		
	included on Form 990, Part X?						Yes No
b	If "Yes," explain the arrangement in Part XIV a	nd complete the followin	g table				
							Amount
C	Beginning balance					1c	
d	Additions during the year					1d	<u>-</u>
е	Distributions during the year					1e	
f	Ending balance					1f	
2a	Did the organization include an amount on For	m 990, Part X, line 21?					Yes No
	If "Yes," explain the arrangement in Part XIV						
Pa	rt V Endowment Funds. Comple	ete if organization a	answered "Yes" t	o Form	990, Part	IV, line 10	
		(a) Current year	(b) Prior year	(c) Two	years back	(d) Three years bad	k (e) Four years back
1a	Beginning of year balance				·		
b	Contributions						
С	Net investment earnings, gains, and						
	losses						
d	Grants or scholarships						
е	Other expenditures for facilities and						,
	programs						
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percentage of the year	end balance held as					
а	Board designated or quasi-endowment ▶	%					
b	Permanent endowment ▶ %						
C	Term endowment ▶ %						
3a	Are there endowment funds not in the possess	sion of the organization t	that are held and adm	unistered :	for the		
-	organization by	ordinar tila argamization t					Yes No
	(i) unrelated organizations						3a(i)
	(ii) related organizations						3a(ii)
h	If "Yes" to 3a(ii), are the related organizations	listed as required on Sci	hedule R2				3b
	Describe in Part XIV the intended uses of the	•					00
<u>4</u>	ert Vi Land, Buildings, and Equip			10			
<u> </u>	Description of investment	(a) Cost or other basis	(b) Cost or other		(c) Accun	hatelu	(d) Book value
	บองอากุสอก อกการออกายให	(investment)	(other)	Ju015	depreci	1	(4) 5000 1000
	l and	(554.11511)		,769			52,769
	Land					43,638	67,548
	Buildings	-	311	,186		33,030	01,340
	Leasehold improvements		140	242		02 006	10 216
	Equipment			,342		92,096	48,246
	Other	15	 	,786	<u>.</u>	18,071	41,715
Tota	 Add lines 1a through 1e (Column (d) must ed 	quai ⊢orm 990, Part X, c	olumn (B), line 10(c))		<u> </u>	210,278

193				
	Form 990) 2010 LABORERS INTERNATION OF THE PROPERTY OF THE PRO		38-0738510	Page 3
Part VII	Investments—Other Securities. See Form		(-) \$4-45-4-4	· · · · · · · · · · · · · · · · · · ·
,	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-yea	
1) Financial	derivatives			······
	eld equity interests			
(3) Other				
(A)				
(B)		<u></u>		·
(C)				·
(D)			<u></u>	
(E)				
(F)				
(G)				
(H)				
(I)	on (h) much acual Form 000 Part V and (P) line 12.)		<u> </u>	
Part VIII	nn (b) must equal Form 990, Part X, col (B) line 12) Investments—Program Related. See For	m 990 Part X line 13	<u> </u>	
1 DIL VIII	(a) Description of investment type	(b) Book value	(c) Method o	valuation
	(a) Description of investment type	(5) 555.1 74.45	Cost or end-of-year	
(1)			·	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)			<u> </u>	
	nn (b) must equal Form 990, Part X, col (B) line 13)	45	<u> </u>	
Part IX	Other Assets. See Form 990, Part X, line			(b) Death relies
-(4)	(a) Descript	ion		(b) Book value
(1)	• • • • • • • • • • • • • • • • • • • •			
(2)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	nn (b) must equal Form 990, Part X, col. (B) line 15.)		<u> </u>	
Part X	Other Liabilities. See Form 990, Part X, I		-	
1.	(a) Description of liability	(b) Amount	4	
	il income taxes		-{	
(2)			-{	
(3)			-{	
(4)			-{	
(5)			-{	
(6)	· · · · · · · · · · · · · · · · · · ·		†	
(8)			1	
(9)			1 .	
(10)	· ·	-	1	
(11)			7	
	· · · · · · · · · · · · · · · · · · ·		7	

Total (Column (b) must equal Form 990, Part X, col (B) line 25)

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

	edule D (Form 990) 2010 LABORERS INTERNATIONAL UNION OF 38-073851	<u>ე</u>	Page 4
Pa	art XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,171,022
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,583,480
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-412,458
4	Net unrealized gains (losses) on investments	4	30,062
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	30,062
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-382,396
Pa	art XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Ret	urn	
1	Total revenue, gains, and other support per audited financial statements	1	1,201,084
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1	
а	Net unrealized gains on investments 2a 30,062	1	
b	Donated services and use of facilities 2b	- 1	
С	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	30,062
3	Subtract line 2e from line 1	3	1,171,022
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	.]	
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 1	
þ	Other (Describe in Part XIV)	. 1	
С	Add lines 4a and 4b	4c	
5	The state of the s	5	1,171,022
Pa	art XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per R	tetur	
1	Total expenses and losses per audited financial statements	1	1,583,480
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	. 1	
а	Donated services and use of facilities 2a		
b		1	
_	Other losses 2c	1	
d	(. 1	
	Add lines 2a through 2d	2e	1 502 400
3	Subtract line 2e from line 1	3	1,583,480
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a		,	
	Other (Describe in Part XIV)	i .	
	Add lines 4a and 4b	4c	1 500 400
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,583,480

Part XIV Supplemental Information

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, line 2, 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

Schedule D (Form 990) 2010 LABORERS INTERNATIONAL UNION OF

38-0738510

Page 5

Part XIV Supplemental Information (continued)

Schedule D (Form 990) 2010

SCHEDULE J

(Form 990)

Part I

Compensation Information

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

 Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► See separate instructions. Onen To Publi

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

LABORERS INTERNATIONAL UNION OF

NORTH AMERICA - LOCAL 1076

Questions Regarding Compensation

Employer identification number 38-0738510

• • • •

			Yes	No
10	Check the consequents have an account of the consequent of the fall of the consequent of the fall of the consequent of the fall of the consequent of the fall of the consequent of the fall of the consequent of the fall of the consequent of the fall of the consequent of the fall of the consequent of the fall of the consequence of the consequence of the consequ			
ıa	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,			
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply			
	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, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization			
а	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a	-	х
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
•	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III	40		-
	and provide the applicable amounts for each term in a drift in			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of		-	
	The organization?	5a		
b	Any related organization?	5b		<u> </u>
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			Ī
	compensation contingent on the net earnings of			
а	The organization?	6a		
b	Any related organization?	6b		<u> </u>
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		<u> </u>
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		<u> </u>
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	q	1	l

38-0738510

LABORERS INTERNATIONAL UNION OF

Schedule J (Form 990) 2010

4693

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

	(B) Breakdown	(B) Breakdown of W-2 and/or 1099-MISC compensation	Compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	(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
PAUL GASSEL (0)	116,181		0	0	62,256	178,43	0
		0	0	0	0		0
WILLIAM BASS	114,081	0	0		62,255	176,33	0
2 (ii)			0	0	0	0	0
	0	-	•				
3	2						
(3)			•	•		,	
(()	÷ =		•				
(3)							i
9							
(2)			•			•	
	(0)						
(E)	· 		•				
	(i)		,			·	
, , , , , , , , , , , , , , , , , , ,	. 3						
0	(II)						
	(n)					•	
	(E)						
	(C)						
13	3						
14	(n)						
	(0)						
	€ €					, -	1
0						Schedu	Schedule J (Form 990) 2010

4693

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 Part III

any additional information

Schedule J (Form 990) 2010

4696

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Internal Revenue Service

Name of the organization

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL 1076

Employer identification number

38-0738510

1071 1 15

Form 990, Part VI, Line 2 - Related Party Information Among Officers

LABORERS LOCAL 1076

. . . .

LABORERS LOCAL 1076

BUS. MGR.

SEC. TREAS.

WORK FOR SAME EMPLOYER

LABORERS LOCAL 1076

LABORERS LOCAL 1076

BUS. MGR.

RECORDING SE

WORK FOR SAME EMPLOYER

LABORERS LOCAL 1076

LABORERS LOCAL 1076

REC. SEC.

SEC. TREAS.

WORK FOR SAME EMPLOYER

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990
THE SECRETARY-TREASURER AND THE BUSINESS MANAGER REVIEW THE 990 IN DETAIL
WITH THE LOCAL'S OUTSIDE AUDITORS PRIOR TO FILING.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
THE EXECUTIVE BOARD REVIEWS THE ALL FINANCIAL TRANSACTIONS AT ITS MONTHLY
MEETINGS AND WATCHES FOR ANY VIOLATIONS OF THE LOCAL'S CONFILICT OF
INTEREST POLICY.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

THE SALARIES OF THE OFFICERS ARE SET AT THE TRI-ANNUAL ELECTION OF OFFICERS

AS RECOMMENDED BY THE EXECUTIVE BOARD AND APPROVED BY THE GENERAL

يد د په

Name of the organization

46,93

LABORERS INTERNATIONAL UNION OF

Employer identification number 38-0738510

47 . . 15"

MEMBERSHIP OF THE LOCAL.

Form 990, Part VI, Line 15b - Compensation Process for Officers

THE SALARIES OF THE BUSINESS REPRESENTATIVES AND COODINATORS ARE SET AT THE

TRI-ANNUAL ELECTION OF OFFICERS AND AS RECOMMENDED BY THE EXECUTIVE BOARD

AND APPROVED BY THE GENERAL MEMBERSHIP OF THE LOCAL.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
AS A 501(C)(5) ORGANIZATION, THE UNION DOES NOT MADE AVAILABLE FOR PUBLIC
INSPECTION ITS FINANCIAL STATEMENT OR GOVERNING DOCUMENTS, OTHER THAN THOSE
REQUIRED BY THE DEPARTMENT OF LABOR.