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SCANNED MAR 0 1 2012

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)

Open to Public

OMB No 1545-0047

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

Inspection

A	For the	2010 calendar year, or tax year beginning OCT 1, 2010 and ϵ	ending S	EP 30, 2011					
В	Check if applicable	C Name of organization		D Employer identific	ation number				
	applicable	LABORERS' INTERNATIONAL UNION OF NORTH	Ŧ						
	Addres	S 1 1000 TO 1 1001 1104							
┌	Name change			43-1	365986				
F	Unitial	· · · · · · · · · · · · · · · · · · ·	Room/suite						
F	return Termin		noonvante	E Telephone number					
늗	ated Amend	113 ENTERPRISE STREET			334-7722				
늗	return Applic	City or town, state or country, and ZIP + 4		G Gross receipts \$	<u>256,759.</u>				
Ц	tion	CAPE GIRARDEAU, MO 03703		H(a) Is this a group re					
F Name and address of principal officer:RICHARD MCGUIRE for affiliates?									
		SAME AS C ABOVE		H(b) Are all affiliates incl	uded? Yes No				
1	Тах-өхе	empt status: 501(c)(3) X 501(c) (5) (Insert no.) 4947(a)(1) o	or 🔲 527	If "No," attach a	list. (see instructions)				
J	Websit	e:▶N/A		H(c) Group exemption					
		organization: Corporation Trust X Association Other ▶	1 Year		State of legal domicile: MO				
	art I	Summary	1 =		Cutto or logal dollations, 220				
		Bnefly describe the organization's mission or most significant activities. OPERA	זא ריים אי	OF LABOREDS	' LOCAL				
Governance		UNION	TITOM	OF DABORERS	посип				
Tan	_ ·								
ē	2	Check this box If the organization discontinued its operations or dispos	ed of more	than 25% of its net as					
á	3	Number of voting members of the governing body (Part VI, line 1a)		3	11				
∞ ಶ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	10				
Activities &	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5	2				
<u> </u>	6	Total number of volunteers (estimate if necessary)		6	0				
둉	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.				
⋖		Net unrelated business taxable income from Form 990-T, line 34	••	7b	0.				
	1	The contract of the contract o		Prior Year	Current Year				
	8	Contributions and grants (Part VIII, line 1h)		0.	0.				
Ę		, - · · · · · · · · · · · · · · · · · ·	·						
Revenue	9	Program service revenue (Part VIII, line 2g)		287,833.	255,947.				
ê	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		313.	239.				
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	1,504.	<u>573.</u>				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, solumn (A), line 12)		289,650.	<u> 256,759.</u>				
	13	Grants and similar amounts paid (Part IX, column (A); lines (+3))		0.	<u> </u>				
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	<u> </u>				
S	15	Salaries, other compensation, employee benefits (Part IX50 jump 3) lines 5-10)	1	128,206.	137,467.				
Expenses	16a	Professional fundraising fees (Part IX, Column (A), line 11e)		0.	0.				
8	Ь	Total fundraising expenses (Part IX, column (D) time 25)	0.						
û	17	Other expenses (Part IX, column (A), lines 11a. 11d, 1,1f24fy		161,221.	146,656.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		289,427.	284,123.				
		Revenue less expenses. Subtract line 18 from line 12	• -	223.	<27,364.>				
28	1 3	revenue less expenses. Subtract fine to normane 12							
Net Assets or		Total accests (Dent V. Inna 16)	Re	ginning of Current Year	End of Year				
SSE	20	Total assets (Part X, line 16)	· ·	289,512.	<u>250,226.</u>				
et ,	21	Total liabilities (Part X, line 26)	·	89,645.	77,723.				
		Net assets or fund balances Subtract line 21 from line 20		199,867.	<u>172,503.</u>				
_	Part II Signature Block								
		lties of perjury, I declare that I have examined this return, including accompanying schedules			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.									
	Rick Me Suice 2/9/12								
Sign Signature of officer Date									
Here RICHARD MCGUIRE, BUS. MANG./SEC. TREAS.									
	-	Type or print name and title							
_		Print/Type preparer's name Preparer's signature	أارر	Date Check	PTIN				
Trino Type propurer Smalle									
Paid MATTHEW G MULLER 02/03/12 self-employed									
Preparer Firm's name NOMOLO & ASSOCIATES Firm's EIN									
Use Only Firm's address 2428 N NORTH									
PEORIA, IL 61604 Phone no. 309-682-2001									
Ma	May the IRS discuss this return with the preparer shown above? (see instructions)								
032	001 02-2	2-11 LHA For Paperwork Reduction Act Notice, see the separate instruction	ons.		Form 990 (2010)				

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$

) (Revenue \$

4e Total program service expenses

Form 990 (2010)

Form 990 (2010) AMERICA LOCAL 1104
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, 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			4,
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	6	-	<u> </u>
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	_		•
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	7_		X
•	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	-		
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		Х
11	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	
ь	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		<u>X</u>
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			77
d	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	11c		<u>X</u>
u	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	1.10		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
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	Х	<u> </u>
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
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
40	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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 lighted States? If "Yes " complete Schooling F. Parts II and IV.	ا ۔۔ ا		w
16	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	_ 15		<u> </u>
10	located outside the United States? If "Vas." complete Schedule E. Parts III and IV	46		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16	-	
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u>'</u> '		
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		_X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
þ	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		<u> </u>
		Form	990	2010)

Form 990 (2010) AMERICA LOCAL 1104
Part IV Checklist of Required Schedules (continued)

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	Officerist of nequired scriedules (continued)	···		
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	ļ	X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	1	}	
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		1	
	Schedule J	23	<u> </u>	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	İ		
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	L
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	ł	}	
	Schedule L, Part I	25b		l
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		х
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	ļ	1	
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	<u> </u>		
	instructions for applicable filing thresholds, conditions, and exceptions).	ŀ	1	ŀ
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	 	X
	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		Х
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	2.5		1
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
٠.	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		A
~_	Only and the N. Donat II.	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32	<u> </u>	42
•	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?	33	-	
•	If "Ves." complete Schedule P. Batte II. III. IV and V. line 1	24	x	Ì
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	34	X	
		35	Α.	
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
26	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?			
0~	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	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	1		
	Note. All Form 990 filers are required to complete Schedule O	38	X	L

Care Statements Regarding Other IRS Fillings and Tax Compliance Check I Schedulo O Contains a response to any question in this Part V Statements (Schedulo O Contains a response to any question in this Part V Statements (Schedulo O Contains a response to any question in this Part V Statement	Form	990 (2010) AMERICA LOCAL 1104 43-1365	986	P	age 5
a Enter the number reported in Box 3 of Form 1096. Enter -0 if not applicable b Enter the number of Forms W-26 included in fine 1a. Enter -0 if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) withings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, field of the cathedrary are androing with or within the year covered by the return 1b If at least one is reported on lime 2a, did the organization file all required federal employment returns? 2b If at least one is reported on lime 2a, did the organization file all required federal employment returns? 2c Note, if the sum of lime 1a and 2a is greater than 250, you may be required to e-file, else instructions) 3a Did the organization have unrelated buseness gross income of \$1,000 or more during the year? 4b If Yes, ** sent a filed a Form 950 of Tor this year If Y-No, ** private an explaination in Schedule O 4a 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 shert account, securities account, or other financial accounts? 5b If Yes, ** dieter the name of the foreign country. 5c See instructions for filing requirements for Form TD F 90-22.1, Report of Energia Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax wheter transaction at any time during the tax year? 5b If Yes, ** did the organization have annual gross receipts that are normally greater than \$10,000, and did the organization solicit any contributions that were not tax adolucible? 7b Organizations that many receive deductible contributions under section 170(c). 8b If Yes, ** did the organization include with every solicitation and partly for goods and services provided to the payor? 7c July 1 Yes, ** did the organization include with every solicitation and partly for goods and services pro	Par				
tale Enter the number or forms Wolf Gincluded in line 1a. Enter 0-4 in catapplicable 1a 2 b Enter the number or forms Wolf Gincluded in line 1a. Enter 0-4 in catapplicable 1b 0 c) Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to pize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, field for the catendar year ending with or within the year covered by this return 2 2b If all least one is reported on line 2a, dot the organization file all required federal employment tax returns? 2b If all least one is reported on line 2a, dot the organization file all required federal employment tax returns? 2b If all least one is reported on line 2a, dot the organization file all required federal employment tax returns? 2b If all least one control of the		Check if Schedule O contains a response to any question in this Part V			
tale Enter the number or forms Wolf Gincluded in line 1a. Enter 0-4 in catapplicable 1a 2 b Enter the number or forms Wolf Gincluded in line 1a. Enter 0-4 in catapplicable 1b 0 c) Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to pize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, field for the catendar year ending with or within the year covered by this return 2 2b If all least one is reported on line 2a, dot the organization file all required federal employment tax returns? 2b If all least one is reported on line 2a, dot the organization file all required federal employment tax returns? 2b If all least one is reported on line 2a, dot the organization file all required federal employment tax returns? 2b If all least one control of the				Yes	No
b Enter the number of Forms W26 included in fine 1a. Enter 0- if not applicable Cold the organization comply with backup witholiging rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements. 1 File of the calendar year ending with or within the year covered by the rotum. 2 It is tesst one is reported on line 2a, did the organization file all required federal employment fax returns? 3 Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 Did the organization have unrelated business gross income of \$1,000 or more during the year? 4 At any time during the calendary 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)? 4 If Yes, it as flide a Form 990 for this year? If Wo, "provide an explanation in Schedule O 5 Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 5 Did any taxable party notify the organization file Form 8898 arty to a prohibited tax sheller transaction? 6 If Yes, 1 to line 5a or 5b, did the organization file Form 8898 arty to a prohibited tax sheller transaction at any contributions that were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did any taxable party notify the organization that was or as party to a prohibited tax sheller transaction at express statement that such contributions or grits were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization shall may receive deductible contribution and party for goods and services provided to the payor? 5 Did the organization shall may shall party as a contribution of organization shall receive the payor? 7 Did the organization received a contr	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
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2a Enter the number of employees reported on Form W-5, Transentital of Wage and Tax Statements, filled for the cachedary sear ending with or within the year covered by the return. 2	•		10		
bif at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1 and 2a is greater than 250, you may be required to e-file, feee instructions) 3a Did the organization have urrelated business gross income of \$1,000 or more during the year? 3b If "Yes," has filled a Form 990-f for this year! If No, promote an explanation in Schedule O 4a At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account; a foreign country (such as a bank account, securities account, or other financial account)? 5b If "Yes," enter the name of the foreign country; ▶ 5ce instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohabted tax shelter transaction at any time during the tax year? 5b If any taxable party notify the organization that it was or is a party to a prohabted tax shelter transaction? 6c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization supports that the organization file Form 8886-17 6c 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? 6c Does the organization receive any symetim excess of \$55 made party as a contribution aparty for goods and services provided to the payor? 7c Torganizations that may receive deductible contributions under section 170(c). 8d Buff the organization receive any symetim excess of \$55 made party as a contribution aparty for goods and services provided to the payor? 7d If "Yes," did the organization notify the donor of the value of the goods or services provided? 7e Did the organization self-greater any funds, derectly or indirectly, on a personal benefit contract? 7e Did the organization receive any thirds, derectly or indirectly, to pay premiums on a pe	2a				
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c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 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? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, amplanes, or other vehicles, did the organization file a Form 1098-C7 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, 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. a Did the organization make any taxable distributions under section 4966? b Did the organization make any taxable distributions under section 4966? b Did the organization make any taxable distributions under section 4966? b Gross receipts, included on Form 990, Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a 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 If Yes, "enter the amount of fax-exempt interest received or accrued during the year 13a 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. b Enter the amount				-	\vdash
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organization is licensed to issue qualified health plans					
c Enter the amount of reserves on hand	D	- · · · · · · · · · · · · · · · · · · ·			
14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	_	Enter the amount of recovery on heard	1		
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			14-	 	Y
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Form 990 (2010)

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

	Check if Schedule O contains a response to any question in this Part VI			\mathbf{x}
Sec	tion 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 11			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			l
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
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			į
	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 the year			
	by the following:			
а	The governing body?	8a	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	X	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
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		v
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	40-		х
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		_
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		<u> </u>
·	in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14		х
15	Did the process for determining compensation of the following persons include a review and approval by independent			<u> </u>
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
-	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	Ì		1
	taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	1		
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	ncial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person	tion:	-	
	RICHARD MCGUIRE - 573-334-7722			
	773 ENTERPRISE, CAPE GIRARDEAU, MO 63701			

Form 990 (2010)

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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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers, key employees; highest compensated employees; and former such persons.

(A)	(B)			((C)			(D)	(E)	(F)
Name and Title	Average hours per week				ition that		ly)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
RYAN W HOLDER										
PRESIDENT	1.00	X	X	ļ	ļ	ļ	<u> </u>	0.	0.	0.
RICK MCGUIRE										
SEC/TREAS - BUS MGR	40.00	X	X	<u> </u>			<u> </u>	58,107.	0.	31,298.
MELVIN COX		1								
SGT-AT-ARMS	1.00	X	<u> </u>	<u> </u>	_		-	0.	0.	0.
MARILYN BOWEN		l							_	
REC SECRETARY	1.00	X	ļ	<u> </u>			<u> </u>	0.	0.	0.
VAUGHN HINKEHEIN	1			ĺ						_
AUD	1.00	X	<u> </u>	<u> </u>	_		_	0.	0.	0.
TIMOTHY BORNEMAN	1 00	l					1			
EBD	1.00	X	<u> </u>		-	-	-	0.	0.	0.
TIM BROWN	1 22	l							•	
AUD	1.00	X	├	├	_	_	-	0.	0.	0.
TED GLASTETTER	1 00		ł							
AUD	1.00	X	⊢	<u> </u>	-	 	├	0.	0.	0.
AARON COPLIN	1 1 00		l	Ì	Ì				_	
EBD	1.00	X	⊢	╁	├	⊢	├	0.	0.	0.
LARRY JOHNS	1 00	1,]				
VP	1.00	X		<u> </u>		 		0.	0.	0.
JAMES CRIPPS II	1.00	x	ł			ļ		0.	0.	_
AUD	1.00				_			0.	0.	0.
		-					_			
		<u> </u>				<u> </u>	<u> </u>			
		-								
										- 000

(A) Name and title	(B) Average hours per							(D) Reportable	(E) Reportable		Est	(F) imate	_
	week (describe hours for related organizations in Schedule O)	stee or director	Institutional trustee	Officer		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MIS	,	comp fro orga and	ount conther bensation the inization related inization i	tion e on ed
											_		
												_	
			_										
1b Sub-total c Total from continuation sheets to Part V d Total (add lines 1b and 1c)	/II, Section A			•		A A		58,107. 0. 58,107.		0.		L, 29	0
Total number of individuals (including but compensation from the organization	not limited to th	1080	liste	ed al	bove	e) wi	no re),000 in reportable				(
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for				y em	plo	yee,	or h	nghest compensated er	nployee on		3	Yes	No X
 For any individual listed on line 1a, is the sand related organizations greater than \$15 Did any person listed on line 1a receive or 	50,000? If "Yes,	" co	mpl	ete S	Sche	edule	e <i>J f</i>	or such individual			4		х
rendered to the organization? If "Yes," cor Section B. Independent Contractors					-						5		Х
1 Complete this table for your five highest continuous the organization. NONE	ompensated in	depe	ende	ent c	ont	racto	ors t	hat received more than	\$100,000 of com	pens	ation fr	om	
(A) Name and busines	s address							(B) Description of s	services	С	(C comper		<u> </u>
		_											
			-										
2 Total number of independent contractors		not li	mite	ed to		_	stec	above) who received n	nore than				
\$100,000 in compensation from the organ	IIZALIOII					0					Form 9	990 c	2010

Page 9

<u> </u>	IL VII	Statement of Rever	ilue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
\$ \$	1 a	Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts	ь	Membership dues	. 1b					
a, e	С	Fundraising events	1c					
ig i	d	Related organizations	1d	. <u>.</u> .				
S.E	е	Government grants (contribut	tions) 1e			İ		
ig a	f	All other contributions, gifts, gran	nts, and					
흔힘		similar amounts not included abo	ve 1f					
g	9	Noncash contributions included in lines	a 1a-1f \$					
0 8	<u>h</u>	Total. Add lines 1a-1f		, <u>.</u>	 		 	
				Business Code				
<u>Ş</u>	2 a			900099	247,597.	247,597.		
Program Service Revenue	b			900099	7,047.	7,047.		
e S	С	REINSTATEMENT E	FEES	900099	1,303.	1,303.		
<u>B</u> a	d							
Š.	е							
۱ ۳	f	All other program service reve	enue .		055 045			
\rightarrow		Total. Add lines 2a-2f			255,947.			
	3	Investment income (including	dividends, intere	est, and	220			220
	_	other similar amounts)			239.		_	239.
	4	Income from investment of ta	x-exempt bond p	proceeds				
	5	Royalties .	0.51	(3.5)				
	_	Ones Books	(ı) Real	(ii) Personal				
	6 a	•				İ		
	b	•						
	C	` '						
- 1		Net rental income or (loss) Gross amount from sales of	(A) Coourition	(i) Other				
	/ a		(i) Securities	(ii) Other				
-	L	assets other than inventory						
- 1	D	Less: cost or other basis						
	С	and sales expenses Gain or (loss)						
	d							
	8 a		na events (not					
2	o a	including \$	-	[
Š		contributions reported on line						
æ		Part IV, line 18	-					-
Other Revenue	ь	Less: direct expenses	b					
δ	-	Net income or (loss) from fun						
ł		Gross income from gaming a	-					
ļ	- 4	Part IV, line 19						
- 1	b		b					
1		Net income or (loss) from gan			i			
		Gross sales of inventory, less	-					
ļ		and allowances	а					
	b	Less: cost of goods sold	b					
		Net income or (loss) from sale						
Ī	_	Miscellaneous Revenu		Business Code				
Ì	11 a	EXPENSE REIMBUR		900099	573.	573.		1
ļ	b				<u></u>			
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d		•	573.			
	12	Total revenue. See instructions.	•• ••		256,759.		0.	239.
03200								Form 990 (2010)

43-1365986 Page 10

Part IX Statement of Functional Expenses

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

organizations in the U. Grants and other as the U.S. See Part IV. Grants and other as organizations, and it See Part IV, lines 15 Benefits paid to or 15 Compensation of cutrustees, and key end Compensation not incepersons (as defined unpersons described in 18 Pension plan contribution and section 403(b) emd Payroll taxes Pees for services (not a Management begal conducted to the U.S.)	art VIII. tance to governments and	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
organizations in the U. Grants and other as the U.S. See Part IV. Grants and other as organizations, and it See Part IV, lines 15 Benefits paid to or 15 Compensation of cit trustees, and key et 6 Compensation not incipersons (as defined un persons described in 5 Other salanes and v. Pension plan contribution and section 403(b) em 9 Other employee bet 10 Payroll taxes 11 Fees for services (n. a Management b. Legal c. Accounting d. Lobbying Professional fundraising investment manage g. Other Advertising and process 14 Information technol 15 Royalties Occupancy Travel	- I		expenses	general expenses	expenses
2 Grants and other as the U.S. See Part IV. 3 Grants and other as organizations, and it See Part IV, lines 15 4 Benefits paid to or 15 5 Compensation of cutrustees, and key end 6 Compensation not incepersons (as defined unpersons described in section 403(b) emd 6 Pension plan contribution and section 403(b) emd 7 Other employee bend 7 Payroll taxes 11 Fees for services (not a Management bend 15 Legal 16 Compensional fundraising 16 Investment managed 17 Professional fundraising 17 Professional fundraising 18 Advertising and professional fundraising 18 Advertising and professional fundraising 18 Advertising and professional fundraising 18 Advertising 18 Advert	•				
the U.S. See Part IV Grants and other as organizations, and it See Part IV, lines 15 Benefits paid to or 15 Compensation of cit trustees, and key et 6 Compensation not incepersons (as defined unpersons described in 15 Cother salaries and V Pension plan contribution and section 403(b) em Cother employee better payroll taxes Fees for services (in a Management begal condition of the professional fundraising in the professional fundraising investment manage gother Advertising and professional fundraising and professional fundraising information technol Royalties Occupancy Travel	S. See Part IV, line 21				
Grants and other as organizations, and in See Part IV, lines 15 Benefits paid to or 15 Compensation of cit trustees, and key end Compensation not incompersons (as defined unpersons described in 15 Cother salaries and visual section 403(b) end Other employee bend Payroll taxes Fees for services (nor a Management begal of Accounting described in 15 Legal	sistance to individuals in				
organizations, and it See Part IV, lines 15 Benefits paid to or it Compensation of citrustees, and key et Compensation not incepersons (as defined unpersons described in some persons (not be personal fundration described in some persons described in so	, line 22				
See Part IV, lines 15 4 Benefits paid to or 15 5 Compensation of citrustees, and key et 6 6 Compensation not incepersons (as defined upersons described in 5 7 Other salanes and vision plan contribution and section 403(b) em 9 Other employee beto 10 9 Payroll taxes 11 1 Fees for services (in a Management begal control to a Accounting described in 15 1 Investment manages of the control of the co	sistance to governments,				
See Part IV, lines 15 4 Benefits paid to or 15 5 Compensation of citrustees, and key et 6 6 Compensation not incepersons (as defined upersons described in 5 7 Other salaries and vision plan contribution and section 403(b) em 9 Other employee beto 10 Payroll taxes 11 Fees for services (in a Management begal control accounting described in 15 16 Lobbying 16 17 Professional fundraising investment manager 9 Other 17 18 Advertising and professional fundraising investment manager 9 Other 18 19 Advertising and professional fundraising 18 10 Office expenses 19 Information technol 19 Royalties 19 Occupancy 19 Travel 19	ndividuals outside the U.S.				
4 Benefits paid to or for trustees, and key end 6 Compensation not incompersons (as defined uppersons described in s. 7 Other salanes and v. 8 Pension plan contribution and section 403(b) em. 9 Other employee bell 10 Payroll taxes 11 Fees for services (n. a. Management b. Legal c. Accounting d. Lobbying					
5 Compensation of cutrustees, and key end 6 Compensation not incompersons (as defined undersons described in section 403(b) emd 9 Other salaries and version plan contribution and section 403(b) emd 9 Other employee bend 10 Payroll taxes 11 Fees for services (note a Management begal of the compensation of	· · · · · · · · · · · · · · · · · · ·				
trustees, and key et Compensation not inc persons (as defined ui persons described in s Cother salanes and v Pension plan contribu and section 403(b) em Cother employee bei Payroll taxes Fees for services (n Management Legal Accounting Lobbying Professional fundraisi f Investment manage Cother Advertising and pro Coffice expenses Information technol Royalties Coccupancy Travel					
6 Compensation not incepersons (as defined unpersons described in section 403(b) em 9 Other employee beild Payroll taxes 1 Fees for services (nor a Management begal conduction 403(b) em 9 Other employee beild Payroll taxes 1 Fees for services (nor a Management begal conduction 403(b) em 9 Other employee beild Payroll taxes 1 Fees for services (nor a Management begal conduction 403(b) em 9 Other employee beild Payroll taxes 1 Fees for services (nor a Management begal conduction 403(b) em 9 Other expenses employee expenses employee expenses employee employe		88,658.			
persons (as defined un persons described in s 7 Other salanes and v 8 Pension plan contribu and section 403(b) en 9 Other employee ber 0 Payroll taxes 1 Fees for services (n a Management b Legal c Accounting d Lobbying e Professional fundraisi f Investment manage g Other 2 Advertising and pro 3 Office expenses 1 Information technol 5 Royalties 6 Occupancy 7 Travel	· • · · · · · -		. ,		
persons described in s 7 Other salaries and s 8 Pension plan contribution and section 403(b) em 9 Other employee ber 10 Payroll taxes 11 Fees for services (n 12 Accounting to Lobbying to					
7 Other salanes and values and section 403(b) em 9 Other employee beiling Payroll taxes 11 Fees for services (not a Management begal of the company of the c				1	
8 Pension plan contribution and section 403(b) em 9 Other employee beilio Payroll taxes 11 Fees for services (not a Management belogation of the professional fundraising of the professional fundraising of the professional fundraising of the professional fundraising of the professional fundraising of the professional fundraising of the professional fundraising of the professional fundraising of the professional fundraising of the professional fundraising of the professional fundraising and professional fu		20 900			
and section 403(b) em 9 Other employee ber 10 Payroll taxes 11 Fees for services (n a Management b Legal c Accounting d Lobbying e Professional fundraisi f Investment manage g Other Advertising and pro Office expenses Information technol Royalties Occupancy Travel	· · · · · · · ·	20,800.			
9 Other employee ber 0 Payroll taxes 1 Fees for services (n a Management b Legal c Accounting d Lobbying e Professional fundraisi f Investment manage g Other 2 Advertising and pro 3 Office expenses 4 Information technol 5 Royalties 6 Occupancy 7 Travel		12 104			
O Payroll taxes 1 Fees for services (n a Management b Legal c Accounting d Lobbying e Professional fundraisi f Investment manage g Other Advertising and pro Office expenses Information technol Royalties Occupancy Travel		13,104.			· · · · · · · · · · · · · · · · · · ·
Advertising and pro Office expenses Information technol Royalties Occupancy Travel	nefits .	8,323.			
a Management b Legal c Accounting d Lobbying e Professional fundraisi f Investment manage g Other 12 Advertising and pro 13 Office expenses 14 Information technol 15 Royalties 16 Occupancy 17 Travel		6,582.			
b Legal c Accounting d Lobbying e Professional fundraisi f Investment manage g Other Advertising and pro Office expenses Information technol Royalties Occupancy Travel	on-employees)				
c Accounting d Lobbying e Professional fundraisi f Investment manage g Other Advertising and pro Office expenses Information technol Royalties Occupancy Travel					
d Lobbying e Professional fundraisi f Investment manage g Other Advertising and pro Office expenses Information technol Royalties Occupancy Travel					
e Professional fundraisi f Investment manage g Other Advertising and pro Office expenses Information technol Royalties Occupancy Travel		7,500.			
f Investment manage g Other 2 Advertising and pro 13 Office expenses 14 Information technol 15 Royalties 16 Occupancy 17 Travel					
g Other Advertising and pro Office expenses Information technol Royalties Occupancy Travel	ng services. See Part IV, line 17				
g Other Advertising and pro Office expenses Information technol Royalties Occupancy Travel	ment fees				
Advertising and production of the control of the co					
Office expenses Information technol Royalties Occupancy Travel	motion	2,256.			
14 Information technol 15 Royalties 16 Occupancy 17 Travel		6,492.		A-1-	
15 Royalties		7.3321			
16 Occupancy	- - -				
17 Travel		12,272.			
		7,457.			
18 Payments of traver	·	1,451.			
-	e, or local public officials	2 670			
	entions, and meetings	3,679.			
		3,739.			
21 Payments to affiliate	· · · · · · · · · · · · · · · · · · ·	80,469.			
22 Depreciation, deple	tion, and amortization	16,353.			
23 Insurance		1,830.			
above. (List miscellan 24f amount exceeds 1	ze expenses not covered eous expenses in line 24f. If line 0% of line 25, column (A)				
	φenses on Schedule 0.)			 	
	F HATS AND T-	2,147.			
ь <u>DONATIONS</u>		977.	- -		
c RETIREE EX		893.			 _
d BANK CHARC	SES & NSF	524.			
e <u>USE TAX</u>		68.			
f All other expenses					
25 Total functional expe	nses. Add lines 1 through 24f	284,123.			
	re if following SOP		-		
98-2 (ASC 958-720). organization reported	Complete this line only if the in column (B) joint costs from a campaign and fundraising				

Form 990 (2010) AMERICA LOCAL 1104 43-1365986 Page 11 Part X Balance Sheet (A) (B) Beginning of year End of year 16,310. 16,882. 1 Cash - non-interest-bearing 1 79,832. 104,573. 2 2 3 3 Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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) 6 Assets 7 Notes and loans receivable, net Inventones for sale or use 8 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 241,673. basis. Complete Part VI of Schedule D 88,161. 168,629. 153,512. 10b 10c Less: accumulated depreciation b 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 Intangible assets . . . 14 14 Other assets. See Part IV, line 11 15 15 250,226. 289,512 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 17 Grants payable 18 18 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Liabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 87,544. 75,747. 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 1,976. 2,101 Other liabilities. Complete Part X of Schedule D 25 25 89,645. 77,723. 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here

X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 199,867. 172,503. Unrestricted net assets 27 27 Temporarily restricted net assets 28 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32

> 250,226. Form **990** (2010)

172,503.

32

33

199,867.

289,512

33

34

Total net assets or fund balances

Total liabilities and net assets/fund balances

Retained earnings, endowment, accumulated income, or other funds

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

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

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► See separate instructions.

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

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), 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) organizate	tions: Complete Part III.			
Nan	ne of organization LABORER	S' INTERNATIONAI	UNION OF N	IORTH	Employer identification number
	AMERICA	LOCAL 1104			43-1365986
P	art I-A Complete if the org	anization is exempt un	der section 501(c)) or is a section \S	527 organization.
2	Provide a description of the organize Political expenditures Volunteer hours	ation's direct and indirect politi	cal campaign activities	ı ın Part IV. 	> \$
Pa	art I-B Complete if the org	janization is exempt un	der section 501/c)(3)	
	Enter the amount of any excise tax	· · · · · · · · · · · · · · · · · · ·		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	▶ \$
	Enter the amount of any excise tax			 5	> \$
	If the organization incurred a section				Yes No
	Was a correction made?				Yes No
t	If "Yes," describe in Part IV.				
Pε	art I-C Complete if the org	janization is exempt un	der section 501(c), except section	501(c)(3).
1	Enter the amount directly expended	d by the filing organization for s	ection 527 exempt fund	ction activities	► s
2	Enter the amount of the filing organ	ization's funds contributed to o	ther organizations for	section 527	
	·				▶ \$
3	Total exempt function expenditures	Add lines 1 and 2 Enter here	and on Form 1120-PO	L,	.
	line 17b		•		> \$
4	Did the filing organization file Form	· · · · · · · · · · · · · · · · · · ·			Yes No
5	Enter the names, addresses and en	• •	•	•	
	made payments. For each organiza contributions received that were pr	•			
	political action committee (PAC) If		•	•	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid	from (e) Amount of political
	(a) Namo	(5) / (33)	(0) 2	filing organization	1
				funds. If none, en	ter -0 promptly and directly
					delivered to a separate political organization.
					If none, enter -0
	· · · · · · · · · · · · · · · · · · ·				
		<u> </u>			
				- 	
]

032041 02-02-11

Schedule C (Form 990 or 990-EZ) 2010

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

LABORERS' INTERNATIONAL UNION OF NORTH

Schedule C (Form 990 or 990-EZ) 2010	AMERICA	LOCAL 1104	F04(-)(0) 4 <i>6</i> 1-	43-1	365986 Page 2		
Part II-A Complete if the orga		exempt under section	on 501(c)(3) and file	ea Form 5/68			
(election under sect							
A Check if the filing organization	-	· · · · · · · · · · · · · · · · · · ·					
B Check ► if the filing organization	on checked box	A and "limited control" pi	rovisions apply.		# > A ##		
	on Lobbying E tures" means a	xpenditures mounts paid or incurred	l.)	(a) Filing organization's totals	(b) Affiliated group totals		
1a Total lobbying expenditures to influe	ence public opin	ion (grass roots lobbying)					
b Total lobbying expenditures to influe							
c Total lobbying expenditures (add lin	es 1a and 1b)						
d Other exempt purpose expenditures	3						
e Total exempt purpose expenditures	(add lines 1c ar	nd 1d)					
f Lobbying nontaxable amount. Enter	the amount fro	n the following table in bo	oth columns.				
If the amount on line 1e, column (a) or	(b) is: The	lobbying nontaxable ar	nount is:	-	,		
Not over \$500,000	209	6 of the amount on line 1	e.	-	′ -		
Over \$500,000 but not over \$1,000,	000 \$10	0,000 plus 15% of the ex	cess over \$500,000.		-		
Over \$1,000,000 but not over \$1,50	0,000 \$17	5,000 plus 10% of the ex	cess over \$1,000,000.				
Over \$1,500,000 but not over \$17,0	00,000 \$22	25,000 plus 5% of the exc	ess over \$1,500,000.				
Over \$17,000,000	\$1,	000,000.					
g Grassroots nontaxable amount (enti-	er 25% of line 1)					
h Subtract line 1g from line 1a. If zero	h Subtract line 1g from line 1a. If zero or less, enter 0.						
i Subtract line 1f from line 1c. If zero	or less, enter -0-		. [
j If there is an amount other than zero	on either line 1	h or line 1i, did the organi	zation file Form 4720	_			
reporting section 4911 tax for this y	ear?			<u> </u>	Yes No_		
(Some organiza		r Averaging Period Unde e a section 501(h) election	, ,	late all of the five			
		e the instructions for lin	-				
	Lobbying E	xpenditures During 4-Ye	ear Averaging Period				
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(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		7/18 - 1 - 1 - 1 - 1					
(150% of line 2d, column (e))			-	,			
(1.0070 01 mio 20, 00101111 (0))				<u>.</u>			
f Grassroots lobbying expenditures							
					<u> </u>		

Schedule C (Form 990 or 990-EZ) 2010

LABORERS' INTERNATIONAL UNION OF NORTH

43-136<u>5986 Page 3</u>

	LABORERS' INTERNATIONAL	UNION OF NORTH
Schedule C (Form 990 or 990-EZ) 2010		43-136598
Part II-B Complete if the org	anization is exempt under section 50	1(c)(3) and has NOT filed Form 5768
(election under sect	tion 501(h)).	

		a)	 	b)
	Yes	No	Ame	ount
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.	ļ			
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				-
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities? If "Yes," describe in Part IV				
j Total. Add lines 1c through 1i				
a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912		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?				
art III-A Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c)(5), or s	ection	
E04/-V6\				
501(c)(6).			1	No.
30 I(C)(6).			Yes	
Were substantially all (90% or more) dues received nondeductible by members?		1		
Were substantially all (90% or more) dues received nondeductible by members?		1 2	Х	
Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "N		2 3)(5), or s	X X ection	Х
Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."		2 3)(5), or s ine 3 is a	X X ection	Х
Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes." Dues, assessments and similar amounts from members	art III-A, li	2 3)(5), or s	X X ection	3
Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Partyes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	art III-A, li	2 3)(5), or s ine 3 is a	X X ection	3
Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	art III-A, li	2 3)(5), or s ine 3 is a	X X ection	Х
Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Paryes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year	art III-A, li	2 3)(5), or s ine 3 is a	X X ection	Х
Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Int III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	art III-A, li	2 3)(5), or s ine 3 is a 1 2a 2b	X X ection	Х
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Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	art III-A, li	2 3)(5), or s ine 3 is a 1 2a 2b	X X ection	Х
Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Partyes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses for the prior year in the portion of the expenses for the prior year in the prior year in the prior year in the prior year in the prior year in the prior year in the prior year in the prior year in the prior year in the prior year in the prior year in the prior year in the prior year in the prior year in the prior year in the prior year?	art III-A, li	2 3)(5), or s ine 3 is a 1 2a 2b 2c 3	X X ection	Х
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Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses for section 162(e) dues are answered "No" or less? Did the organization make only in house lobbying and political expenditures from the prior year? Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses for the prior year?	art III-A, li	2 3)(5), or s ine 3 is a 1 2a 2b 2c 3	X X ection	Х

SCHEDULE D

Department of the Treasury

Internal Revenue Service

(Form 990)

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.

2010 Open to Public Inspection

OMB No 1545-0047

Name of the organization

LABORERS' INTERNATIONAL UNION OF NORTH AMERICA LOCAL 1104

Employer identification number 43-1365986

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 2 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified histonic 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 2d . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 7 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)(i) __ Yes In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (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 (ii) Assets included in Form 990, Part X 2 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 b Assets included in Form 990, Part X . .

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 032051

Schedule D (Form 990) 2010

LABORERS' INTERNATIONAL UNION OF NORTH

Sche	dule D (Form 990) 2010 AMERICA	LOCAL 110	4	, OH1	.011 01 1		43-3	L365986 Page 2
Pai	t III Organizations Maintaining C			torical Tr	reasures, c	or Other		
3	Using the organization's acquisition, access							
	(check all that apply):							
а	Public exhibition	c		Loan or exc	hange progra	ams		
b	Scholarly research	e		Other				
C	Preservation for future generations					·	•	
4	Provide a description of the organization's c	ollections and explai	n how th	ney further t	the organization	on's exemi	ot purpose in l	Part XIV
5	During the year, did the organization solicit of							
	to be sold to raise funds rather than to be m							Yes No
Par	t IV Escrow and Custodial Arran					"Yes" to Fo	orm 990, Part	
	reported an amount on Form 990, Pa			Ū			•	,
1a	Is the organization an agent, trustee, custod	lian or other intermed	diary for	contribution	ns or other as	sets not in	cluded	
	on Form 990, Part X?							Yes No
b	If "Yes," explain the arrangement in Part XIV		llowing 1			• • • • •		
		•	•					Amount
С	Beginning balance						1c	
d	Additions during the year						1d	
е	Distributions during the year		•				1e	· · · · · · · · · · · · · · · · · · ·
f	Ending balance		• • •			•	1f	
2a	Did the organization include an amount on F	orm 990 Part X line	212			•		Yes No
	If "Yes," explain the arrangement in Part XIV						•	
Pai			swered	"Yes" to Fo	rm 990. Part	IV line 10		· · · · · · · · · · · · · · · · · · ·
<u> </u>		(a) Current year		nor year	1			ck (e) Four years back
1a	Beginning of year balance	(a) canone you.	<u>\U/.</u>	1101 4041	(c) I wo your	o odok (d	y Timos yours be	(e) Tour Jours Buck
b	Contributions				1			
	Net investment earnings, gains, and losses					 -	-	
d	Grants or scholarships							
	Other expenditures for facilities							
·	and programs							
	Administrative expenses				 			
, g	End of year balance	<u>-</u>			 			
2	Provide the estimated percentage of the year	r and halance hold a	L		1			<u> </u>
a	Board designated or quasi-endowment	i end balance neld a	15. %					
	Permanent endowment	%						
b		% %						
2-	Are there endowment funds not in the posse	. •	ation the	st ara hald -	and administs	rad for the	05000=01:0=	
અ		sssion of the organiz	สแบท เทล	rr gre ueid s	uiu auministe	rea for the	organization	V
	by:							Yes No
	(i) unrelated organizations		• • •				•	3a(i)
	(ii) related organizations		٠.					3a(ii)
D	If "Yes" to 3a(ii), are the related organization				· · · · · · · · ·			_3b
Da	Describe in Part XIV the intended uses of the tVI Land, Buildings, and Equipn						·	
La								
	Description of investment	(a) Cost or o			t or other		umulated	(d) Book value
	Land	Dasis (IIIVesti	nem)		(other)	aepre	eciation	<u> </u>
	Land				0,000.		42 000	60,000.
	Buildings			1.1	6,647.		43,088.	73,559.
	Leasehold improvements							
	Equipment						45 050	40.050
е	Other	. I	ì	· 6	55,026.l	4	45.073.l	19,953.

Schedule D (Form 990) 2010

153,512.

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

(7) (8) (9) (10)

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

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 2. FIN 48 (ASC 740).

032053

LABORERS' INTERNATIONAL UNION OF NORTH

	dule D (Form 990) 2010 AMERICA LOCAL 1104			65986 Page
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Finan	cial St	atements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		256,759
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		284,123
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		<27,364
4	Net unrealized gains (losses) on investments	4		
5	Donated services and use of facilities	5		
6	Investment expenses	6		
7	Prior period adjustments	7		· · ·
8	Other (Describe in Part XIV.)	8		
9	Total adjustments (net). Add lines 4 through 8	9		0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		<27,364
	t XII Reconciliation of Revenue per Audited Financial Statements With Rever		r Return	<u> </u>
1	Total revenue, gains, and other support per audited financial statements		1	256,759
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		··	2307733
a	Net unrealized gains on investments 2a			
_				
Ь		 		
C	Recoveries of prior year grants			
d	Other (Describe in Part XIV.)		- 	_
е	Add lines 2a through 2d		. 2e	055 555
3	Subtract line 2e from line 1		3	256,759
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			
b	Other (Describe in Part XIV.)			
c	Add lines 4a and 4b		4c	0
_5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	256,759
Pai	t XIII Reconciliation of Expenses per Audited Financial Statements With Expe	nses	per Return	
1	Total expenses and losses per audited financial statements		1	284,123
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		"	
а	Donated services and use of facilities 2a		1 1	
b	Prior year adjustments			
c	Other losses 2c		_	
d	Other (Describe in Part XIV)		_	
e	Add lines 2a through 2d		2e	r
3	Subtract line 2e from line 1	•	3	284,123
3		•	· 3 -	204,12.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b			
Ь	Other (Describe in Part XIV.)		 	_
	Add lines 4a and 4b		4c	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	<u>.</u>	5	284,123
Pa	t XIV Supplemental Information			
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa	art IV, lin	es 1b and 2b;	Part V, line 4; Part
X, lin	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to pro	vide an	y additional in	formation.
PAI	RT X, LINE 2: THE LOCAL HAS NO TAX POSITIONS FOR WHI	CH I	T IS	
REA	ASONABLY POSSIBLE THAT THE TOTAL AMOUNTS OF UNRECOGN	IZEI	TAX BE	ENEFITS
WII	LL SIGNIFICANTLY INCREASE OR DECREASE WITHIN 12 MONT	HS C	F THE F	REPORTING
DAT	י ድ.			

SCHEDULE O (Form 990 or 990-EZ)

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

Department of the Treasury
Internal Revenue Service

Name of the organization

LABORERS' INTERNATIONAL UNION OF NORTH

Employer identification number 43-1365986

AMERICA LOCAL 1104	43-1303900
FORM 990, PART VI, SECTION A, LINE 6: MEMBERS PAY MONTH	LY DUES TO
PARTICIPATE IN THE LOCAL UNION.	
FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS ELECT TH	E MEMBERS OF THE
GOVERNING BODY.	
FORM 990, PART VI, SECTION A, LINE 7B: ELECTIONS ARE BA	SED ON THE LOCAL
UNION'S BYLAWS AND CONSTITUTION.	
FORM 990, PART VI, SECTION B, LINE 11: THE BUSINESS MAN.	
TREASURER REVIEWS THE 990 BEFORE IT IS FILED.	
FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST	
990, PAGE 1, ITEM L	
THE LOCAL USES THE MODIFIED CASH BASIS OF ACCOUNTING.	
1112 2001B 0020 1112 110211 2D 011011 211010 01 11000011 21101	
	

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 38, or 37. Related Organizations and Unrelated Partnerships ▼ See separate instructions. LABORERS' INTERNATIONAL UNION OF NORTH ▶ Attach to Form 990. AMERICA LOCAL 1104 Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

2010 Open to Public Inspection

Employer identification number

OMB No 1545-0047 Direct controlling 43-1365986 entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) End-of-year assets e Total income 9 Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) Legal domicile (state or foreign country) Primary activity Name, address, and EIN of disregarded entity Part Part

(g) Section 512(b)(13) controlled Schedule R (Form 990) 2010 Š entity? Yes × Direct controlling entity status (if section Public charity 501(c)(3)) **e** Exempt Code section Legal domicile (state or foreign country) POLITICAL ACTION COMMITTEE Primary activity LABORERS LOCAL 1104 VOLUNTARY POLITICAL FUN Name, address, and EiN of related organization 63703 CAPE GIRARDEA, MO 773 ENTERPRISE

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

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032161 12-21-10 LHA

LABORERS' INTERNATIONAL UNION OF NORTH

Schedule R (Form 990) 2010 AMERICA LOCAL 1104

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

Page 2

43-1365986

General or Percentage managing ownership partner? Percentage ownership Schedule R (Form 990) 2010 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) 3 Ξ Share of end-of-year assets Code V-UBI amount in box n 20 of Schedule J K-1 (Form 1065) y \equiv Share of total income ate allocations? Disproportion-Yes Ξ Type of entity (C corp, S corp, or trust) Share of end-of-year assets 6 (d)
(Direct controlling entity Share of total Income Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicile (state or foreign country) Ö <u>e</u> Primary activity Direct controlling entity (c)
Legal
domictle
(state or
foreign Primary activity Ð Name, address, and EIN of related organization Name, address, and EIN of related organization 032162 12-21-10 Part IV

LABORERS' INTERNATIONAL UNION OF NORTH AMERICA LOCAL 1104

Page 3

43-1365986

Schedule R (Form 990) 2010

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Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes	S S
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ns with one or more re	elated organizations listed	ın Parts II-IV?		2°
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			:	19	×
b Gift. grant. or capital contribution to other organization(s)				4	×
		•			
c Girt, grant, or capital contribution from other organization(s)	٠	:		ပ	4
d Loans or loan guarantees to or for other organization(s)		;	:	19	×
		•		,	>
Loans of loan guarantees by other organization(s)	•	: :		9	4
f Sale of assets to other organization(s)				+	×
		:	: : : : : : : : : : : : : : : : : : : :		;
g Purchase of assets from other organization(s)	-	٠		19	4
h Exchange of assets				ŧ	×
				ï	>
Lease of facilities, equipment, or other assets to other organization (s)	-				4
					1
j Lease of facilities, equipment, or other assets from other organization(s)		•	:	7	×
and and interest and an analysis of the second analysis of the second analysis of the second and an analysis of the second and an analysis of the second and an analysis of the second and an analysis of the second and an analysis of the second and an analysis of the second and an analysis of the second and an analysis of the second and an analysis of the second and	(9)404001			į	>
K Performance of services of membership of fundraising solicitations for other organization(s)	iizaiion(s)	:	•	¥	4
I Performance of services or membership or fundraising solicitations by other organization(s)	ıızatıon(s)			=	×
m Sharing of facilities, equipment, mailing lists, or other assets				1m X	
		:		╀	-
n Sharing of paid employees				t X	
				_	
Beind was and to other organization for expenses				ç	×
				2	
p Reimbursement paid by other organization for expenses				1p	×
				_	<u>,.</u>
Ather transfer of cash or property to other organization(s)				5	×
				2 .	;
r Other transfer of cash or property from other organization(s)				4	4
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete the	is line, including covered	relationships and transaction thresholds.		
3	4	3			
(a) Name of other organization	Transaction	Amount involved	(a) Method of determines		
	tyne (arr)		Devlovei toriome		
	(300 (41)				
(1)					
(4)					
(9)					
<i>Q</i>					
	1				
032163 12-21-10	77		Schedule	Schedule R (Form 990) 2010	0) 2010 0102

43-1365986 Page 4

LABORERS' INTERNATIONAL UNION OF NORTH

Schedule R (Form 990) 2010 AMERICA LOCAL 1104

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, Inne 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) (b)	(a)	(9)	9	(e)	€	(B)	ε
							1 10
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	section 50 1(c)(3) organizations?	year assets	tionate allocations?	amount in box 20	managing partner?
			Yes No			(Form 1065)	Yes No
					_		
							_
							1
					•		
							-
							_
					-		
							-
						Schedule B (Form 990) 2010	990) 2010
							^- /- ^-

0321**64** 12-21-10

LABORERS' INTERNATIONAL UNION OF NORTH Schedule R (Form 990) 2010 AMERICA LOCAL 1104 43-1365986 Page 5 Part VII | Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

Form **8868**

(Rev. January 2011)

Application for Extension of Time To File an Exempt Organization Return

ر ماران الم	
OMB No. 154	_
\6,)AN'

Internal Rev	enue Service	▶ file a	separate a	pplication for each return.			16 JAN Y
• If you a	ere filing for ar	Automatic 3-Month Extension,	complete o	only Part I and check this box			▶ X
				sion, complete only Part II (on page			
•	-	•		tomatic 3-month extension on a pre			
a corpora 8868 to Return for instruction	tion required request an exert Transfers Ans). For more	to file Form 990-T), or an addition tension of time to file any of the Associated With Certain Persona	nal (not au forms liste Il Benefit nis form, vi	ou need a 3-month automatic extensionatic) 3-month extension of time. ed in Part I or Part II with the except Contracts, which must be sent to sit www.irs.gov/efile and click on e-file original (no copies peoded).	You can ption of F	electrom 8 in pa	ronically file Form 1870, Information aper format (see
							
Part I only	·			atic 6-month extension - check this t		·	▶□
	ome tax retum		iips, rc≡mii	Cs, and trusts must use Form 7004 to	request a	ii exte	ISION OF WIN O
		s. xempt organization			Employer	r ident	ffication number
Type or print		LOCAL #1104			43-13		
		treet, and room or suite no. If a P.O. bo	x. see instru	ctions	45 15	0330	
File by the due date for	ue by the						
filing your			a foreign ad	ldress, see instructions.			
City, town or post office, state, and ZIP code. For a foreign address, see instructions. CAPE GIRARDEAU, MO 63703							
	_ CALL	GIIGUEDIAO, IN 03703					
Enter the	Return code	for the return that this application	is for (file a	a separate application for each return)		0 1
Application	on		Return	Application			Return
ls For			Code	ls For			Code
Form 990)		01	Form 990-T (corporation)			07
Form 990	-BL		02	Form 1041-A	-		08
Form 990	-EZ		03	Form 4720			09
Form 990-	-PF		04	Form 5227			10
Form 990	-T (sec 401(a	a) or 408(a) trust)	05	Form 6069			11
Form 990	-T (trust other	than above)	06	Form 8870			12
Telepho If the o If this is	rganization do s for a Group I note group, ch	37-334-7722 bes not have an office or place of Return, enter the organization's for	business in ur digit Gro f it is for pa	FAX No. > 573-334-2546 In the United States, check this box oup Exemption Number (GEN) art of the group, check this box			. If this is
				equired to file Form 990-T) extension	of time		
until for ti ►	MAY 15 he organization calendar year	, 20_12, to file the on's return for:	exempt on	ganization return for the organization of the	n named a		
2 If the	1 [*]	ered in line 1 is for less than 12 m ccounting period	onths, che	ck reason: Initial return	Final retu	irn	
3a If th	s application	is for Form 990-BL, 990-PF, 99	90-T, 4720), or 6069, enter the tentative tax	ς less an	y I	
		dits. See instructions				3a	\$
b If th	nis applicatio	n is for Form 990-PF, 990-T,	4720, o	r 6069, enter any refundable ci	edits and	_++	· · · · · ·
		ments made. Include any prior yea				3ь	\$
		· · · · · · · · · · · · · · · · · · ·		nent with this form, if required, by us	sing EFTPS		
		l Tax Payment System). See instru		• • • • • • • • • • • • • • • • • • • •	•	3c	\$
				with this Form 8868, see Form 8	3453-EO		
	nstructions	-		ROMOLO & ASSOCIAT			•
		Act Notice, see Instructions.	-	CERTIFIED PUBLIC ACCOUNT		Form	1 8868 (Rev 1-2011)