

# 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

### **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)

OMB No 1545-0047 2011 Open to Public

Form 990 (2011)

Inter	nal Revenue Service	The organization may have to use a copy of this feturn to satisfy state	reporting requi	rements	Inspection					
<u>A</u>	For the 2011 c	alendar year, or tax year beginning , and ending								
В	Check if applicable	C Name of organization LABORERS INTERNATIONAL UNION OF		D Employ	er Identification number					
П	Address change	NORTH AMERICA - LOCAL 1076								
$\bar{\sqcap}$	Name change	Doing Business As		38-	0738510					
믐	·	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telepho	ne number					
Ц	Initial return	760 JOSLYN AVENUE		248	-334-0509					
П	Terminated	City or town, state or country, and ZIP + 4			<del></del>					
$\overline{\Box}$	Amended return	PONTIAC MI 48340		G Gross rece	ipts\$ 1,325,081					
믬	Amended return	F Name and address of principal officer	<del></del>	G Gloss rece						
$\sqcup$	Application pending		H(a) Isthisag	roup return for a	rffiliates? Yes X No					
		PAUL GASSEL		Fl. ata a . a ali . da .	Yes No					
		760 JOSLYN	H(b) Are all af							
		PONTIAC MI 48340	-  " ```	, allaura iisi	(see instructions)					
	Tax-exempt status	501(c)(3) <b>X</b> 501(c) ( <b>5</b> ) <b>◄</b> (insert no ) 4947(a)(1) or 527	4							
<u>J</u>	Website: ► C	constructionlaborers1076.org	H(c) Group ex	emption numb						
ĸ	Form of organization	Corporation Trust Association X Other ► LABOR UNION L	ear of formation		M State of legal domicile MI					
F	art I Su	ımmary								
	1 Briefly de	escribe the organization's mission or most significant activities								
ø	(77777	LOCAL IS A NONPROFIT ORGANIZATION ESTALISHED TO RE	PRESENT I	TS MEME	BERS					
Š	INW	AGE AND FRINGE BENEFITS MATTERS IN THE CONSTRUCTION	N INDUSTR	Y. THE	E.					
Ē	TOCA	L'S PRIMARY AREAS OF JURISDICTION ARE OAKLAND AND								
Activities & Governance	2 Chock th	is box ▶ if the organization discontinued its operations or disposed of more than 2								
ŏ	2 Alumbas		J/O OI ILS INCL AS.	3	7					
وم دن	3 Number	of voting members of the governing body (Part VI, line 1a)		<u> </u>	0					
Ę	4 Number	of independent voting members of the governing body (Part VI, line 1b)		4	14					
ξį	5 Total nui	mber of individuals employed in calendar year 2011 (Part V, line 2a)		5						
Ac		mber of volunteers (estimate if necessary)		6	0					
	7a Total uni	.7a	0							
	b Net unre	lated business taxable income from Form 990-T, line 34		7b	0					
			Prior Ye		Current Year					
ē	8 Contribu	tions and grants (Part VIII, line 1h)	1,07	2,485	1,232,096					
Revenue	9 Program	service revenue (Part VIII, line 2g)		0	0 100					
Š	10 Investme	ent income (Part VIII-column (A) Nines 3 4 Jand 7d)	8,441	81,129						
Œ	11 Other re	venue (Part VIII, column (A), lines 5,-6d-8c, 9c, 10c, and 11e)		0,096	6,338					
	12 Total rev	renue – add lines 8 through 11 (must equal Part VIII column (A), line 12)	1,17	1,022	1,319,563					
	13 Grants a	ind similar amounts paid (Part PR column (A), lines, 123)		0	0					
		paid to or for members (Part IX, column-(A), line 4)		3,281	1,695					
Ø	45 0.1	other compensation, employee penefits (Part IX, column (A), lines 5-10)	91	0,196	967,893					
Expenses	16a Professi	onal fundraising fees (Part IX, column (A), line 11e)		0	0					
ě	b Total fur	ndraising expenses (Part IX, column (D), line 25) ▶ 0								
X	17 Other ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)	67	0,003	649,898					
		penses Add lines 13–17 (must equal Part IX, column (A), line 25)		3,480	1,619,486					
		e less expenses Subtract line 18 from line 12		2,458	-299,923					
	g 19 Revenue	e less expenses. Subtract line 16 from line 12	Beginning of Cu		End of Year					
Net Assets or	S 20 Total ac	sets (Part X, line 16)		3,197	4,220,559					
1886	E 20 Total as	bilities (Part X, line 16)		0	1,498					
Į.	21 10(a) (la)	ets or fund balances Subtract line 21 from line 20	4.53	3,197	4,219,061					
			-700	<u> </u>						
		ignature Block								
ι.	Jnder penalties of	penury, I declare that I have examined this return, including accompanying schedules and statem complete. Declaration of preparer (other than officer) is based on all information of which preparer	lents, and to the t has any knowled	ae ae	lowledge and belief, it is					
	rue, correct, and t	complete Declaration of preparer (other trial officer) is based on an information of which preparer		<del>- \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \</del>						
		the difference of the second	<del></del>							
Si	gn 🗗 (	Signature of officer Sec TRBT	١٥	Date	3-29-12					
Н	ere 📗	7,01	+5		201-10					
	Type or print name and title									
		pe preparer's name  Preparer's name	0 M 3 /26	Check	T PTIN					
Pa	id 1867	HAMIN J. SUANE // // MILLE	11 3/20	/12 self-en	nployed					
Pr	reparer Firm's name HIRZEL, JACKSON & SWAINE / P.C. Firm's EIN 38-2466659									
Us	e Only	24520 MEADOWBROOK #200								
	Firm's a	. MOUT MT 40275		Phone no	248-442-9911					
M		ss this return with the preparer shown above? (see instructions)		<del></del>	Yes No					
1410	_,	(								

For Paperwork Reduction Act Notice, see the separate instructions.

	LABORERS INTERNAT		0738510	Page 2
	tatement of Program Service heck if Schedule O contains	ce Accomplishments a response to any questi <u>on in this Pa</u>	rt III	
1 Briefly descr THE LOCA IN WAGE	tibe the organization's mission AL IS A NONPROFIT AND FRINGE BENEF	ORGANIZATION ESTALISHE ITS MATTERS IN THE CONS JURISDICTION ARE OAKLA	D TO REPRESENT ITS	THE
prior Form 9	90 or 990-EZ?	rogram services during the year which were no	ot listed on the	Yes X No
3 Did the orga services?	cribe these new services on Sched nization cease conducting, or make cribe these changes on Schedule C	significant changes in how it conducts, any pr	rogram	Yes X No
4 Describe the expenses. S	e organization's program service actection 501(c)(3) and 501(c)(4) orga	complishments for each of its three largest pro nizations and section 4947(a)(1) trusts are rec ses, and revenue, if any, for each program se	juired to report the amount of	
4a (Code LOCAL UI MATTERS	NION-SERVICES TO	.0,364 including grants of \$ ITS MEMBERSHIP IN LABOR	) (Revenue \$ RELATED	31. 31. 31.
Ab (Code	\(\( \( \tau_{1} \) \)	unallyding grouts of C	) (Revenue \$	
4b (Code	) (Expenses \$	including grants of \$	, (Nevende ¢	
4c (Code	) (Expenses \$	including grants of \$	) (Revenue \$	
	ram services (Describe in Schedule		(Payanua \$	)
(Expenses	s inclusion service expenses ►	1,410,364	(Revenue \$	
DAA				Form <b>990</b> (201

## 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,"			v
_	complete Schedule A	1	-	$\frac{\mathbf{x}}{\mathbf{x}}$
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		
J	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	İ	
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 for which 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
•	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
•	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
-	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
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	
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			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
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			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		l	
	Schedule D, Parts XI, XII, and XIII	12a	X	<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	<u> </u>	X
14a		14a		X
b				
	fundraising, business, investment, and program service activities outside the United States, or aggregate			<b> </b>
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	۱		
	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	1.0	Ì	<b></b>
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			x
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	├	├^
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	40		x
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	<del>                                     </del>	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	19		х
••	If "Yes," complete Schedule G, Part III	20a	<del>                                     </del>	X
20a		20a 20b	<del>                                     </del>	<del>  "</del>
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	_ <u> </u>	00/	<del></del>

19? Note. All Form 990 filers are required to complete Schedule O

Pŧ	art IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States	Į ;		ļ
	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			ļ
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	}		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	ļ
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		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	ļ	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			ŀ
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	ļ	
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?		ł	
	If "Yes," complete Schedule L, Part I	25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	ŀ	Į	1
	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,	l		
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled		1	l
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	ļ	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	<del> </del>	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)		İ	۱,,
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	1	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	1	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			<b></b> .
	conservation contributions? If "Yes," complete Schedule M	30	┼	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			x
	Part I	31	<del> </del>	1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			x
	complete Schedule N, Part II	32	+-	<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		x
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	╁	1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	34		x
05-	IV, and V, line 1	35a	<del> </del>	X
35a	· · · · · · · · · · · · · · · · · · ·	338	1	+
b	•	35b		x
20	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	330	+	+=
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	36	1	
27	related organization? If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30	<del>                                     </del>	<del>                                     </del>
37	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	1		1
-	Are the eigenventage annihilate annihilate a sure branche exhibitions in annihilate a recognition of the contract of the contr	i i		1

DAA

Form 990 (2011)

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			╨
		<b></b>	Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  1a. 0	-		İ
b	The first harmon of the first and the first approach	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		₹.	ĺ
_	reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements, filed for the calendar year ending with or within the year covered by this return  2a 14			l
		<b>-</b>   ₁,	X	ĺ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	-	
2-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	3a		х
3a b	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3b		<u> </u>
4a	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  At any time during the calendar year, did the organization have an interest in, or a signature or other authority	35		
<b>4</b> a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		1	
	account)?	4a		X
h	If "Yes," enter the name of the foreign country	1		
•	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	<u> </u>	<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		<u> </u>
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	ļ	↓
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	ĺ		
	required to file Form 8282?	7c		<del> </del>
d	If "Yes," indicate the number of Forms 8282 filed during the year	┥_	1	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	-	+-
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<del> </del>	$\vdash$
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h	┼	+
h	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	<del>'''</del>		<del>                                     </del>
8	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8	1	
9	Sponsoring organizations maintaining donor advised funds.	-		1
a	Did the organization make any taxable distributions under section 4966?	9a	1	
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			$\Box$
а	Initiation fees and capital contributions included on Part VIII, line 12			1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			1
	against amounts due or received from them )	_		
12a		12a	—	┼
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	$\dashv$		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		╂	+
а	is the organization licensed to issue qualified health plans in more than one state?	13a	<del> </del>	+
	Note. See the instructions for additional information the organization must report on Schedule O		1	
ь	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  13b			
C	Enter the amount of reserves on hand  Did the agreements for indeer topping sonuces during the tax year?	14a	+	Tx
14a	A Company of the Comp	14b	+	†**

Form 990 (2011) LABORERS INTERNATIONAL UNION OF 38-0738510 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 Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 0 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? 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 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X The governing body? 8a X 8b Each committee with authority to act on behalf of the governing body? 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this was done 13 X 13 Did the organization have a written whistleblower policy? X Did the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X The organization's CEO, Executive Director, or top management official 15a X b Other officers or key employees of the organization 15b 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 X with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the

#### Section C. Disclosure

- List the states with which a copy of this Form 990 is required to be filed None
- Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply

Own website Another's website X Upon request

organization's exempt status with respect to such arrangements?

- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization > PAUL GASSEL 760 JOSLYN AVENUE

PONTIAC

MI 48340

248-334-0509

16b

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

(A) Name and Title	(B) Average hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the	
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-WISC)	organization and related organizations	
(1)WILLIAM BASS	40.00	x		x			i	123,069	0	64,195	
BUSINESS MANAGER (2) PAUL GASSEL	40.00	<u> </u>		4				123,009	0	04,193	
SECRETARY TREASURER	40.00	x		X				123,069	0	64,195	
(3) JASON CHWALEK											
REP/REC SECRETARY	40.00	X		X		$oxed{oxed}$		96,473	0	57,037	
(4) RICARDO BRIONES REPRESENTATIVE	40.00	x						92,685	0	56,725	
(5) MICHAEL J BROWN				$\vdash$			-				
REPRESENTATIVE	40.00	X				'		90,385	0	56,985	
(6) DANIEL WATSON											
E-BOARD	1.00	X			_	<u> </u>		2,450	0	0	
(7) STEVEN LAMARBE PRESIDENT	1.00	x		x				2,450	0	0	
(8) STEVEN SOBCZAK											
E-BOARD	1.00	X	ļ			<u> </u>	<u> </u>	2,450	0	0	
(9) MICHAEL BUGAJSKI AUDITOR	1.00	x						2,125	0	0	
(10)DAVID SANDUSKY								350	0	0	
AUDITOR (11) SCOTT POWELL	1.00	X	├—	$\vdash$	$\vdash$	+-	$\vdash$	330			
E-BOARD	1.00	x						325	0	0	
(12) SAMUEL LOMBARD	1 00	7,						325	0	O	
AUDITOR	1.00	X	$\vdash$	-	$\vdash$	+	├-	323	0		
(13)											
(14)											

Part VII Section A. Officers  (A) Name and title		(B) (C)  Average hours per (do not check more than box, unless person is be officer and a director/tru					than c	ne an ee)	(D) Reportable compensation from the organization	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the		
		related organizations in Schedule O)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and refated organizations		
(15)													
(16)			-				<u> </u>						
(17)			<del> </del>										
(18)				_									
(19)							-	$\vdash$					
(20)		<u> </u>	<del> </del>			┢	-	ļ					
(21)			-	-		<u> </u>	_	_					
(22)			├-			-	-	_			, , , , , , , , , , , , , , , , , , ,		
(23)			┼	_			$\vdash$						
(24)			-			_	-						
(25)			┼-			<u> </u>	-	ļ. [					
	Sub total		<u> </u>				<u></u>	Ļ	536,156		299,137		
1b c	Sub-total  Total from continuation she	ets to Part VII,	Sect	ion <i>i</i>	A			<b>&gt;</b>					
<u>d</u>	Total (add lines 1b and 1c)  Total number of individuals (in reportable compensation from	-		_	thos	se lis	sted a	abov	536,156 we) who received more than		299,137		
						4					Yes No		
3	Did the organization list any for employee on line 1a? If "Yes, For any individual listed on lin	" complete Sche	dule	J for	suc	h in	divid	ual			3 X		
•	organization and related orga	nizations greate	r thai	n \$1	50,0	00?	If "Ye	es,"	complete Schedule J for su	ch	4 X		
5	Did any person listed on line for services rendered to the o									r individual	5 X		
Sec 1	ction B. Independent Contrac Complete this table for your fi		enc	atod	ındo	nen	dent	cont	tractors that received more	than \$100,000 of			
	compensation from the organ	(A) d business address	comp	ensa	ation	for	the c	alen	ndar year ending with or with	nin the organization's tax ye (B)  tion of services	(C) Compensation		
	Name and	d business address						+	Descrip	ouon of services	Compensation		
								╁					
						_		╁					
								+					
								+					
	Total number of independent	contractors (inc	ludin	g bu	t not	limi	ted to	the	ose listed above) who		/		
DAA	received more than \$100,000			-						0	Form <b>990</b> (2011)		

Pa	rt V	II Statement of	of Reve	nue						
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513 or 514
इइ	1a	Federated campaigns	s	1a	***************************************					
P P		Membership dues	_	1b	1.	232,096				
Ę,ċ		Fundraising events		1c						ĺ
₩.		Related organizations	s	1d						
s, C		Government grants (contributi		1e						
ion		All other contributions, gifts, gi			_					
the		and similar amounts not include		1f						
	g	Noncash contributions include	ed in lines 1a	ıf :	\$					
Co	h	Total. Add lines 1a-1	1f			▶	1,232,096			
Program Service Revenue   Contributions, Gifts, Grants   Amounts			•			Busn Code				
ven	2a									
8	b									
ζį	С									
Sel	d									<u> </u>
Ta III	е									
ē.	f	All other program ser		nue					· · · · · · · · · · · · · · · · · · ·	
4	_ 9							······································		<del></del>
	3	Investment income (i		dıvıder	ids, intere	st,				
		and other similar ame				•	65,147			65,147
	4	Income from investm	ent of tax	-exem	pt bond p	roceeds -		-		
	5	Royalties	() D!			<u> </u>			······································	
	٥.	0	(ı) Real		(11) F	ersonal				
	6a	Gross rents								
	b	Less rental exps Rental inc or (loss)	· · · · · · · · · · · · · · · · · · ·							
	d	Net rental income or	(lose)							
		Gross amount from	(i) Securities	·	(11)	Other				
		sales of assets other than inventory	(7,		† <del>`</del>	21,500				
	ь	Less cost or other								
		basis & sales exps				5,518				
	С	Gain or (loss)		•		15,982				
	d	Net gain or (loss)				<b></b>	15,982	15,982		
ds	8a	Gross income from fund	Iraising eve	ents					,	
une		(not including \$								1
e Ve		of contributions reported	d on line 1c	)						
<u>ت</u> ح		See Part IV, line 18		а						
Other Rever	ь	Less direct expense	s	b						
J		Net income or (loss)			events					
	9a	Gross income from gam	nng activitie	es						
		See Part IV, line 19		а						
		Less direct expense		b						
	•	Net income or (loss)	-	-	tivities					
	10a	Gross sales of inven	•							
	١.	returns and allowand		a		·				
	ı	Less cost of goods		b						
	ြင	Net income or (loss)  Miscellaneou		es or in	ventory	Busn Code			<del>, , , , , , , , , , , , , , , , , , , </del>	
	11a		~ 1/0A91IG6	<u> </u>	<u>.</u>	, Duair Coue	6,338			6,338
	11a b	MISCELLANEOUS					0,338			1 0,330
	C									1
	d	All other revenue							-	1
	e	Total. Add lines 11a	-11d			•	6,338			
	12	Total revenue. See		ns		•	1,319,563		(	71,485
_										

### 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)

	Check if Schedule O contains a response t	o any question in this Part I	x		
- Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	Grants and other assistance to governments and			801111111111111111111111111111111111111	
	organizations in the U.S. See Part IV, line 21				
	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22			1	
			<del></del>		
3	Grants and other assistance to governments,			1	
	organizations, and individuals outside the U.S. See Part IV. lines 15 and 16				
		1,695	1,695		
4	Benefits paid to or for members	1,095	1,095		
5	Compensation of current officers, directors,	531,091	428,975	102,116	
•	trustees, and key employees	331,091	420,913	102,110	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	40 401	44 101	5,300	
7	Other salaries and wages	49,481	44,181	3,300	
8	Pension plan accruals and contributions (include	275 (26	222 404	40 145	
	section 401(k) and 403(b) employer contributions)	275,636	233,491	42,145	
9	Other employee benefits	61,209	51,850	9,359 7,718	
10	Payroll taxes	50,476	42,758	1,118	
11	Fees for services (non-employees)				
а	Management	2 407	0.105		
b	Legal	2,187	2,187	10 (50	
С	Accounting	19,653		19,653	
	Lobbying				
е	Professional fundraising services See Part IV, line 17			-	
f	Investment management fees				
g	Other				
12	Advertising and promotion		· · · · · · · · · · · · · · · · · · ·		
13	Office expenses				
14	Information technology				
15	Royalties			1 0 10	
16	Occupancy	38,855	36,912	1,943	<del></del>
17	Travel	48,176	40,810	7,366	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				<del></del>
19	Conferences, conventions, and meetings	13,186	13,186		
20	Interest				<del></del>
21	Payments to affiliates	232,644	232,644		
22	Depreciation, depletion, and amortization	58,604	55,674	2,930	
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If	1		1	
	line 24e amount exceeds 10% of line 25, column			1	
	(A) amount, list line 24e expenses on Schedule O)				
а	MEMBER SOCIAL FUNCTIONS	107,838	107,838		
b	OFFICE EXPENSE	38,730	36,795	1,935	
C	BUSINESS AGENT EXPENSES	21,185	21,185		
d	TELEPHONE	18,029	17,128	901	
-	All other expenses	50,811	43,055	7,756	
25		1,619,486	1,410,364	209,122	0
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here ▶ if				
	following SOP 98-2 (ASC 958-720)				
DAA					Form <b>990</b> (2011)

**Balance Sheet** (B) (A) Beginning of year End of year 1,176,332 732,445 Cash-non-interest bearing 3,053,184 2 2,290,716 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 680,343 10a other basis Complete Part VI of Schedule D 400,341 210,278 280,002 10b b Less accumulated depreciation 537,290 473,509 11 Investments—publicly traded securities 12 Investments—other securities See Part IV, line 11 12 13 Investments—program-related. See Part IV, line 11 13 14 14 Intangible assets 15 Other assets See Part IV, line 11 15 4,533,197 4,220,559 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 17 Accounts payable and accrued expenses 18 Grants payable 18 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key Liabilities employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X , 498 of Schedule D 0 498 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ X and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 4,533,197 4,219,061 Unrestricted net assets Temporarily restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 4,533,197 4,219,061 Total net assets or fund balances 4,533,197 4,220,559 Total liabilities and net assets/fund balances

Form 990 (2011)

m 990 (2011) LABORERS INTERNATIONAL UNION OF 38-0738510 art XI Reconciliation of Net Assets		·		ge <b>12</b>
Check if Schedule O contains a response to any question in this Part XI				
Total revenue (must equal Part VIII, column (A), line 12)	1	1,31		
Total expenses (must equal Part IX, column (A), line 25)	2	$\frac{1,61}{2}$		
Revenue less expenses Subtract line 2 from line 1	3		99,9	
Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,53		
Other changes in net assets or fund balances (explain in Schedule O)	5		14,2	<u>213</u>
Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,				
column (B))	6	4,2	19,	061
Part XII Financial Statements and Reporting				
Check if Schedule O contains a response to any question in this Part XII			,	
		ρ	Yes	No
Accounting method used to prepare the Form 990 🔀 Cash 🗌 Accrual 📗 Other		l l	1	
If the organization changed its method of accounting from a prior year or checked "Other," explain in				
Schedule O				
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	<u> </u>
c 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	<u> </u>
If the organization changed either its oversight process or selection process during the tax year, explain in				1
Schedule O				
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		1		
issued on a separate basis, consolidated basis, or both				
X Separate basis Consolidated basis Both consolidated and separate basis				
As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			1	
the Single Audit Act and OMB Circular A-133?		3a	ļ	X
b if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			1	
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

SCHEDULE C (Form 990 or 990-EZ) **Political Campaign and Lobbying Activities** 

For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

2011 Open to Public

OMB No 1545-0047

➤ See separate instructions. Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of organization

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

LABORERS INTERNATIONAL UNION OF

• 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 35c (Proxy Tax), then

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

	NORTH AMERICA - LOCAL			38-07385	
Pai	t I-A Complete if the organization is exem	pt under section 501(c)	or is a sectio	n 527 organizatio	n
1	Provide a description of the organization's direct and indirect	ct political campaign activities i	n Part IV		
2	Political expenditures			▶ \$	
3	Volunteer hours				
Pai	t I-B Complete if the organization is exem	pt under section 501(c)	(3).		
1	Enter the amount of any excise tax incurred by the organization	ition under section 4955		▶ \$	
2	Enter the amount of any excise tax incurred by organization	managers under section 4955	5	▶ \$	
3	If the organization incurred a section 4955 tax, did it file For	m 4720 for this year?			Yes No
4a	Was a correction made?				Yes No
<u>b</u>	If "Yes," describe in Part IV				
Pa	rt I-C Complete if the organization is exem	pt under section 501(c)	, except secti	on 501(c)(3).	
1	Enter the amount directly expended by the filing organization	on for section 527 exempt func	tion		
	activities			▶ \$	
2	Enter the amount of the filing organization's funds contribut	ed to other organizations for se	ection		
	527 exempt function activities			▶ \$	
3	Total exempt function expenditures Add lines 1 and 2 Enter	er here and on Form 1120-POI	<b>-</b> ,		
	line 17b			<b>▶</b> \$	
4	Did the filing organization file Form 1120-POL for this year	?			Yes No
5	Enter the names, addresses and employer identification nu	mber (EIN) of all section 527 p	olitical organizatio	ns to which the filing	
	organization made payments. For each organization listed,	enter the amount paid from th	e filing organizatio	n's funds Also enter	
	the amount of political contributions received that were pro-				
	as a separate segregated fund or a political action committ	ee (PAC) If additional space is	s needed, provide	information in Part IV	
	(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)					
(3)					
			_		
(4)					
• •					
(5)					
1-7					
(6)					
14/					
Ear B		· · · · · · · · · · · · · · · · · · ·	<u> </u>	Schodule (	(Form 900 or 900 E7) 2011

Schedule C (Form 9	990 or 990-EZ) 2011 LABOR	ERS INTERNA	ATIONAL UNIC	ON OF	38-0738510	Page <b>2</b>			
Part II-A	Complete if the organ section 501(h)).	ization is exemp	t under section 5	01(c)(3) and	filed Form 5768 (e	lection under			
A Check		tion belongs to an	affiliated group (ar	nd list in Part	IV each affiliated g	roup member's			
	name, address, EIN								
B Check	▶ ☐ if the filing organization	tion checked box	A and "limited cont	rol" provisior	is apply.				
	Limits on Lo (The term "expenditures"	bbying Expendit			(a) Filing organization's totals	(b) Affiliated group totals			
1a Total lob	bying expenditures to influence								
	bying expenditures to influence		:	Ī					
	obying expenditures (add lines 1a	-	, <b>c</b> .	[					
d Other ex	cempt purpose expenditures	•		Γ					
	empt purpose expenditures (add	lines 1c and 1d)		[					
	g nontaxable amount. Enter the	·	ving table in both	Γ					
columns									
If the amo	unt on line 1e, column (a) or (b) is:	The lobbying nontaxal	ble amount is:						
Not over \$	500,000	20% of the amount on it	ne 1e						
Over \$500	,000 but not over \$1,000,000	\$100,000 plus 15% of the	ne excess over \$500,000			1			
Over \$1,00	00,000 but not over \$1,500,000	\$175,000 plus 10% of the	ne excess over \$1,000,000						
Over \$1,50	00,000 but not over \$17,000,000	\$225,000 plus 5% of the	e excess over \$1,500,000						
Over \$17,0	000,000	\$1,000,000							
g Grassro	ots nontaxable amount (enter 25	L							
h Subtrac	t line 1g from line 1a If zero or le	ess, enter -0-		L	<u></u>	<u> </u>			
i Subtrac	t line 1f from line 1c If zero or le	ss, enter -0-		Ĺ		<u> </u>			
-	is an amount other than zero on g section 4911 tax for this year?	either line 1h or line 1	i, did the organization f	ile Form 4720		Yes No			
		nat made a section elow. See the ins	tructions for line	do not hav s 2a throug	e to complete all o h 2f on page 4.)	f the five			
	Lol	bying Expenditu	res During 4-Yea	r Averaging	Period				
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total			
2a Lobbyin	g nontaxable amount								
•	ng ceiling amount of line 2a, column(e))								
c Total lo	bbying expenditures								
d Grassro	oots nontaxable amount								
	oots ceiling amount of line 2d, column (e))								

Schedule C (Form 990 or 990-EZ) 2011

f Grassroots lobbying expenditures

Schedule C (Form 990 or	990-EZ) 2011 LABORERS INTERNATIONAL UNION OF 38-073	<u>8510</u>			F	2 <sub>age</sub> 3
	Complete if the organization is exempt under section 501(c)(3) and has NOT file election under section 501(h)).		า 5768			
For each "Ves" re	esponse to lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)		
of the lobbying a		s No		Amou	ınt	
legislation, in	ear, did the filing organization attempt to influence foreign, national, state or local including any attempt to influence public opinion on a legislative matter or through the use of.					
	management (include compensation in expenses reported on lines 1c through 1i)?		İ			
c Media advert		+				
=	nembers, legislators, or the public?		<del> </del>			
	or published or broadcast statements?	_	<del></del>			
	ner organizations for lobbying purposes?	<del></del> -	<b></b>			
-	ct with legislators, their staffs, government officials, or a legislative body?		<b></b>			
h Rallies, dem	onstrations, seminars, conventions, speeches, lectures, or any similar means?		<del></del>			
i Other activiti	es?					
•	nes 1c through 1ı	1	<u> </u>			
	ities in line 1 cause the organization to be not described in section 501(c)(3)?		ł			
	er the amount of any tax incurred under section 4912					
	er the amount of any tax incurred by organization managers under section 4912					
	rganization incurred a section 4912 tax, did it file Form 4720 for this year?		<u> </u>			
	Complete if the organization is exempt under section 501(c)(4), section 501(c)(5	), or s	ection			
	501(c)(6).				F	
			1		Yes	No
	intially all (90% or more) dues received nondeductible by members?			1	X	-
	nization make only in-house lobbying expenditures of \$2,000 or less?		1	2	Х	37
3 Did the orga	nization agree to carry over lobbying and political expenditures from the prior year?			3_		X
	Complete if the organization is exempt under section 501(c)(4), section 501(c)(5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR ( answered "Yes."			lin	e 3, i	s 
	sments and similar amounts from members	1	<del> </del>			
	(e) nondeductible lobbying and political expenditures (do not include amounts of penses for which the section 527(f) tax was paid).					
a Current year		2a				
b Carryover fro	om last year	2b				
c Total		2c	<u> </u>			_
3 Aggregate a	mount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	<u> </u>			
	ere sent and the amount on line 2c exceeds the amount on line 3, what portion of the		1			
excess does	s the organization agree to carryover to the reasonable estimate of nondeductible lobbying	I	]			
	expenditure next year?	4				
	ount of lobbying and political expenditures (see instructions)	5				
	Supplemental Information					

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, Part II-A, and Part II-B, line

1 Also, complete this part for any additional information

Schedule C (Form 990 or 990-EZ) 2011 LABORERS INTERNATIONAL UNION OF 38-0738510

Page 4

Part IV Supplemental Information (continued)

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate Instructions.

OMB No 1545-0047

2011

Open to Public

Internal Revenue Service Inspection Employer identification number Name of the organization LABORERS INTERNATIONAL UNION OF 38-0738510 NORTH AMERICA - LOCAL 1076 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. (b) Funds and other accounts (a) Donor advised funds Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor 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? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat 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 2b b Total acreage restricted by conservation easements 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 vear ▶ 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 (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

3a(ii) (ii) related organizations 3b b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

Part VI Land, Buildings, and				
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		52,769		52,769
b Buildings		311,186	257,991	53,195
c Leasehold improvements		110	100 040	20 400
d Equipment		140,342	109,843	30,499
e Other		176,046	32,507	143,539
Total. Add lines 1a through 1e (Column (d)	must equal Form 990, Part X, colu	ımn (B) line 10(c) )	<b>&gt;</b>	280,002

Schedule D (Form 990) 2011

Schedule D (F	orm 990) 2011 LABORERS INTERNATIONA	L UNION OF	38-0738510	Page 3
Part VII	Investments—Other Securities. See Form 990	), Part X, line 12.		
	(a) Description of security or category	(b) Book value	(c) Method of	valuation
	(including name of security)	ļ	Cost or end-of-year	market value
(1) Financial	denvatives			
	eld equity interests			
(3) Other	5.5 5 4 a,		·····	
(A)				·
				<del></del>
(B)			· · · · · · · · · · · · · · · · · · ·	
(C)				
(D)				
(E)				<del></del>
(F)				
(G)				
(H)				
(l)				
Total. (Colum	in (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments—Program Related. See Form 99	90, Part X, line 13.		
	(a) Description of investment type	(b) Book value	(c) Method of	valuation
		1	Cost or end-of-yea	r market value
(1)	·			
(1)		-		
(2)		<del></del>	<del></del>	
(3)				
(4)		<del></del>		
(5)				
_(6)				
(7)				·
(8)				
(9)				
(10)				
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets. See Form 990, Part X, line 15			
<del></del>	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)			· · · · · · · · · · · · · · · · · · ·	
(5)				
(6)	<u> </u>			
_(7)				····
(8)				
(9)				
(10)				
Total. (Colun	nn (b) must equal Form 990, Part X, col (B) line 15)		<u>_</u>	
Part X	Other Liabilities. See Form 990, Part X, line 2	5		
1.	(a) Description of liability	(b) Book value		
	I income taxes			
	OYEE WITHHOLDINGS	1,498		
			1	
(3)			1	
(4)		+	1	
(5)			1	
(6)		<del>- </del>	-	
_(7)				
(8)			4	
(9)			1	
(10)			_	
(11)				
	mn (b) must equal Form 990, Part X, col (B) line 25)	1,498		
	SC 740) Enginete. In Part XIV provide the text of the footnote	<del> </del>		2

Sche	dule D (Form 990) 2011 LABORERS INTERNATIONAL UN	NION OF	38-0738510		Page <b>4</b>
Pa	Reconciliation of Change in Net Assets from Form	990 to Audited	Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	1,319,563
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	1,619,486
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	-299,923
4	Net unrealized gains (losses) on investments			4	-14,213
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Pnor period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4 through 8			9	-14,213
10	Excess or (deficit) for the year per audited financial statements. Combine line	es 3 and 9		10	-314,136
Pa	art XII Reconciliation of Revenue per Audited Financial S	tatements With	Revenue per Retu	rn	<del></del>
1	Total revenue, gains, and other support per audited financial statements		ļ	1	1,305,350
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			1	
а	Net unrealized gains on investments	2a	-14,213	- 1	
b	Donated services and use of facilities	2b		- 1	
С	Recoveries of prior year grants	2c		1	
d	Other (Describe in Part XIV)	2d		1	
е	Add lines 2a through 2d		لسا	2e	-14,213
3	Subtract line 2e from line 1			3	1,319,563
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		+	
b	Other (Describe in Part XIV.)	4b			
С	Add lines 4a and 4b		<u> </u>	4c	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12		<del> </del>	5	1,319,563
P	art XIII Reconciliation of Expenses per Audited Financial	Statements Wi	th Expenses per Re	<u>eturn</u>	
1	Total expenses and losses per audited financial statements		ļ	1	1,619,486
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			1	
а	Donated services and use of facilities	2a		1	
b	Prior year adjustments	2b		1	
С	Other losses	2c			
d	Other (Describe in Part XIV )	2d		1	
е	Add lines 2a through 2d		<u></u>	20	1 (10 10)
3	Subtract line 2e from line 1	1 1	<u> </u> ,	3	1,619,486
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			- 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1	
b	Other (Describe in Part XIV )	4b		- {	

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

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

1,619,486

c Add lines 4a and 4b

Part XIV Supplemental Information

Schedule D (Form 990) 2011 LABORERS INTERNATIONAL UNION OF 38-0738510

Page 5

. . . . . .

Part XIV Supplemental Information (continued)

SCHEDULE J (Form 990)

**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.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Part I

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL 1076

Questions Regarding Compensation

Employer Identification number 38-0738510

Yes No 1a 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 1b 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 Indicate which, if any, of the following the filing organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director Explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee 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. a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III 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 a The organization? 5a b Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of a The organization? 6a b Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III

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

Regulations section 53 4958-6(c)?

payments not described in lines 5 and 6? If "Yes," describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

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

Schedule J (Form 990) 2011

7

8

LABORERS INTERNATIONAL UNION OF

Schedule J (Form 990) 2011 Part II

4693

38-0738510

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, Section A, line 1a, applicable column (D) and (E) amounts for that individual Note. The sum of columns (B)(i)—(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E)	(B) Breakdown	(B) Breakdown of W-2 and/or 1099-MISC compensation	compensation	(C) Retirement and	(D) Nontaxable		(F) Compensation
(А) Мате	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)(ı)(a)	reported as deferred in prior Form 990
WILLIAM BASS	(123,069	0 0	0 0	64,195	0	187,264	0 0
PAUL GASSEL	123,06			64,19	0 0	187,26	0 0
JASON CHWALER	(ii) 96,473			57,03		153,51	000
	(E)						
	(E)						
	(e)						
	3						
	(E) (E)						
0,000	(E)						
	(1)						
	(n)						
	(n)						
	(n)						
	(ii)						
	(n)						
						S	Schedule J (Form 990) 2011

LABORERS INTERNATIONAL UNION OF

Schedule J (Form 990) 2011

4693

Part III Supplemental Information
Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II.
Also complete this part for any additional information.

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.

2011 Open to Public Inspection

OMB No 1545-0047

Internal Revenue Service
Name of the organization

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL 1076

Employer identification number 38-0738510

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
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 MAKE AVAILABLE FOR PUBLIC INSPECTION ITS FINANCIAL STATEMENT OR GOVERNING DOCUMENTS, OTHER THAN THOSE REQUIRED BY THE DEPARTMENT OF LABOR.

# **Depreciation and Amortization**

(Including Information on Listed Property)

OMB No 1545-0172

Department of the Treasury Internal Revenue Service

► See separate instructions. (99)

Attach to your tax return.

179

Name(s) shown on return LABORERS I				
	Name(s) shown on retu	ım I	ABORERS	I

INTERNATIONAL UNION OF NORTH AMERICA - LOCAL 1076

Identifying number 38-0738510

	HOMIT	ETHILL E	CCFEE TO 10					<del>, , , , , , , , , , , , , , , , , , , </del>	
	ss or activity to which this form relates	•							
	direct Depreciati		ante Handar Ca	-tio 470		<del></del>			
۳a	rt I Election To Expen	•	•		مامصما	sto Port			
1	Note: If you have a Maximum amount (see instruction		, complete ran	v belole you co	OHIDIC	ste rait	<u>'</u>	1	500,000
2	Total cost of section 179 property	•	e instructions)				ŀ	2	000,70,00
3	Threshold cost of section 179 prop	•	•	nstructions)				3	2,000,000
4	Reduction in limitation Subtract lin	<del>-</del>	•	· ·			ľ	4	
5	Dollar limitation for tax year. Subtract lin		•		see instr	uctions		5	
6	(a) Description			(b) Cost (business use on			Elected cost		
7	Listed property Enter the amount	from line 29			7				
8	Total elected cost of section 179 p	roperty Add amount	ts in column (c), line	es 6 and 7				8	
9	Tentative deduction Enter the sm	aller of line 5 or line	8					9	
10	Carryover of disallowed deduction	from line 13 of your	2010 Form 4562					10	
11	Business income limitation Enter	the smaller of busine	ess income (not les	s than zero) or line	5 (see	instruction	ns)	11	
12	Section 179 expense deduction A	dd lines 9 and 10, bi	ut do not enter more	e than line 11				12	
13	Carryover of disallowed deduction				13				
	: Do not use Part II or Part III belov								
Pa	rt II Special Depreciat					lude liste	ed prope	rty)(	See instructions)
14	Special depreciation allowance for		other than listed pro	perty) placed in ser	vice				
	during the tax year (see instruction	-						14	
15	Property subject to section 168(f)	•						15	E0 E22
16	Other depreciation (including ACF			-t-> /O it				16	50,533
Pa	rt III MACRS Depreciat	ion (Do not incit	ude listed prope Secti		Ction	5.)			
4.7	MACDS deductions for coasts als			<del></del>				17	8,072
17	MACRS deductions for assets pla							1/	0,012
18	If you are electing to group any assets place	Assets Placed in Se	rvice During 2011	Tax Year Using th	e Gen	eral Depr	eciation S	vstem	
		(b) Month and year	(c) Basis for deprec		T		I	<u></u>	
	(a) Classification of property	placed in service	(business/investment only-see instruction	use	(e) (	Convention	(f) Meth	od	(g) Depreciation deduction
19a	3-year property					-			
b		1			1				
С	7-year property								
	10-year property								
	15-year property								
f	20-year property	]			<u> </u>				
g	•			25 yrs			S/L		1
h	Residential rental			27 5 yrs		MM	S/L		1-1-
	property	ļ <u>-</u>		27 5 yrs	ļ	MM	S/L		
i	Nonresidential real			39 yrs	<u> </u>	MM	S/L		
	property	<u> </u>	<u></u>		<u> </u>	MM	S/L		·
	Section C—As	sets Placed in Serv	ice During 2011 T	ax Year Using the	Alterr	ative Dep			n
<u> 20a</u>	Class life	_					S/L		
<u>b</u>	12-year			12 yrs	+		S/L		
_	40-year	<u> </u>	1	40 yrs		MM	S/L		<u> </u>
	art IV Summary (See ins								<del></del>
21	Listed property Enter amount fro				<u> </u>			21	
22	Total. Add amounts from line 12,					nter here			58,605
	and on the appropriate lines of you				15	Τ		22	36,003
23	For assets shown above and place		tne current year, ei	nter the	22	1			
_	portion of the basis attributable to		wetlene		23	<u> </u>			Form 4562 (2011)
	DODOBNOSE MARIATION AND BIRMING		TIFATIG						