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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

Open to Public

Department of the Treasury Internal Revenue Service

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

A	For the	2012 cale	endar year, or tax year b	peginning		. 2012. an	d ending	<u> </u>	-	, 20			
В		applicable	C Name of organization U		ommercial Workers I				D Employ	er identification n	umber		
$\bar{\Box}$		change	Doing Business As	inted i ood & Ci	onuner clai Workers	Ollion, Lo	Cai 320						
\vdash		•	Number and street (or P	O box if mail is no	it delivered to street add	rocc)	Room/suite		E Telepho	05-0227658			
님	Name c	•			t delivered to sileet addi	(533)	noonvaule		ETelepho				
님	Initial re		278 Silver Spring Stree			401-861-0300	 						
	Termina		City, town or post office, state, and ZIP code										
닏		ed return	Providence, RI 02904 G Gross receipts \$ 6,529,12										
Ш	Applicat	tion pending	F Name and address of pri		avid P. Fleming, Pres	sident				for affiliates? 📙 Yes			
_			278 Silver Spring Stree					, , ,		ncluded? 🔲 Yes			
<u> </u>		mpt status	501(c)(3)	✓ 501(c) (5) ◀ (insert no) 📙 4947	(a)(1) or	527	If "N	o," attach a	list (see instruction	ons)		
J	Website		w328.org					H(c) Group	exemption	number ►			
K			Corporation Trust	Association	Other ▶	L Year	of formation	1937	M State	of legal domicile	RI		
	art i	Summ											
	1	Briefly de	escribe the organization	n's mission or	most significant ac	ctivities:	United Fo	od & Com	mercial V	Vorkers Union,			
ø		Local 328	is a membership orga	nization for the	purpose of collectiv	e bargain	ing.						
auc			*		*******								
Ĕ													
IUN 2 0 2013 Activities 2 Governance	2	Check th	ıs box ▶ 🗌 ıf the orga	nization discoi	ntınued its operatıo	ns or disp	posed of r	nore than	25% of	its net assets.			
(TO	3	Number	of voting members of	the governing	body (Part VI, line 1	la)			3		25		
\	4	Number	of independent voting	members of tl	ne governing body	(Part VI, I	ıne 1b)		4		13		
eğ	5	Total nur	nber of individuals em	ployed in cale	ndar year 2012 (Pai	rt V, line 2	2a)		5		22		
ಉಕ್ಕ	6	Total nun	nber of volunteers (est	timate if neces	sary)				6		0		
z^{\bullet}	7a	Total unr	elated business reven	ue from Part-V	III, column (C), line	127 .			7a		0		
\equiv	b		ated business taxable						7b	····			
				1		5, 11		Pnor Ye		Current Ye			
	8	Contribut	tions and grants (Part	VIII. line ith).		181							
岩	9	Program	service revenue (Part	VIII. line 201M	AY 2 2 2013	. J.J.			,678,440		5,865,439		
Z	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)					· ·	164,705						
ďα	11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)					1,298			165,245		
SCAMMED Revenue	12		enue—add lines 8 throi				. 12)				0 000		
· -	13								,844,443		5,030,684 15,000		
	 Grants and similar amounts paid (Part IX, column (A), lines 1–3) Benefits paid to or for members (Part IX, column (A), line 4) 						•	15,000			<u> 15,000</u>		
	15		other compensation, er				10)		500 504				
Expenses	16a		onal fundraising fees (F			y, iii les 5-	-10)		,682,594		<u>2,821,004</u>		
Je J	b		draising expenses (Pa				· ·						
ă	17		penses (Part IX, colum										
	18								,006,476		3,025,857		
	19		enses. Add lines 13–1				·		,704,070		5,861 <u>,861</u>		
		nevenue	less expenses. Subtra	act line 18 from	1 line 12				140,373	F1 -4 V-	168,823		
sets or lances	20	Total as-	oto (Dort V. line 40)				Deg.	nning of Cu		End of Ye			
Asse Bala	21		ets (Part X, line 16)				· ·	· 5	,524,620		5,886,89 <u>5</u>		
Net Asse Fund Bal	22		ilities (Part X, line 26)				· ·		178,601		<u> 178,589</u>		
	art II		ts or fund balances. S	ubtract line 21	from line 20 .	<u> </u>		5	,346,019		5,708,30 <u>6</u>		
_	_		ure Block										
tru	ider pena e. correc	ities of perjui	ry, I declare that I have examete Declaration of preparer	nined this return, is (other than officer)	ncluding accompanying:	schedules a	ind statemen	ts, and to the	ne best of m	ny knowledge and	belief, it is		
_		N	1 1 1 10 10	77-			proparer ria.	- T					
Sig		Sugar	ature of officer	Strug									
He	-	Signa		' . [^				Dat	ں راے "	1112			
пе	re	<u>U</u>	avid P. Flen	ring; Ci	<u>resident</u>				<u> </u>	113			
_		1 1	or print name and title	- - 1		//	1						
Pa	Paid Propage s name Propage s signature Propage s signature Date Date Check I if No. 1109 (2)												
Pr	epare	r KUKA	11 (NY) / N · / / ///	MIN KIL	zywal	JUXAM	الزائر مسمع	בונט	self-emp	loyed PUI	1042		
Us	Use Only Firm's name > Kahn, Lituin, Kimto-t Vo., Lite Firm's EIN > 15-0404384												
		Firm's a	ddress ▶ 957 /	MA	main 8+,	MINI	alnce.	Pho	ne no	1-274-	2001		
Ma	y the IF	S discuss	this return with the p	reparer shown	above? (see instru	ictions)		0290	<u>y. : .</u>	✓Yes	□ No		
For	Paperv	vork Redu	ction Act Notice, see th	e separate inst	nictions		Cat No. 1	12827 /		Form 9	190 (2012)		

	. 555 (£5.2)	Page ∠
Part	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	<u> </u>
1	,	
	United Food & Commercial Workers Union, Local 328 is a membership organization for the purpose of co	
2		ted on the
	prior Form 990 or 990-EZ?	· · · 🗌 Yes 🗹 No
_	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any services?	
	If "Yes," describe these changes on Schedule O.	· · · Tyes I No
4		m services, as measured by
-	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of gran	ts and allocations to others.
	the total expenses, and revenue, if any, for each program service reported.	
4a	/ / / / / / / / / / / / / / / / / / / /	\$)
	United Food & Commercial Workers Union, Local 328 is a membership organization for the purpose of co	Ilective bargaining.
		·
		•••••
46	/Code: \/Command	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)

4c	Code:) (Expenses \$ including grants of \$) (Revenue	\$)
	••••••	••••
		······································
4d	, , , , , , , , , , , , , , , , , , , ,	
4e	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses >	

Part	Checklist of Required Schedules		V	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		<u>, </u>
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	✓	
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? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	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		✓
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		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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		✓
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		<u> </u>
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	✓	
	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		1
	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		1
	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		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e	✓	✓
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
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 and XII is optional	12b	✓	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		1
14 a b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14a		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
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		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	- 001	10040
		Fon	n サザし	(2012)

Part	V 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		1
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	✓	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	✓	
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		√
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 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 Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	1	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? 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, Part II, III, or IV, and Part V, line 1	34	1	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	✓	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	
	The state of the s			

Form **990** (2012)

Part				
	Check if Schedule O contains a response to any question in this Part V	<u> </u>	Yes	No.
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 15		103	110
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
•	reportable gaming (gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		<u> </u>	
	Statements, filed for the calendar year ending with or within the year covered by this return 22			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	[1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	[
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 bank account, securities account, or other financial			
	account)?	4a	l	✓_
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		<u> </u>	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<u> </u>	✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<u> </u>	✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	<u> </u>	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	_	1	
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	-	✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		1	
_	gifts were not tax deductible?	6b	-	
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		1	
а	and services provided to the payor?	7a	 	-
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	,,,	\vdash	
Ū	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
ē	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8	<u> </u>	
9	Sponsoring organizations maintaining donor advised funds.		ļ	
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	
10	Section 501(c)(7) organizations. Enter:		İ	
а	Initiation fees and capital contributions included on Part VIII, line 12			
_ b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	ł		
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a b	Gross income from other sources (Do not net amounts due or paid to other sources	ł		l
_	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?	12a		\vdash
<u>.</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	Note. See the instructions for additional information the organization must report on Schedule O.			1
b	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			
C	Enter the amount of reserves on hand			<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	1	_

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and		"No"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S					
	Check if Schedule O contains a response to any question in this Part VI					
Secti	ion 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 .	1				
	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.					
b	Enter the propher of ratios manch as reliated in the death and a state of the state		l l			
2	Enter the number of voting members included in line 1a, above, who are independent . 1b 13 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	-				
	any other officer, director, trustee, or key employee?	2		1		
3	Did the organization delegate control over management duties customarily performed by or under the direct			Ť		
	supervision of officers, directors, or trustees, or key employees to a management company or other person?					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1		
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓		
6	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 one or more members of the governing body?	_				
b	one or more members of the governing body?	7a	✓	├		
U	stockholders, or persons other than the governing body?	7h		1		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	7b		-		
	the year by the following:					
а	The governing body?	8a	1			
b	Each committee with authority to act on behalf of the governing body?	8b	✓			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at					
<u> </u>	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1		
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	<u>-</u>			
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No 🗸		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	IUa		-		
	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 filling the form?	11a	1			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		✓_		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	40-				
13	Did the organization have a written whistleblower policy?	12c		_		
14	Did the organization have a written document retention and destruction policy?	14		√		
15	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?					
а	The organization's CEO, Executive Director, or top management official	15a		✓		
b	Other officers or key employees of the organization	15b		✓		
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?					
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	16a		✓		
5	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
	organization's exempt status with respect to such arrangements?	16b				
Secti	on 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 (Section	501(c)(3)s	only)		
	available for public inspection. Indicate how you made these available. Check all that apply.					
10	Own website Another's website Upon request Other (explain in Schedule O)					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict o and financial statements available to the public during the tax year.	rinter	est p	olicy,		
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the				
- -	organization: ► David P. Fleming, 278 Silver Spring Street, Providence, RI 02904 (401) 861-0300	oi trie				
			_			

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization		l	41112))	ompe	1130	Tod any carren	li omcor, ancoror	or tradition.
(4)	(0)			•	ition			(D)	(E)	(F)
(A) Name and Title	(B) Average					than o		Reportable	(E) Reportable compensation from	(r) Estimated
Name and Title	hours per					ıs both or/trusi		compensation		amount of
	week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) David P. Fleming	40+					ă				
President		1		✓			_	220,628		26,85
(2) James P. Riley	40+									
Secretary-Treasurer		✓		✓				165,405		25,55
(3) Joyce Babineau	1									
Vice President		<u> </u>						3,385		479
(4) Cheryl Bushee	40+]	
Vice President/Assistant Controller		✓		<u> </u>				86,329		24,47
(5) Robert Collins	111									
Vice President		✓		_			<u> </u>	3,345		47:
(6) Debra DiBiasio Vice President	11	1						2,960		47:
(7) Patricia Dorchester	1	}						1		
Vice President		1						3,439		47:
(8) Barbara Dunayeski	1 1									
Vice President		✓						2,960		47:
(9) Cynthia Estevao	40+									
Vice President/Director of Finance		✓	L	_	<u> </u>	<u> </u>	<u> </u>	125,055		24,34
(10) Carlos Gonzalez	40+					1			·	
Vice President		✓	<u></u>		_			102,261		22,89
(11) Suzanne Grenier	1							ļ		
Vice President		✓					<u> </u>	3,230		47
(12) Thomas Hutchinson	40+									
Vice President/Union Representative		1	<u> </u>	ļ	<u> </u>	<u> </u>	↓_	123,829		27,42
(13) Linda Imondi	40+	١.								
Vice President/Union Representative		✓	ļ	$ldsymbol{ldsymbol{ldsymbol{eta}}}$		<u> </u>	ــ	122,663		33,52
(14) Ellen Jordan	40+					1	1			
Vice President/Union Representative		✓	<u>L</u> .			<u> </u>	\perp	124,993		35,53 Form 990 (2012

Fart	Section A. Officers, Directors, Trust	tees, Key E	mpio	yees			ugnes	St C	ompensated E	impioyees (conti	nuea)
					-	C) ation					
	(A)	(B)			neck	more	e than c			(E) Reportable	(F)
	Name and title	Average hours per					is both or/trust		Reportable compensation	Reportable compensation from	Estimated amount of
		week (list any		1		1		<u> </u>	from	related	other
		hours for related	₽ĕ	Stit	Officer	Key employee	를	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
		organizations	3 E	E	4	ă	oyer oyer	8	(W-2/1099-MISC)		organization
		below dotted line)	일	르		Ş	Ë				and related
		inte)	Individual trustee or director	Institutional trustee		🍎	Highest compensated employee				organizations
				8	<u></u>		ated				
	aymond Lemieux	1									
	resident		✓		-	┢		-	3,458		475
	athrine Medeiros	ļ <u>1</u>	1		İ				2 274		475
	resident mothy Melia	40+				-			3,271		475
3	resident/Executive Assistant to the Pres.	40+	1						171,864		28,771
	- L	1	 						171,804		20,771
JI	resident	† '	1						3,189		475
	omenic Pontarelli	40+	<u> </u>	_					0,100		470
	resident/Union Representative	† <u></u>	1						123,231		30,469
	seph Renzi	40+							,		
	resident	T	✓						124,315		21,944
(21) Bo	ernard Santino	40+									
Vice P	resident/Union Representative		✓						116,391		25,097
$(22) B_0$	eatrice Shoughrow	11									
Vice P	resident		✓						3,465		475
(23) Ju	dith Snarsky	11									
Vice P	resident		✓						2,960		475
	chard Wright	11									
	resident		✓						2,960		475
	ana Yarbough	ļ <u>1</u>		'							
	resident		✓					<u> </u>	3,230		475
1b c	Sub-total	 VII Contin			•		•		1,648,816	1	333,066
d	Total (add lines 1b and 1c)	•					•		249,528		46,764
2	Total number of individuals (including but							2) 14/	1,898,344	ore than \$100 0	379,831
-	reportable compensation from the organi			1036	ilist	.cu	above	s, w	no received and	ore man proo,o	JO 01
	<u> </u>	•									Yes No
3	Did the organization list any former of									est compensate	ed and an
	employee on line 1a? If "Yes," complete	Schedule J	for s	uch	indi	ividi	ıal				3 ✓
4	For any individual listed on line 1a, is the										
	organization and related organizations	greater the	an \$1	150,	000	? /:	f "Ye	s, "	complete Sch	edule J for su	,
_	individual		• •	٠.	•		٠				4 🗸
5	Did any person listed on line 1a receive of for services rendered to the organization										
Cooki		rii res, c	отрі	eie	SCI.	ieac	ile J i	Or S	such person		5 ✓
1	on B. Independent Contractors Complete this table for your five highest		od in	don			contr	201	are that receive	d more than \$1	00 000 of
•	compensation from the organization. Rep										
	year.	on compo		J., .	J. (,		u.oa	ω, ,	our onding with		rgameation o tax
	(A)								(B)		(C)
	Name and business add	lress							Description of s	ervices	Compensation
NONE								\vdash			
								⊢			
_	· · · · · · · · · · · · · · · · · · ·					-		\vdash	·		
	· · · · · · · · · · · · · · · · · · ·		-								
2	Total number of independent contractor	ors (includir	ng bu	ıt n	ot I	lımıt	ed to	th	ose listed abo	ove) who	· · · · · · · · · · · · · · · · · · ·
	received more than \$100,000 of compens								0		

Par	t VIII							
		Check if Schedule O	contains a respo	onse to any ques	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ats sta	1a	Federated campaigns	s 1a					
ra o	b	Membership dues .						
S, G	С	Fundraising events .	1c					
Gift lar	d	Related organizations	s 1d					
ž Œ	е	Government grants (cor						
tio F	f	All other contributions, g						
혈		and similar amounts not in						
Contributions, Gifts, Grants and Other Similar Amounts	9	Noncash contributions included in lines 1a-1f: \$						
<u>5 8</u>	h	Total. Add lines 1a-1	<u>f </u>					_
an a		Marchardin David of S		Business Code				
Program Service Revenue	2a	Membership Dues & F	ees	900099	5,865,439	5,865,439		+
8	b c							_
Ž	d							+
Š	e	•••••						+
g	f	All other program ser		-				+
윤	g	Total. Add lines 2a-2	2f	▶	5,865,439			_1
	3	Investment income	(including divid	ends, interest,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		and other similar amo	•		139,298			139,298
	4	Income from investmen	•	- 1				
	5	Royalties						
			(ı) Real	(II) Personal		j		
	6a	Gross rents		,				
	b	Less: rental expenses						
	C d	Rental income or (loss) Net rental income or		•		-		
	7a	Gross amount from sales of	(i) Securities					
	'-	assets other than inventory	524,385	0	ŀ			
	ь	Less: cost or other basis						1
	1	and sales expenses .	496,777	1,661				
	С	Gain or (loss)	27,608			j		
	d	Net gain or (loss) .		▶	25,947			25,947
venue	8a	Gross income from fu	undraising					
Other Rev		of contributions reporte	ed on line 1c).					
Ę	ь	Less: direct expenses			1	İ		
_		Net income or (loss) f		events . ►				
	9a	Gross income from ga						
		See Part IV, line 19 .						
		Less: direct expenses						
		Net income or (loss) f		vities ►				
	10a	Gross sales of in returns and allowance						
	١,	Less: cost of goods s	_					
	1	Net income or (loss) f						+
		Miscellaneous F		Business Code				+
	11a				<u> </u>			1
	ь							1
	С							
	d	All other revenue .						
	ee	Total. Add lines 11a-						
	12	Total revenue. See II	nstructions	▶	6,030,684	5,865,439		165,245

Form 99	0 (2012)				Page 10
	IX Statement of Functional Expenses				·
Sectio	n 501(c)(3) and 501(c)(4) organizations must com				
Do no	Check if Schedule O contains a respon- t include amounts reported on lines 6b, 7b,	se to any question (A)	IN THIS PART IX . (B)	(C)	<u> </u> (D)
8b, 9b	, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	15,000			
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	2,278,175			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	238,744			
8	Pension plan accruats and contributions (include				
	section 401(k) and 403(b) employer contributions)	41,388			
9	Other employee benefits	110,713			
10 11	Payroll taxes	151,984		1	·
''	Management				
b	Legal	88,000			
C	Accounting	24,000			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	44,811			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	139,832			
12	Advertising and promotion	9,850			_
13	Office expenses	83,918			
14	Information technology	17,636			
15	Royalties				
16 17	Occupancy	64,636 144,072			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	144,072			
19	Conferences, conventions, and meetings .	47,881			- 1-11
20	Interest				
21	Payments to affiliates	1,983,114			
22	Depreciation, depletion, and amortization .	116,776			
23	Insurance	8,566			
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)			1	
а	Dues & Fees	157,071			
b	Donations & Flowers/Gifts	74,498			
С	Printing & Publications-Union Newspaper	11,453			
d	Personal Property Taxes	6,132			
е	All other expenses	3,611			
25	Total functional expenses. Add lines 1 through 24e	5,861,861			
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 following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (B) (A) Beginning of year End of year 1 27,590 16,304 Savings and temporary cash investments 1,400,929 2 2 1,451,673 Pledges and grants receivable, net 3 3 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other 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 6 Assets 7 7 Inventories for sale or use 8 8 Prepaid expenses and deferred charges 9 Q 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 1,166,957 10b Less. accumulated depreciation b 10c 654,681 449,605 512,276 11 11 3,657,782 3,895,356 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 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 5,524,620 5,886,895 17 Accounts payable and accrued expenses . . . 17 178,601 178,589 Grants payable 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 24 Unsecured notes and loans payable to unrelated third parties . . . Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 26 Total liabilities. Add lines 17 through 25 26 178,601 178,589 Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 30 through 34. 30 Net Assets 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund . . . 31 31 32 Retained earnings, endowment, accumulated income, or other funds . 5,346,019 32 5,708,306 33 5,346,019 33 5,708,306 34 Total liabilities and net assets/fund balances . . . 5,524,620 34 5,886,895 Form **990** (2012)

orm 99	0 (2012)			Pa	ge 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6,03	0,684
2	Total expenses (must equal Part IX, column (A), line 25)	2		5,86	1,861
3	Revenue less expenses. Subtract line 2 from line 1	3		16	8,823
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		5,34	6,019
5	Net unrealized gains (losses) on investments	5		19	3,46 <u>4</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		5,70	8,30 <u>6</u>
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	<u> </u>			
				Yes	No
1	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın ın			
	Schedule O.		<u> </u>		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled or			
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				}
b	Were the organization's financial statements audited by an independent accountant?		2b	✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on a			
	separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or				
	of the audit, review, or compilation of its financial statements and selection of an independent account		2c	✓	
	If the organization changed either its oversight process or selection process during the tax year, ex	plaın in			
	Schedule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in			

Form **990** (2012)

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 20**12**

Department of the Treasury Internal Revenue Service Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.
 See separate instructions.

Open to Public Inspection

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

		es," to Form 990, Part IV, line 5 (Proxy	Tax) or Form 990-I	EZ, Part V, line 35c (Proxy T	ax), then
	ection 501(c)(4), (5), or (6) or of organization	ganizations: Complete Part III.		Employer idea	ntification number
	3.			Limployer ider	
	Food & Commercial World		5047		05-0227658
		he organization is exempt und			organization.
1		f the organization's direct and indire	•	•	•
2					·
3	Volunteer hours				0
Part	I-B Complete if the	he organization is exempt und	er section 501(c)(3).	
1	Enter the amount of any	y excise tax incurred by the organization	ation under sectio	n 4955 ▶ \$	- · · · · · · · · · · · · · · · · · · ·
2	Enter the amount of any	y excise tax incurred by organization	n managers under	r section 4955 🕨 💲	
3	If the organization incur	red a section 4955 tax, did it file Fo	rm 4720 for this y	ear?	Yes No
4a	Was a correction made				Yes No
b	If "Yes," describe in Par			_	
Part		he organization is exempt und			(c)(3).
_1		ctly expended by the filing organiz			-
2	Enter the amount of th	e filing organization's funds contrib	outed to other org	ganizations for section	
	· · · · · · · · · · · · · · · · · · ·	tivities			20,665
3	Total exempt function	expenditures. Add lines 1 and 2	. Enter here and	on Form 1120-POL,	
	line 17b			▶ \$	20,665
4	Did the filing organization	on file Form 1120-POL for this year	?		🗌 Yes 🗸 No
5	Enter the names, addre	sses and employer identification nu	mber (EIN) of all s	ection 527 political organi	zations to which the filing
	organization made payr	nents. For each organization listed,	enter the amount	paid from the filing organi	zation's funds. Also enter
		contributions received that were pro			
	as a separate segregate	ed fund or a political action committee	ee (PAC). If addition	onal space is needed, prov	ide information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(-,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(0, 2	filing organization's	contributions received and
			<u> </u>	funds If none, enter -0-	promptly and directly delivered to a separate
					political organization If
					none, enter -0-
(1)		278 Silver Spring Street			
	CW Local 328 MA PAC	Providence, RI 02904	unknown	6,375	0
(2)		278 Silver Spring Street			
<u>''' UI</u>	CW Local 328 RI PAC	Providence, RI 02904	05-0469505	14,290	0
(3) 111	CW International ABC	1775 K Street, NW			
	count	Washington, DC 20006-1598	unknown	0	94,284
(4)					
(~) ———				<u> </u>	
(5)					
		<u> </u>			
(6)					

Page	2

	t II-A Complete if the organization section 501(h)).					
	Check ► ☐ if the filing organization be name, address, EIN, expe	enses, and sha	re of excess lobb	oying expenditu	res).	up member's
в	Check ► ☐ if the filing organization ch	necked box A	and "limited cont	trol" provisions a	apply.	
	Limits on Lob	bying Expendit	ures		(a) Filing	(b) Affiliated
	(The term "expenditures" n	neans amounts	paid or incurred.)	organization's totals	group totals
1a	Total lobbying expenditures to influence	e public opinion	(grass roots lobby	ring)		
b						
c						
c		· · · · · · · · · · · · · · · · · · ·				
e						
f						
	If the amount on line 1e, column (a) or (b) i	s: The lobbying	nontaxable amoun	t is:	!	
	Not over \$500,000		nount on line 1e		į	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000.	j l	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess o	ver \$1,500,000.		
	Over \$17,000,000					
<u>c</u>	Grassroots nontaxable amount (enter 2	5% of line 1f)				-
ř		less, enter -0-				
i	Subtract line 1f from line 1c. If zero or le					
j	If there is an amount other than zero reporting section 4911 tax for this year		1h or line 1i, did			Yes No
	(Some organizations that m	ade a section 5	Period Under Sec 601(h) election do ctions for lines 2a	not have to com		
	Lobbyin	g Expenditures	During 4-Year A	veraging Period	T - 1	
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
28	Lobbying nontaxable amount					
k	Lobbying ceiling amount (150% of line 2a, column (e))					
	Total lobbying expenditures					
	d Grassroots nontaxable amount					
	Grassroots ceiling amount (150% of line 2d, column (e))					
1	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2012

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT file (election under section 501(h)).	ed F	Form	5768		
For 6	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(a)		(b)	
	and the state of t	es	No	Ar	noun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?	\neg 1				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	_				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	\dashv	-			
i	Other activities?	_				
j	Total. Add lines 1c through 1					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	\dashv				
b	If "Yes," enter the amount of any tax incurred under section 4912		- 1			
G	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
Part	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5)	5) 0	Y 50	otion		
Part	501(c)(6).	,, o	or sec	Cuon		T
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
rart	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."				line	3, is
1	Dues, assessments and similar amounts from members	.	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	of				
а	Current year	. [2a			
b	Carryover from last year	. [2b			
C	Total	. [2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	. [3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying	ıg				
	and political expenditure next year?	. [4			
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5			
Par	•					
	elete 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, line 2; and Part II-B, line 1. Also, complete this part for any additional information.	ırt II	-A (af	filiated	grou	р
UFCW	Local 328 allocated a portion of dues received from members as follows:			· -		
For	members who live in MA, \$.10 per member per month is deposited into UFCW Local 328 MA PAC					
For	members who live in RI, \$.25 per member per month is deposited into UFCW Local 328 RI PAC					
In add	ition, members may contribute any amount they chose to the Active Ballot Club (ABC). This money is receive	ved	at Lo	al 328,	depo	sited
and th	en forwarded on a monthly basis to the UFCW International ABC Account.					

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► 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.

Employer identification number Name of the organization United Food & Commercial Workers Union, Local 328 05-0227658 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 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 5 funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 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 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 ☐ 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 2a Total number of conservation easements 2b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2¢ Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 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 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) 8 In Part XIII, 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. 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 XIII, 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: 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:

b Assets included in Form 990, Part X

_			•
Pa	а	е	4

Part	III Organizations Maintaining								
3	Using the organization's acquisition, collection items (check all that apply):		sion, and of	ther reco	ds, chec	k any of th	e follo	wing that are a si	gnificant use of its
а	☐ Public exhibition			d	☐ Loan	or exchang	je prog	rams	
b	☐ Scholarly research			е	☐ Other	r			*******
С	☐ Preservation for future generations	3							
4	Provide a description of the organiza XIII.	tion's	collections	and expla	in how t	hey further	the or	ganization's exem	ipt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather								
Dow									
Part	line 9, or reported an amour					janization	answe	erea res lo ro	iiii 990, Fait IV,
12	Is the organization an agent, trustee	Cust	odian or oth	ner intern	nediany f	or contribut	ions o	r other assets no	+
1a	included on Form 990, Part X?								☐ Yes ☐ No
b	If "Yes," explain the arrangement in P	art XII	l and compl	ete the fo	llowing t	able:	Γ_	Ar	mount
С	Beginning balance						10	3	
ď	Additions during the year						10		
e	Distributions during the year						10		
f	Ending balance						11		
2a	Did the organization include an amou								☐ Yes ☐ No
	If "Yes," explain the arrangement in P								
Par		ete if	the organiz	zation ar	swered	"Yes" to F	orm 9	90, Part IV, line	10.
			Current year		or year	(c) Two year		(d) Three years back	
1a	Beginning of year balance					_			
b	Contributions								
С	Net investment earnings, gains, and								
	losses								
d	Grants or scholarships								
е	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of	he cu	rrent year ei	nd balanc	e (line 1g	, column (a	i)) held	as:	
а	Board designated or quasi-endowme				-				
b	Permanent endowment ▶	%							
С	Temporarily restricted endowment ▶		%						
	The percentages in lines 2a, 2b, and 2								
3a	Are there endowment funds not in the	e pos	session of t	he organı	zation th	at are held	and ac	dministered for th	
	organization by:								Yes No
	(i) unrelated organizations								3a(i)
	(ii) related organizations							· · · · · ·	3a(ii)
b	If "Yes" to 3a(ii), are the related organ								3b
4	Describe in Part XIII the intended use								
Par		omen							
	Description of property		(a) Cost or o (investri			or other basis other)		Accumulated depreciation	(d) Book value
1a	Land					212,000			212,000
b	Buildings	.				526,276		467,769	58,507
С	Leasehold improvements	.							
d	Equipment					141,211		118,433	22,778
е	Other	•			<u> </u>	287,470		68,479	218,991
Total.	Add lines 1a through 1e. (Column (d) i	nust e	qual Form 9	90, Part .	X, columi	n (B), line 10	O(c).)	<u></u> ▶	512,276

Part VII	Investments - Other Securities	. See Form 990, Part X,	line 12.	
(a)	Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year man	
(1) Financial	derivatives			
	eld equity interests			
(3) Other				
(A)	•••••			
(B)				
(C)				
(D)	••••••			
(E)	•••••			
(F) (G)				
(H)				
(I)				
	b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments—Program Related	I See Form 990 Part X	line 13	
	a) Description of investment type	(b) Book value	(c) Method of valua	atron
		(b) Book value	Cost or end-of-year man	
(1)				
(2)			. .	
(3)				
(4)			-	
(5)			-	
(6)				
(7)				-
(8)				
(10)		·	*	
	b) must equal Form 990, Part X, col (B) line 13.)			
Part IX	Other Assets. See Form 990, Pa	art X, line 15.		··
		a) Description		(b) Book value
(1)	<u>-</u> -			
(2)				
(3)				
(4)				
_(5)		· · · · · · · · · · · · · · · · · · ·		
_(6)				
(8)				- · · · · · · · · · · · · · · · · · · ·
(9)				
Total (Colu	mn (b) must equal Form 990, Part X, c	ol (R) line 15.)		
Part X	Other Liabilities. See Form 990,			
1.	(a) Description of liability	(b) Book value		
	income taxes	(4)	-	
(2)			1	
(3)			†	
(4)			7	
(5)				
(6)			7	
(7)			7	
(8)				
(9)				
(10)				
(11)				
	b) must equal Form 990, Part X, col (B) line 25.)			
2. FIN 48 (AS	C 740) Footnote. In Part XIII, provide the	text of the footnote to the org	ganization's financial statements that re	eports the organization's
liability for un	certain tax positions under FIN 48 (ASC 7	740). Check here if the text of	the tootnote has been provided in Par	t XIII

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per I	Return	
1	Total revenue, gains, and other support per audited financial statements	1	6,338,729
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	- 2.374g	·
а	Net unrealized gains on investments	/\ "#	
b	Donated services and use of facilities	- ;	
C	Recovenes of prior year grants		
d	Other (Describe in Part XIII)		
е	Add lines 2a through 2d	2e	308,045
3	Subtract line 2e from line 1	3	6,030,684
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	r user	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	6,030,684
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses pe	r Return	
1	Total expenses and losses per audited financial statements	1	5,954,599
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	* -	
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	92,738
3	Subtract line 2e from line 1	3	5,861,861
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	5,861,861
	XIII Supplemental Information		
	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa		
	, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to	provide an	y additional
ınform			
Part X	- Line 2d - "Other" adjustments include cash to accrual adjustments of \$41,687 and \$72,894 in adjustments	to consolic	date UFCW
Local	328 Charitable Foundation that is under common control.		
	ll - Line 2d - "Other" adjustments include cash to accrual adjustments of \$18,300 and \$74,438 in adjustments		

schedule D (Form 990) 2012	Page 3
Part XIII Supplemental Information (continued)	
ncome Tax Footnote:	
The Union is exempt from income taxes as a labor organization under Section (501)(c)(5) of th	e Internal Revenue Code.
The Foundation is exempt from income taxes as a public charity under Section (501)(c)(3) of the	
The Union and the Foundation annually file IRS Form 990 - Return of Organization Exempt fro	m Income Tax, reporting various information
that the IRS uses to monitor the activities of tax-exempt entities. These tax returns are subject	t to review by the taxing authorities and are
subject to examination by the IRS, generally for three years after they were filed. Managemen	t believes that the Union and the Foundation
operate in a manner consistent with their tax-exempt status at both the state and Federal leve	•
······································	

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-004 \mathbb{Z}

Employer Identification number

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Schedule 1 (Form 990) (2012) Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, **%** □ (h) Purpose of grant or assistance √ Yes 05-0227658 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and . (g) Description of non-cash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. . . (f) Method of valuation (book, FMV, appraisal, other) Cat No 50055P -Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the Instructions for Form 990. General Information on Grants and Assistance United Food & Commercial Workers Union, Local 328 (b) EIN 1 (a) Name and address of organization or government Part Part II N ଷ <u>ල</u> € <u>©</u> 9 E € 9 5 (1) (2)

Schedule I (Form 990) (2012) (f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance \$15,000 (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients 9 (a) Type of grant or assistance 1 Scholarships Part III က 2 9 N 4

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 United Food & Commercial Workers Union, Local 328

Employer identification number

05-0227658

Part	Questions Regarding Compensation			
			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		1	1
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		L
•	Did the organization require substantiation prior to remburging or allowing expanses incurred by all officers	<u> </u>		
2				1
	directors, trustees, and the OLO/Executive Director, regarding the items checked in line 14:			
3	Indicate which if any of the following the filing organization used to establish the compensation of the			
3				1
				1 1
	· · · · · · · · · · · · · · · · · · ·			l I
				ł I
	Porm 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990. Part VII. Section A, line 1a, with respect to the filling			1 1
7	organization or a related organization:			1 1
а		42		\
b		-		1
C				\ <u>\</u>
C				<u> </u>
	The second any of lines 44-6, list the persons and provide the applicable amounts for each item in Fart 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:			
а		5a		
b		\vdash		
D	If "Yes" to line 5a or 5b, describe in Part III.			
6				
Ū	compensation contingent on the net earnings of:			
а	The organization?	6a		┝──
b	Any related organization?			
J	If "Yes" to line 6a or 6b, describe in Part III.			
7		\vdash		\vdash
•	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8		ate box(es) if the organization provided any of the following to or for a person listed in Form in A, line 1a Complete Part III to provide any relevant information regarding these items. Inarter travel		
U				
9		 •		-
3	Regulations section 53 4958-6/c/2			

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

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

Note. The sum of columns (B)(i)-(iii) 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) Breekdown of V	Sag	(R) Brookdown of		SC compensation	2- equality total announcement of the state	a, applicable coluin	ו (ט) מווט (ב) מווטטוווג 	s ior triat moividual.
(A) Name and Title		(i) Base	(ii) Bonus & incentive	(iii) Other	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation reported as deferred in
				compensation				prior Form 990
	€	206,662	2,110	11,856	14,488	12,364	247,480	
1 David P. Fleming	(E)						0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	e
	(0)	157,896	2,110	5,399	13,426	12,129	190,960	
2 James P. Riley	(E)							
	()	157,896	2,110	11,858	16,642	12,129	200,635	
3 Timothy Melia	(ii)							
	8	115,687	2,110	7,196	23,637	11,897	160,527	
4 Ellen Jordan	<u>(E)</u>							
	()	115,687	2,110	4,866	21,629	11,897	156,189	
5 Linda Imondi	E							
	(9)	115,687	2,110	5,434	18,572	11,897	153,700	
6 Domenic Pontarelli	(E)							
	(0)	115,687	2,110	6,032	15,532	11,897	151,258	
7 Thomas Hutchinson	(8)							
	()							
8	(E)							
	(1)							
6	(1)							
	(1)							
10	(1)							
	(1)							
11	(E)							
	(6)							
12	(E)							
	(8)							
13	(3)							
	8							
14	(ii)							
	(1)							
15	3							
	€							
16								

Schedule J (Form 990) 2012

Page 3

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

United	Food & Commercial	Workers Union,	Local 328				_			05-0	02276	58		
Par	Excess Bene Complete if the	fit Transaction ne organization	ns (section 50° answered "Ye	1(c)(3) es" on	and sect Form 99	ion 501(c)(4 0, Part IV, I	4) org ine 25	anızations only) 5a or 25b, or Fo	rm 99	D-EZ,	Part '	V, line	40b.	
1	(a) Name of disqualified	nomon	(b) Relationship b			person and		(c) Descriptio	n of tran	reaction			(d) Con	rected?
	(a) Name of disqualified	person	organization					(c) Descriptio	ii Oi uai	iSaction.	11		Yes	No
(1)														
(2)														
(3)														
(4)					-									
(5)		1												
(6)														
2	Enter the amount under section 4958		by the organ			-		ied persons du	-			S		
3	Enter the amount o	of tax, if any, on	line 2, above,	reimb	ursed by	the organi	izatio	n		!	▶ \$	S		
Part	Complete if the	I/or From Interne organization eported an amo	answered "Ye ount on Form	es" on 990, P	art X, line	e 5, 6, or 2	2.	. .			T		l	
(a) N	ame of interested person	(b) Relationship with organization	(c) Purpose of loan	fro	oan to or om the nization?	(e) Origir principal an		(f) Balance due	(g) In c	lefault?	by bo	proved pard or nittee?	(i) W agree	ntten ment?
				То	From	1			Yes	No	Yes No		Yes	No
(1)														
(2)														
(3)	,													
(4)														
(5)														
(6)		 												
(7)														
(8)		<u> </u>												
(9)														
(10)											i	1		
Total				·			. ▶	\$						
Part		sistance Bene ne organization	fiting Interest	ted Pe	rsons.		ine 27	7.			•			
(a)	Name of interested person		nionship between interested (c) Amount of assistance on and the organization			t of assistance	e (d) Type of assistance			(e) Purpose of assistance				
(1)														
(2)														
(3)														
(4)			2											
(5)														
(6)														_
(7)			-											
(8)		i						-				_		
(9)	-													
40		- -					1							

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organı	nues?
4)				Yes	No
(1) David Fleming	See Part V below	See Part V below			✓
(2) James Riley	See Part V below	See Part V below	See Part V below		✓
(3) Cynthia Estevao	See Part V below	See Part V below	See Part V below		✓
(4)					
(5)					
(6)					
(7)					
[8]					
(9)					
10)					
Part V Supplemental Information Complete this part to provide art IV above - (1) David Fleming, James R	de additional information for re		ns on Schedule L (see instructions) 8, also serve as Trustees of	ns).	
FCW Local 328 Charitable Foundation. N					
eming, President of UFCW Local 328, als	o serves as Trustee of the UFC	W and Participating E	mployers Interstate Health		
Welfare Fund. Local 328 makes contribu	utions to the H&W Fund to cove	r employees' health o	are. The total contributions		
ade in 2012 were \$168,480. (3) David Fle	ming, President of UFCW Local	328, also serves as 1	rustee of the UFCW National		
ension Fund. Local 328 makes contribut	ions to the Pension Fund for its	employees The total	al contributions made in 2012		
ere \$37,935					
•					

•••••					
					
			**		

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.

2012
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

United Food & Commercial Workers Union, Local 328 05-0227658 Part VI - Section A - Lines 6 and 7a - All active UFCW Local 328 members are eligible to vote in elections to select the Officers of Local 328. Elections are held every three (3) years. Part VI - Section B - Line 11 - UFCW Local 328 provides a copy of Form 990 to the Executive Board prior to filing Form 990 with the Internal Revenue Service. At the Executive Board meeting, Form 990 is reviewed and approved by the Executive Board. Part VI - Section C - Line 19 - UFCW Local 328 makes its governing documents and required financial reports available to the public upon request.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization United Food & Commercial Workers Union, Local 328

Part I

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

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Open to Public OMB No. 1545-0047 2012

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Employer identification number

05-0227658

► Attach to For

(g) Section 512(b)(13) controlled entity? (f)
Direct controlling
entity Schedule R (Form 990) 2012 ŝ 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.) Yes (f)
Direct controlling
entity 11a UFCW Local 328 (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) (d) Total income (d) Exempt Code section 501(c)(3) (c) Legal domicile (state or foreign country) Cat No 50135Y (c) Legal domicile (state or foreign country) (b) Primary activity ≈ (b) Primary activity Charitable For Paperwork Reduction Act Notice, see the Instructions for Form 990. (1) UFCW Local 328 Charitable Foundation EIN: 20-02678926 (a) Name, address, and EIN (if applicable) of disregarded entity (a) Name, address, and EIN of related organization 278 Silver Spring Street, Providence, RI 02904 E Part II 2 ල € Ξ 2 ල € © 9 ত 9

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Schedule R (Form 990) 2012

(i) Section 512(b)(13) controlled (k) Percentage ownership 욷 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.) Yes 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.) (i) General or managing partner? ĝ (h) Percentage ownership Yes amount in box 20 of Schedule K-1 (i) Code V—UB! (9) Share of end-of-year assets (Form 1065) (h)
Disproportionate
allocations? ŝ (f) Share of total income Yes (g) Share of end-of- [year assets (e)
Type of entity
(C corp, S corp, or trust) (f) Share of total псоте (d) Direct controlling entity (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) (state or foreign country) (c) Legal domicile (d) Direct controlling (b) Primary activity (c)
Legal
domicile
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foreign (b) Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization Part III Part IV 2 9 Ξ 8 ල € Ξ 2 ල € <u>0</u> E E 9

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

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 aross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

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