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Form **990** 

### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2013

Department of the Treasury Internal Revenue Service ▶ Do not enter Social Security numbers on this form as it may be made public.

Open to Public

► Information about Form 990 and its instructions is at www.us gov/form990. Inspection A For the 2013 calendar year, or tax year beginning and ending Check if applicable C Name of organization D Employer identification number NEVADA SERVICE EMPLOYEES UNION Address change SEIU LOCAL 1107 Name change 88-6021265 Doing Business As Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-ated 3785 EAST SUNSET ROAD (702)386 - 8849Amended return 5,061,013. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Applica LAS VEGAS, NV 89120 H(a) Is this a group return pending F Name and address of principal officer, MARTIN BASSICK Yes 🗓 No for subordinates? SAME AS C ABOVE H(b) Are all subordinates included? JYes └── No 501(c)(3) X 501(c) ( Tax-exempt status. L (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► WWW.SEIUNV.ORG **H(c)** Group exemption number ▶ X Association Year of formation: 1985 M State of legal domicile: NV K Form of organization: | Corporation Trust Other > Part I Summary Briefly describe the organization's mission or most significant activities: A LABOR UNION FOR THE BETTERMENT Governance AND ADVANCEMENT OF ITS MEMBERS. Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets. 41 Number of voting members of the governing body (Part VI, line 1a) <u>41</u> Number of independent voting members of the governing body (Part VI, line 1b) 4 43 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year**  $\overline{0}$ Contributions and grants (Part VIII, line 1h) 5,725,047 5,027,163. Program service revenue (Part VIII, line 2g) 526 621. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 8,316. 33,229. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 5,733,889. 5,061,013. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0 Grants and similar amounts paid (Part IX, column (A), lines 1-3) Ō. 0. Benefits paid to or for members (Part IX, column (A), line 4) 3,041,410 2,457,679 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. **b** Total fundraising expenses (Part IX, column (D), line 25) 2,589,931. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,822,428 5,863,838 5,047,610. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -129,94913,403. Revenue less expenses. Subtract line 18 from line 12 58 Beginning of Current Year **End of Year** 353,459 628,575. 20 Total assets (Part X, line 16) 160 262,873. Total liabilities (Part X, line 26) 352,299. Net assets or fund balances. Subtract line 21 from line 20 365,702. Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Ma - C. Tem Sign Here Signature of officer MARTIN BASSICK, PRESIDENT Type or print name and title Print/Type preparer's name PROMEPS STORIATURE 4/4/2014 Paid RICHARD G. THIERMANN P00974294 Firm's name LINDQUIST LLP Preparer 52-2385296 Firm's EIN -006FA9D10F24440 Firm's address 500 CITY PARKWAY WEST, Use Only SUITE Phone no. (714) 257-0100 ORANGE, CA 92868

No

X Yes

May the IRS discuss this return with the preparer shown above? (see instructions)

	1990 (2013) SEIU LOCAL 1107	88-6021265	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		
•		MEMBER C	
	A LABOR UNION FOR THE BETTERMENT AND ADVANCEMENT OF ITS	MEMBERS.	
		-	
		<del></del>	
2	Pid the appropriation undertaken		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	L Yes	X 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 program services?	□ Vaa	X No
•		L tes	LAL NO
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expense	s.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
	revenue, if any, for each program service reported.	no, the total experience,	unu
4a	(Code) (Expenses \$		)
	ORGANIZED ALL WORKERS FOR THEIR MORAL, ECONOMIC AND SOCI	IAL ADVANCEM	ENT.
	TO THAT END, THE OFFICERS AND BUSINESS AGENTS OF THE LOC	CAL COLLECT	VELY
	BARGAINED WITH EMPLOYERS ON BEHALF OF THE LOCAL'S MEMBER		<del></del>
	BARGAINED WITH EMPLOYERS ON BEHALF OF THE LOCAL S MEMBER	KS.	
		***	
		<del></del>	
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		· <del></del>	
	The state of the s		<del></del>
4b	(Code) (Expenses \$) (Revenue)	.e\$	)
			<del>.</del>
4c	(Code) (Expenses \$including grants of \$) (Revenue	ue \$	)
		<del></del>	
			<del></del>
	<del></del>		
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	1	
4-			
<u>4e</u>	Total program service expenses		
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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		_X_
2	Is the organization required to complete Schedule B, Schedule of Contributors	2		Х
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	х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
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		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	7		<u> </u>
	Schedule D, Part III	8		X
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		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	Х	
D	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		х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	1110		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	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 Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV			х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
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	17		X
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		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	<u> </u>
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Par	t IV Checklist of Required Schedules (continued)			
	,		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government 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 or other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	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 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			•
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	<u> </u>		ļ
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	<u> </u>	<u> </u>
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		<u> </u>	<b> </b>
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,		l	
	complete Schedule L, Part II	26	X	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or 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	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):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	-	<del>  ^</del>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer	1		x
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	├	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	├	<del>  ^</del> -
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	20		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30_	$\vdash$	
31	If "Yes," complete Schedule N, Part I	31	ļ	x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31	+-	<del>  ^</del>
<b>U</b> Z.	Schedule N, Part II	32	ì	х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	JE	<del>                                     </del>	<del> </del> -
•	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	50	<del>                                     </del>	
•	Part V, line 1	34	x	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<del> </del>	X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			† <del></del>
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	1	1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization		1	
	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	1	$\top$

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and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Par				_
	. Check if Schedule O contains a response or note to any line in this Part V			ᆜ
10	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	<b>∤</b>		
·	(gambling) winnings to prize winners?	1c	х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	-10		
	filed for the calendar year ending with or within the year covered by this return  2a  43			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			_
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, 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		Х
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.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	<b> </b>		7,7
<b>h</b>	any contributions that were not tax deductible as charitable contributions?	6a		Х
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6		
7	Organizations that may receive deductible contributions under section 170(c).	6b	<u> </u>	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		İ
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		_	
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		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		ļ
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?			
9	Sponsoring organizations maintaining donor advised funds.	8		
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
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	]		
11	Section 501(c)(12) organizations. Enter:			1
а	Gross income from members or shareholders	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against		1	
40	amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year  Section 501(a)(20) qualified papers it health incurrence issuers.	1		
	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	120		
a	Note. See the instructions for additional information the organization must report on Schedule O.	13a	<del>                                     </del>	<del> </del>
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			
С	Enter the amount of reserves on hand	1		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
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SEIU LOCAL 1107

88-6021265

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 41			
	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 number of voting members included in line 1a, above, who are independent 1b 41		j	
2	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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	X	
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?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		**	
	The governing body?	8a	Х	77
	Each committee with authority to act on behalf of the governing body?	8b		Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			Х
202	organization's mailing address? If "Yes," provide the names and addresses in Schedule O  tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9		Λ
500	tion b. 1 dioles (this Section b requests information about policies not required by the internal nevertue code.)	_	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	162	No X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	iua		
-	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	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	- 1		
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		Х
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	X	
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?			
	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	ŀ		
_	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			ŀ
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
200	exempt status with respect to such arrangements?	16b	<u> </u>	<u> </u>
17 18	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) is	avoile!	vio.	
10	for public inspection. Indicate how you made these available. Check all that apply.	avallat	ле	
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d fina	neial	
	statements available to the public during the tax year.	u mai	icial	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	tion· <b>■</b>	<b>&gt;</b>	
	BIRGIT HARRIS - (702)386-8849			
	3785 EAST SUNSET RD., LAS VEGAS, NV 89120			

## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

**Employees, and Independent Contractors** 

Check if Schedule O contains a response or note to any line 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.

Check this box if neither the organization	on nor any related	orga	anıza	ation	cor	mpei	nsat	ed any current officer, o	director, or trustee	
(A)	(B)			((				(D)	(E)	(F)
Name and Title	Average	(do		Pos		than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	ls bot	h an	compensation	compensation	amount of
	week	$\vdash$	Cer air		1000	17003	166)	from	from related	other
	(list any hours for	Individual trustee or director						the organization	organizations (W-2/1099-MISC)	compensation
	related	5	eg.			sated		(W-2/1099-MISC)	(**-2/1099-141130)	from the organization
	organizations	truste	Institutional trustee		yee	m per		(** 2) 1000 (***)		and related
	below	dual	utton	ង	Key employee	est co oyee	ia i			organizations
	line)	ş	Insti	Officer	Key 6	Highest compensated employee	Богтег			
(1) ABDULLAH, RAH	8.00									
EXECUTIVE VP - PAST		X		X				2,707.	0.	0.
(2) CANDELARIO, ALEX	8.00									
CHIEF STEWARD - PAST		X		X				0.	0.	0.
(3) ARMSTRONG, SCOTT	8.00									
CHIEF STEWARD		X		X	L			0.	0.	0.
(4) ARMSTRONG, PATRICIA	8.00									
SECRETARY		X	L	X		ļ		0.	0.	0.
(5) BROTHERS, KIMBERLY	8.00				ŀ			_	_	
CHIEF STEWARD - PAST		X	<u> </u>	X	L_	ļ		0.	0.	0.
(6) ALLRED, MAUREEN	8.00				İ		ŀ		_ !	
CHIEF STEWARD		Х		X		_	L_	0.	0.	0.
(7) BEAL, DANIELLE	8.00			l			İ		_	
CHIEF STEWARD		Х	_	X		$oxed{oxed}$	<u> </u>	0.	0.	0.
(8) CLOUTHIER, MICHELLE	8.00									
CHIEF STEWARD		X		X		_		0.	0.	0.
(9) COLLINS, CHRISTIE	8.00	l			l		l		_	
VICE PRESIDENT - PAST		X		X	<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
(10) COLLINS, MICHAEL	8.00				1					
TRUSTEE - PAST		X		X	<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
(11) FLOYD, MARTHA	8.00			,,		1			_	
CHIEF STEWARD		X	_	X	<b> </b>	├		0.	0.	0.
(12) DITTRICH, KARLA	8.00			٠,				1	_	•
CHIEF STEWARD - PAST		X		X	<u> </u>	<del> </del>	<u> </u>	0.	0.	0.
(13) DOYLE, MARY JANE	8.00	<b>.</b>		<b>.</b>		1			_	0
VICE PRESIDENT - PAST	- 00	X		X		-	<u> </u>	0.	0.	0.
(14) ERRINGTON, COURTNEY	8.00	₹.		<b>.</b> ,						
TREASURER	9 00	X	_	Х		<u> </u>		0.	0.	0.
(15) EVANGELISTA, CARA CHIEF STEWARD	8.00			<sub>~</sub>					<b>,</b>	_
		X		X		-	<u> </u>	0.	0.	0.
(16) HALL, DOROI VICE PRESIDENT	8.00	x		<b>.</b>				_	_	_
(17) GIBBONS-SMITH, MOLLY	8.00	<u> </u>	├	X		╁	-	0.	0.	0.
CHIEF STEWARD	B.00	X		x				0.	0.	^
O.L.D. DILIMINO	L	14		<u> </u>	L	Ц_	<u> </u>	<u> </u>		0.

332007 10-29-13

Form 990 (2013)

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	/ees	, an	d Hi	ighe	st (	Compensated Employe	es (continued)	
· (A)	(B)			((	C)	3		(D)	(E)	(F)
Name and title	Average	١		Pos	itior			Reportable	Reportable	Estimated
	hours per	box	not c , unle	ss pe	erson	is bot	h an	compensation	compensation	amount of
	week	offi	cer an	d a d	lirecto	or/trus	tee)	from	from related	other
	(list any	ecto	ŀ					the	organizations	compensation
	hours for	Indiwdual trustee or director				ā		organization	(W-2/1099-MISC)	from the
	related	stee	Institutional trustee		_	Highest compensated employee		(W-2/1099-MISC)		organization
	organizations below	ᄪ	onalt		Key employee	[등 x				and related
	line)	JA de	量	Officer	E	P S S	Former			organizations
(18) GREAUX, PATRICIA		트	<u> </u>	₹.	ફ	₹5	횬		<del></del>	ļ
CHIEF STEWARD	8.00	₩.	-	₹.			1		0	
<del></del>		X	<del>                                       </del>	X	├	┝	_	0.	0.	0.
(19) GUARDINO, DON	8.00			١.,					•	
CHIEF STEWARD - PAST	0 00	X	┞	X	┞	<u> </u>	_	0.	0.	0.
(20) HARDY, MACE	8.00		1						_	
VICE PRESIDENT - PAST		Х	$ldsymbol{f eta}$	X	<u> </u>	<u> </u>		0.	0.	0.
(21) COLEMAN, MARVIN	8.00			Ì				_	_	_
VICE PRESIDENT		X	L	X	╙	L	<u> </u>	0.	0.	0.
(22) MATTHEWS, MARK	8.00									
VICE PRESIDENT		X		X	L			0.	0.	0.
(23) COWAN, JIM	8.00									
CHIEF STEWARD		X		X	ļ			0.	0.	0.
(24) WILCOX, LYNDA	8.00									
CHIEF STEWARD		X		X	ł			0.	0.	0.
(25) MCGUIGAN, BARBARA	8.00					П				
VICE PRESIDENT - PAST		Х		X	1	l		0.	0.	0.
(26) HARDING, VICTORIA	8.00		<b>—</b>							<del> </del>
VICE PRESIDENT		x		X		ĺ		0.	0.	0.
1b Sub-total					<u> </u>		<b></b>	2,707.	0.	0.
c Total from continuation sheets to Part VI	I. Section A							18,061.	0.	0.
d Total (add lines 1b and 1c)	.,							20,768.	0.	
2 Total number of individuals (including but n	ot limited to th	ose	liste	nd al	hove	e) w	no r			
compensation from the organization						٠,			Jood of Toportable	0
										Yes No
3 Did the organization list any former officer,	director or tru	iste	e ke	v er	mple	wee	or	highest compensated e	mnlovee on	
line 1a? If "Yes," complete Schedule J for s			0, 110	, 0.	пріс	,,	, 0,	riigilest compensated e	mployee on	3   X
4 For any individual listed on line 1a, is the su			amn	anes	ation	n and	d of	her compensation from	the organization	<del>                                    </del>
and related organizations greater than \$150									ine organization	4 X
5 Did any person listed on line 1a receive or a	•								idual for convece	<del></del>
rendered to the organization? If "Yes," com					-		eiai	ed organization or indivi	dual for services	5 X
Section B. Independent Contractors	piete Scriedui	· · ·	UI St	ICII	pers	SOII		<del></del> .	·	1 5   A
							/		\$100,000 of annual	
, , , , , , , , , , ,										sation from
the organization. Report compensation for	the calendar y	ear	enai	ng v	vitn	or w	'itnii		year.	
<b>(A)</b> Name and business	address							(B)  Description of s	enuces	<b>(C)</b> Compensation
		757	7 7 0	nttt				Description of s	ervices .	
THE URBAN LAW FIRM, 4720		ומנ	υA'I	U	Χ.					070 000
BLVD #A-9, LAS VEGAS, NV	89103						_	LEGAL		<u>279,889.</u>
							_			
							_			
		_								
									1	
2 Total number of independent contractors (		ot III	mıte	d to	tho	se li:	stec	d above) who received n	nore than	
\$100,000 of compensation from the organic						<u> </u>				
SEE PART VII. SECTION	J A CONT	ידיו	VIT Z	וידי ג	T O I	VI (	ZH.	EETS		Form 990 (2013)

Form 990

SEIU LOCAL 1107

88-6021265

Part VIII out to a comment	AL 1107			_					88-602	1203
Part VII Section A. Officers, Directors, Tr	ustees, Key E	mplo I	oyee	s, a	nd l	ligh	est	Compensated Employ		
Name and title	(B) Average hours	(cl	heck	Pos	C) ition that		ıly)	( <b>D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of
	per week (list any hours for related organizations below line)	Indiwdual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) MANCINI, CHERIE	8.00			;		İ				
EXEC VICE PRESIDENT		X		X				2,041.	0.	0
(28) MARTINEZ, AL	40.00									
PRESIDENT - PAST		X		X				3,075.	0.	0
(29) MESSIER, DONALD	8.00					ŀ				
VICE PRESIDENT - PAST		X		X			L	0.	0.	0
(30) MOORE, PATRICIA	8.00									
SECRETARY - PAST		X		X				0.	0.	0
(31) MORRIS, EDNA	8.00									
CHIEF STEWARD - PAST		X		X				0.	0.	0
(32) NOLAN, KARLA	8.00									- 1
CHIEF STEWARD - PAST		X		X		ŀ		0.	0.	0
(33) OCAMPO, ALEX	8.00								•	
VICE PRESIDENT - PAST		X		X				0.	0.	0
(34) OSBORNE, ASHLEY	8.00									
VICE PRESIDENT - PAST		X		X				2,095.	0.	0
(35) PIERCE, JEFF	8.00									
CHIEF STEWARD - PAST		X		X				0.	0.	0
(36) REYES, MADALYN	8.00									
CHIEF STEWARD		X		X				0.	0.	0
(37) RIVERA, MARIA	8.00									
VICE PRESIDENT - PAST		Х		X				0.	0.	0
(38) RODELA, MILES	8.00									
VICE PRESIDENT		X		X				0.	0.	0
(39) SERRANO, ALFREDO	8.00									
VICE PRESIDENT		X		X				0.	0.	0
(40) SHOTT, PAUL	8.00									
CHIEF STEWARD - PAST		X		Х				0.	0.	0
(41) SLACK, AVA	8.00						Г			
CHIEF STEWARD		X		Х				0.	0.	0
(42) STEVENS, GWEN	8.00									
VICE PRESIDENT		Х	ļ	Х	1			0.	0.	0
(43) STRASSER, JERRI	8.00									
CHIEF STEWARD		Х		X				0.	0.	0
(44) TILLMAN, ROSHANDA	8.00									
CHIEF STEWARD		Х		Х				0.	0.	0
(45) VANDERPOOL, DIANE	8.00									
TRUSTEE - PAST		Х		х				0.	0.	0
(46) WHITE, KEVITA	8.00									
CHIEF STEWARD - PAST		Х	1	Х		l	I	7,800.	0.	0

Form 990

SEIU LOCAL 1107

88-6021265

	OCAL IIU/	_							88-602	1203
Part VII Section A. Officers, Director	s, Trustees, Key Ei	nplo	yee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
· (A) Name and title	(B) Average hours	(ci		Pos	c) ition that		oly)	( <b>D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Indiwdual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(47) GAYTON, AMELIA	8.00								_	
CHIEF STEWARD	10.00	Х	_	Х		_	L.	0.	0.	0.
(48) BASSICK, MARTIN	40.00									_
PRESIDENT		Х	_	Х			L	3,050.	0.	0.
(49) HODGSON, RICHARD	8.00									
CHIEF STEWARD	0.00	X	_	Х				0.	0.	0.
(50) LIEPINS, RAITIS	8.00	٠,,		,,					_	_
VICE PRESIDENT	- 0 00	X	_	Х		_		0.	0.	0 .
(51) LABAY, SUSAN	8.00	<b>.</b>		<b>.</b> ,						_
VICE PRESIDENT - PAST		X	<u> </u>	Х			_	0.	0.	0 .
(52) LEE, THERESA	8.00	.,		.,					0	
TRUSTEE - PAST	8.00	Х		Х				0.	0.	0 .
(53) HAUSER, SHERI VICE PRESIDENT	8.00			x				1	^	_
(54) JORDAN, JANICE	9 00	Х		Λ			_	0.	0.	0 .
VICE PRESIDENT	8.00	x		x				0.	0	_
(55) KIRKPATRICK, JIM	8.00	^	-	Δ				0.	0.	0.
TRUSTEE	8.00	x		х				0.	0.	0.
(56) LESKYS, AL	8.00	Δ.	$\vdash$	<u> </u>		<u> </u>	-	· ·	0.	0 .
CHIEF STEWARD	0.00	х	ĺ	X		ŀ		0.	0.	0.
(57) LOMAX, JAMES	8.00	1		-		$\vdash$	$\vdash$			0 .
VICE PRESIDENT		х		x		l		0.	0.	0.
(58) MARZAN, BRENDA	8.00			-		_	-	<del>                                     </del>	<u> </u>	
VICE PRESIDENT		x		x				0.	ο.	О.
(59) MEDBERRY, DOUGLAS	8.00			-		-	1		•	
CHIEF STEWARD		x		x				0.	0.	0.
(60) PHILLIPS, MICHELLE	8.00		_							
VICE PRESIDENT		x		X			1	0.	0.	0
(61) RAICHE-CURL, JACQUELYN	8.00									
CHIEF STEWARD		Х		X				0.	0.	0.
(62) REVELS, DEETRA	8.00									
CHIEF STEWARD		Х		X				0.	0.	ο.
(63) SHEN, KRYSTAL	8.00									
CHIEF STEWARD		Х		X				0.	0.	0.
(64) SPRINGER, DEBBIE	8.00	] _								
TRUSTEE		X		X	L	ļ	<u>L</u>	0.	0.	0 .
(65) TAGGART, SEAN	8.00									
CHIEF STEWARD		Х	L_	X		<u> </u>	L	0.	0.	0
(66) CLARK, NORINE	8.00									
CHIEF STEWARD - PAST		X	<u> </u>	Х		L		0.	0.	0.
Total to Part VII, Section A, line 1c								18,061.		
										L

Page 9

		Check if Schedule O conta	and a response	or riote to arry III	(A)	(B)	(C)	(b)
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ts t	1 a	Federated campaigns	1a	·			<del>-</del>	
اة چ		Membership dues	1b		1			
الجَيْ	С	Fundraising events	1c	<del> </del>	1			
業る	d	Related organizations	10	· · · · · · · · · · · · · · · · · · ·				
S.E	e	Government grants (contributi	<del></del>	<u> </u>				
<u> </u>		All other contributions, gifts, grant	·		1			
돌		similar amounts not included above	li li					
들임	q	Noncash contributions included in lines			1			
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f		<b>•</b>				
				Business Code			-	
9 2	2 a	MEMBERSHIP DUES			4,881,316.	4,881,316.		
Program Service Revenue	b	NON-MEMBER DUES	- TEXA	900099	106,054.			
& <u>\$</u> [	С	INT'L UNION REI		900099	39,793.	39,793.		
e a	d					,		
<u> </u>	е							
ፈ	f	All other program service rever	nue		1			
	g	Total. Add lines 2a-2f			5,027,163.			
3	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		<b>•</b>	621.			621.
4	1	Income from investment of tax	exempt bond p	proceeds >				***
5	5	Royalties		<b>•</b>				
			(ı) Real	(II) Personal				
6	3 а	Gross rents	3,864.		]			
	b	Less: rental expenses	0.		]			
	С	Rental income or (loss)	3,864.		]		_	1
	d	Net rental income or (loss)			3,864.			3,864.
7	7 a	Gross amount from sales of	(i) Securities	(iı) Other				
		assets other than inventory			]			
	b	Less: cost or other basis						
		and sales expenses						
	С	Gain or (loss)		<u> </u>	]			
	d	Net gain or (loss)		<u> </u>				ļ
ع   و	3 a	Gross income from fundraising	g events (not					
Other Revenue		including \$	of					
<u>é</u>		contributions reported on line	1c) See					
<u>8</u>		Part IV, line 18	а		1			
₹		Less: direct expenses	b		1	1		
		Net income or (loss) from fund	_					
٤	9 а	Gross income from gaming ac	tıvities. See			1		
		Part IV, line 19	а		1			
		Less: direct expenses	b	L	_			
		Net income or (loss) from gam	•				<del></del> – –	
10	) a	Gross sales of inventory, less	returns	<b>!</b>	1			
ŀ		and allowances	а					
		Less: cost of goods sold	b	L	-	-	-	
_	С	Net income or (loss) from sales			<u> </u>			
<u> </u>		Miscellaneous Revenue	<u>e</u>	Business Code		20 265		
1.		OTHER INCOME		900099	29,365.	29,365.		
	b		·					
	C					<b> </b>		_
	đ	All other revenue	•		20 265	<del>                                     </del>		<del>                                     </del>
12					29,365.	5,056,528.	0.	4,485.
	,	Total revenue. See instructions.			IN, UOT, UT3.	N, UDO, DZ0•1	U a	4,400,

Form 990 (2013) SEIU LOCAL 11
Part IX | Statement of Functional Expenses

	on Solicition and Solicition		<u> </u>		
Secti	on 501(c)(3) and 501(c)(4) organizations must com			omplete column (A).	<del></del> _
	Check if Schedule O contains a respon			· · · · · · · · · · · · · · · · · · ·	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) 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				
3	Grants and other assistance to governments,			<u> </u>	
•	organizations, and individuals outside the				
	• •				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	25 252			
	trustees, and key employees	25,852.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,571,536.			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	226,640.			
9	Other employee benefits	494,574.			
10	Payroll taxes	139,077.			
11	Fees for services (non-employees):		<del></del>		
а	Management				
b	Legal	391,732.			
¢	Accounting	29,491.	<u> </u>		
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		- · · -		
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
_	column (A) amount, list line 11g expenses on Sch O.)	159,210.			
12	Advertising and promotion	650.			
13	Office expenses	149,430.			
14	Information technology	4,907.			
15	Royalties		· · · · · · · · · · · · · · · · · · ·		
16	Occupancy	289,888.			
17	Travel	138,722.			-
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	1			
19	Conferences, conventions, and meetings	94,525.			
20	Interest				
21	Payments to affiliates	1,299,903.			
22	Depreciation, depletion, and amortization	17,909.			
23	Insurance	12,224.			
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 0.)				
а	GIFT & CONTRIBUTIONS	1,340.			
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	5,047,610.			
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)				

Form 990 (2013)
Part X | Balance Sheet

SEIU LOCAL 1107

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Par	<u> </u>	Balance Sheet		<u></u>		
	١	Check if Schedule O contains a response or not	e to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	Ĺ	240.	_1	
	2	Savings and temporary cash investments	L	285,005.	2	571,735.
	3	Pledges and grants receivable, net	L		3	
	4	Accounts receivable, net	L		4	
	5	Loans and other receivables from current and for	rmer officers, directors,			
		trustees, key employees, and highest compensa	ated employees. Complete			
		Part II of Schedule L	<u> </u>		5	3,833.
	6	Loans and other receivables from other disquali	· · · · · · · · · · · · · · · · · · ·			
		section 4958(f)(1)), persons described in section	- 1			
		employers and sponsoring organizations of sect				
Assets		employees' beneficiary organizations (see instr).	Complete Part II of Sch L		6	
188	7	Notes and loans receivable, net	Ĺ		7	
`	8	Inventories for sale or use .	<u> </u>		8	
	9	Prepaid expenses and deferred charges		19,899.	9	19,899.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a 168,226.	40.045		
	b	Less: accumulated depreciation	10b 135,118.	48,315.	10c	33,108.
	11	Investments - publicly traded securities		11		
	12	Investments - other securities. See Part IV, line 1		12	<u> </u>	
	13	Investments - program-related. See Part IV, line		13		
	14	Intangible assets	-		14	
	15	Other assets. See Part IV, line 11	<u> </u>	252 452	15	
	16	Total assets. Add lines 1 through 15 (must equi	al line 34)	353,459.	16	628,575
	17	Accounts payable and accrued expenses	· }	1,160.	17	2,873.
	18	Grants payable	·		18	.41.
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20	<del></del>	
	21	Escrow or custodial account liability. Complete I	F	···	21	
Liabilities	22	Loans and other payables to current and former	· .			
pili		key employees, highest compensated employee	es, and disqualified persons.			
Lia		Complete Part II of Schedule L			22	
	23 24	Secured mortgages and notes payable to unrela			23 24	260,000
	25	Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, pa	· · · · · · · · · · · · · · · · · · ·		24	200,000
	20	parties, and other liabilities not included on lines				
		Schedule D	17-24). Complete Fait A of		25	
	26	Total liabilities. Add lines 17 through 25	<u> </u>	1,160.	26	262,873.
		Organizations that follow SFAS 117 (ASC 958	), check here	2/2001	20	20270731
တ္သ		complete lines 27 through 29, and lines 33 an	"			
nce	27	Unrestricted net assets		352,299.	27	365,702
alaı	28	Temporarily restricted net assets			28	0007,02
d B	29	Permanently restricted net assets			29	
Ë		Organizations that do not follow SFAS 117 (A	SC 958), check here	·		
or F		and complete lines 30 through 34.			ľ	
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds			30	•
SSE	31	Paid-in or capital surplus, or land, building, or ed	luipment fund		31	
at A	32	Retained earnings, endowment, accumulated in	· ·		32	
ž	33	Total net assets or fund balances		352,299.	33	365,702.
	ı	Total liabilities and net assets/fund balances	•	353,459.	34	628,575.

Form **990** (2013)

NEVADA SERVICE EMPLOYEES UNION Form 990 (2013) SEIU LOCAL 1107 88-6021265 Page 12 Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI 5,061,013. Total revenue (must equal Part VIII, column (A), line 12) 1 5,047,610. 2 Total expenses (must equal Part IX, column (A), line 25) 2 13,403 3 Revenue less expenses. Subtract line 2 from line 1 3 352,299 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 5 Net unrealized gains (losses) on investments 5 6 Donated services and use of facilities 6 7 Investment expenses 7 Prior period adjustments 8 8 9 Other changes in net assets or fund balances (explain in Schedule O) 0. 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, 365,702. 10 Part XII Financial Statements and Reporting  $\mathbf{x}$ Check if Schedule O contains a response or note to any line in this Part XII Yes No X Other MODIFIED CASH Accounting method used to prepare the Form 990: \_\_ Cash \_\_\_ Accrual If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. X 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 compiled or reviewed on a separate basis, consolidated basis, or both: Consolidated basis Both consolidated and separate basis Separate basis b Were the organization's financial statements audited by an independent accountant? X 2b If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: X Consolidated basis J Separate basis ☐ Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, X review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

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

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

332012 10-29-13

Act and OMB Circular A-133?

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Form 990 (2013)

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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

Inspection

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.
► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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

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

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

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

Section :	501(c)(4), (5), or (6) organiza	tions. Complete Part III.			
Name of org	anization NEVADA	SERVICE EMPLOYEES	UNION	Emp	loyer identification number
		CAL 1107			88-6021265
Part I-A	Complete if the org	janization is exempt und	er section 501(c) o	r is a section 527	organization.
	l expenditures	cation's direct and indirect politica	al campaign activities in	Part IV. ▶	\$
Part I-B	Complete if the org	janization is exempt und	er section 501(c)(3	3).	
1 Enter th		incurred by the organization und		<b>&gt;</b> :	<del></del>
		incurred by organization manage		▶:	\$
		n 4955 tax, did it file Form 4720 t			Yes No
4a Was a	correction made?		-		☐ Yes ☐ No
<b>b</b> If "Yes,	describe in Part IV.			•	•
Part I-C	Complete if the org	janization is exempt und	er section 501(c), o	except section 501	(c)(3).
<ul><li>2 Enter the exempt</li><li>3 Total exempt</li><li>line 17to</li></ul>	ne amount of the filing organ function activities rempt function expenditures	d by the filing organization for securization's funds contributed to other.  Add lines 1 and 2. Enter here as  1120-POL for this year?	ner organizations for sec		\$\$  \$Yes
made p contribi	ayments. For each organiza utions received that were pr	nployer identification number (EII tion listed, enter the amount paid omptly and directly delivered to a additional space is needed, provi	l from the filing organiza i separate political orgai	ition's funds. Also enter t nization, such as a sepai	the amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
		LAS VEGAS, NV			
EMPLOY:	EES INT'L UNIO	89120	20-5499489	0	166,447.
				<u> </u>	
	· · · · · · · · · · · · · · · · · · ·				
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					<del> </del>
			1	I	1

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

Schedule C (Form 990 or 990-EZ) 2013

LHA

SEE PART IV FOR CONTINUATION

Schedule C (Form 990 or 990-EZ) 2013	EIU :	LOCAL	1107		88-0	5021 <u>265 Page 2</u>
Part II-A Complete if the org			mpt under section	on 501(c)(3) and file	ed Form 5768	
(election under sect		<del>` '''</del>				
A Check 🕨 📖 if the filing organizat	ion belon	gs to an affi	liated group (and list i	n Part IV each affiliated	group member's nar	ne, address, ElN,
expenses, and share			•			
B Check 🕨 🔛 if the filing organizat	ion check	ed box A ar	nd "limited control" pr	ovisions apply.		
		ying Expe			(a) Filing organization's	(b) Affiliated group totals
(The term "expend	itures" m	eans amou	ints paid or incurred.	)	totals	totals
1a Total lobbying expenditures to influ	ence pub	lic opinion (	grass roots lobbying)			
b Total lobbying expenditures to influ	ence a leg	gislative boo	dy (direct lobbying)	Ī		
c Total lobbying expenditures (add lir	-	=		Ī		
d Other exempt purpose expenditure	s			·	·	
e Total exempt purpose expenditures		s 1c and 1c	i)			
f Lobbying nontaxable amount. Ente				th columns.		
If the amount on line 1e, column (a) or			bying nontaxable am			
Not over \$500,000		20% of	the amount on line 1e			
Over \$500,000 but not over \$1,000	,000		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,50			00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,0	000,000	\$225,00	00 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000		\$1,000,	000.			
g Grassroots nontaxable amount (ent	ter 25% o	f line 1f)				
h Subtract line 1g from line 1a. If zero	or less, e	enter -0-				
i Subtract line 1f from line 1c. If zero	or less, e	nter -0-				
j If there is an amount other than zer	o on eithe	er line 1h or	line 1i, did the organiz	ation file Form 4720	•	
reporting section 4911 tax for this y	/ear?					Yes No
			eraging Period Under			
				n do not have to comp		
col	umns bel	ow. See th	e instructions for lin	es 2a through 2f on pa	ge 4.)	
	Lobb	ying Expe	nditures During 4-Ye	ar Averaging Period	-	
Calendar year						"
(or fiscal year beginning in)	(a) 2	2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
						<u> </u>
2a Lobbying nontaxable amount						
b Lobbying ceiling amount	<del></del>					<del> </del>
(150% of line 2a, column(e))						
(10070 Of life Za, Oblaitin(c))		<del></del>				
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))						
f Grassroots lobbying expenditures						1

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013 SEIU LOCAL 1107

88-6021265 Page 3

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

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a	)	(b	)
of the lobbying activity.	Yes	No	Amo	unt
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:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?		_		
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912	<b> </b>	_		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	on 501(c)	(5) or so	oction	
501(c)(6).	011 30 1(0)	(3), 01 36	CHOIL	
30 ((0)(0).			Yes	
4 Merc substantially all (000/ or marc) duce recoved pendeductible by members?				
<ul> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> </ul>		1 2	<u> </u>	
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered</li> </ul>		2 3 (5), or se		ne 3
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> </ul>		2 3 (5), or se R (b) Par		ne 3
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<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> </ul>	I "No," OI	2 3 (5), or se R (b) Par		ne 3
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<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."</li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> </ul>	I "No," OI	2 3 (5), or se R (b) Par		ne 3
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Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Part III-B   Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the except does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  Part IV   Supplemental Information  Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group Also, complete this part for any additional information.	ical  cess political	2 3 (5), or se R (b) Par 1 2a 2b 2c 3	t III-A, lir	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the except does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ical  cess political	2 3 (5), or se R (b) Par 1 2a 2b 2c 3	t III-A, lir	
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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.

Information about Schedule D (Form 990) and its instructions is at www.us.gov/form990.

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

Name of the organization

NEVADA SERVICE EMPLOYEES UNION SEIU LOCAL 1107

**Employer identification number** 88-6021265

Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		<del></del>
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	and funds
-	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	<del>-</del>	
•	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?	in definit devisor, or for any earlier purpose c	Yes No
Pai		panization answered "Yes" to Form 990, Pa	
1	Purpose(s) of conservation easements held by the organization		11. 14; III o r.
•	Preservation of land for public use (e.g., recreation or e		orically important land area
	Protection of natural habitat	Preservation of a certif	
	Preservation of open space	Treservation of a certification	ned mistorio structure
2	Complete lines 2a through 2d if the organization held a quality	fied consenyation contribution in the form of	of a conservation easement on the last
_	day of the tax year.	med conservation continuation in the form of	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c
4	Number of conservation easements included in (c) acquired		
u	listed in the National Register	arter 6/17/06, and not on a historic structu	2d
3	Number of conservation easements modified, transferred, re		
3	year	leased, extinguished, or terminated by the	organization during the tax
4	Number of states where property subject to conservation ea	sament is legated	
5	Does the organization have a written policy regarding the per		
Ŭ	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		<del></del>
Ŭ	and section 170(h)(4)(B)(ii)?	ve satisfy the requirements of section 1700	Yes No
9	In Part XIII, describe how the organization reports conservati	ion essements in its revenue and evnense	
•	include, if applicable, the text of the footnote to the organiza		
	conservation easements.	tion's iniancial statements that describes t	the organization's accounting for
Pai	t III   Organizations Maintaining Collections o	f Art. Historical Treasures, or Ot	her Similar Assets
	Complete if the organization answered "Yes" to Form	· · · · · · · · · · · · · · · · · · ·	and difficult Addets.
19	If the organization elected, as permitted under SFAS 116 (AS		eent and halance cheet weeks of est
, a	historical treasures, or other similar assets held for public ex		
			ice of public service, provide, in Part XIII,
<b>h</b>	the text of the footnote to its financial statements that described an argentization planted as permitted under SEAS 116 (AS		and halance the strong of set bustoned
U	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pub	blic service, provide the following amounts
	relating to these items:		<b>.</b> .
	(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 tre		gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	<b>.</b> .
a	Revenues included in Form 990, Part VIII, line 1		5
b	Assets included in Form 990, Part X		<b>▶</b> \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13

Schedule D (Form 990) 2013

Sche	dule D (Form 990) 2013 SEIU LO	CAL 1107						88-60	21265	Page 2
Par	t III Organizations Maintaining C	collections of A	rt, His	torical Tr	easures, d	or Other				
3	Using the organization's acquisition, access	ion, and other record	ls, chec	k any of the	following tha	t are a sig	nificant	use of its	collection	ıtems
	(check all that apply):									
а	Public exhibition	d		Loan or excl	hange progra	ams				
þ	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's control of the organization of the organiz							ose ın Par	t XIII.	
5	During the year, did the organization solicit of					er sımılar a	issets		_	
	to be sold to raise funds rather than to be m							<u> </u>	Yes	No No
Par	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered '	"Yes" to Fe	orm 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Pa	<del></del>			· · · · · · · · · · · · · · · · · · ·					·
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	s or other as	sets not in	ncluded		_	
	on Form 990, Part X?								<b>」Yes</b>	└─ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table:						
	_								Amount	
C	Beginning balance						1c			
d	Additions during the year						1d			
_	Distributions during the year						1e			
	Ending balance						1f		T : :	<del></del>
	Did the organization include an amount on F							L_	Yes	⊢ No
Par	If "Yes," explain the arrangement in Part XIII.									
1 41	t V Endowment Funds. Complete							b		
4	Barren of control balance	(a) Current year	(b) ⊦	Prior year	(c) Two year	rs back (c	) inree y	ears back	(e) Four	years back
	Beginning of year balance	·			<u> </u>					
b	Contributions									
C	Net investment earnings, gains, and losses								<b></b>	
đ	Grants or scholarships								<del></del>	
е	Other expenditures for facilities									
f	and programs Administrative expenses	,								
	End of year balance									
g 2	Provide the estimated percentage of the cur	rent year and balanc	o /lino 1	a column (c	)) hold as:	<u>_</u>			<u>.                                    </u>	
	Board designated or quasi-endowment	rent year end balanc	%	y, coluitiii (a	a)) Helu as.					
	Permanent endowment	%								
	Temporarily restricted endowment	% %								
·	The percentages in lines 2a, 2b, and 2c short									
3a	Are there endowment funds not in the posse		ation the	at are held a	nd administa	ared for the	organi	zation		
	by:	oodon or the organiz	u	at are mora a	ina aaniiniste	3100 101 till	o organia	Lation	Γ	Yes No
	(i) unrelated organizations								3a(i)	100 110
	(ii) related organizations	•							3a(ii)	
b	If "Yes" to 3a(ii), are the related organization:	s listed as required o	n Sche	dule R?					3b	
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipn									
	Complete if the organization answere	d "Yes" to Form 990	, Part IV	/, line 11a. S	ee Form 990	, Part X, Iır	ne 10.			
	Description of property	(a) Cost or o			or other		cumulate	ed	(d) Book	value
	• • • •	basis (investr			(other)		eciation		• •	
1a	Land									
b	Buildings									
С	Leasehold improvements									<del></del>
d	Equipment			12	6,333.	1	03,6	61.	22	2,672.
e	Other			4	1,893.		31,4	57.		,436.
Total	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, colur	mn (B), line 1	10(c).)				33	3,108.

Schedule D (Form 990) 2013

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(2)	
(3)	
(4)	
(5)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

### Part X | Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	

<sup>2.</sup> Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2013

EXPLANATION: THE LOCAL HAS ANALYZED THE TAX POSITIONS TAKEN AND HAS

CONCLUDED THAT, AS OF DECEMBER 31, 2013, THERE ARE NO UNCERTAIN POSITIONS

TAKEN, OR EXPECTED TO BE TAKEN, THAT WOULD REQUIRE DISCLOSURE IN THE

FINANCIAL STATEMENTS. THE LOCAL IS SUBJECT TO ROUTINE AUDITS BY THE TAXING

JURISDICTIONS; HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS

IN PROGRESS. THE LOCAL BELIEVES IT IS NO LONGER SUBJECT TO INCOME TAX

EXAMINATIONS FOR THE YEARS PRIOR TO THE FISCAL YEAR ENDING DECEMBER 31,

2010.

hedule D (Form 990) 2012	12-4ACE-B3B4-F5F38B1CFCEA NEVADA SERVICE EMPLOYEES UNION SEIU LOCAL 1107	88-6021265 Pa
hedule D (Form 990) 2013 art XIII Supplemental In	formation (continued)	88-0021203 Pa
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### **SCHEDULE L**

(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No 1545-0047

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.

nternal Revenue Service	▶¹	nformation	about	Sched	ule L (Fori	m 990	or 990-	EZ) and	its instruction	s is a	at www.irs.gov/fo	orm99	0		spect	ion	ic
Name of the organizatio		EVADA				PLO	YEE	S UI	NON				•	identi		on nu	mber
Part I Excess		EIU LO									<del></del>	88	<u>-60</u>	212	<u>65</u>		
<del></del>									501(c)(4) org								
Complete I	tne or			_					ne 25a or 25I	o, or	Form 990-EZ, P	art V,	ine 40	)b	1,3		
(a) Name of disqual	lified pe	erson	רו (ט)		ship betv on and or			iiiled	(0	) De	scription of tran	sactio	n		( <u>a)</u>	Correc	No.
·····	<del></del> .				· · · · · ·						<del>- · · · · · · · · · · · · · · · · · · ·</del>				1."	75	140
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															1	T	
<del></del>																	
2 Enter the amount of	of tax in	curred by t	he o	rganiza	tion man	agers	or disc	qualifie	d persons du	ring	the year under		_				
section 4958			_										\$				_
3 Enter the amount of	of tax, if	any, on lin	e 2, a	above,	reimburs	ed by	the or	ganizat	tion				<b>\$</b>				
Part II Loans to	and/	or From	Int	erest	ed Per	sons						_					
								' Part \	/_line 38a or i	Form	n 990, Part IV, lin	e 26.	or if th	ne oras	nızati	nn -	
		nt on Form						., ,	,	0	1000,1 41114, 111	10 20,	0, ,, ,,	io orga	11112411	511	
(a) Name of		(b) Relations	ship		urpose	(d) Lo	an to or		) Original	(f	) Balance due	(g)	In	(h) App	proved	117 "	rıtten
interested person	'	with organiza	ıtion	of	loan		zation?	princ	ipal amount			defa	ult?	comm	uttee?	agreei	ment?
							From			_		Yes	No	Yes	No	Yes	No
MICHAEL COLL	INS	PRUSTE	Ε	SEE	DISC	<b> </b>	X		5,083.		3,833.		X	ļ	Х		X
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<u> Total</u> Part III ∣ Grants o	Y Acc	istance	Bar	ofiti-	a Into	io o to	d Da	<b>*</b> 0000	<u>▶ \$</u>		3,833.			<u> </u>		<u> </u>	
					_												
(a) Name of intere		ganization							ne 27. Amount of		(d) Type	of.	Г		\ Dura		
(a) Name of linese	sted pe	515011	'	intere	itionship sted pers organiza	on an			assistance		assistan			•	assist:	ose of ance	
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2013

Schedule L (Form 990 or 990-EZ) 2013 SEIU L	OCAL 1107	TNTON	88-6021	<u> 265</u>	Page 2					
<del></del>	_									
NEVADA SERVICE EMPLOYEES UNION  Schedule L (Form 990 or 990-EZ) 2013 SEIU L LOCAL 1107  Business Transactions Involving Interested Persons.  Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.  (a) Name of interested person   (b) Relationship between interested person and the organization   (c) Amount of transaction   (d) Description   (d) Description   (d) Description   (d) Description   (d) Description   (d) Description	3b, or 28c.		1 (-) 51							
	1 ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		organiz	zation's						
				No						
		<del> </del> -	<u> </u>							
		-	<b>-</b>							
			-		<del> </del>					
Schedule L (Form 990 or 990-EZ) 2013 SEIU LOCAL 1107  Part IV Business Transactions Involving Interested Persons.  Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.  (a) Name of interested person (b) Relationship between interested person and the organization fransaction (d) Description of transaction fransaction	1	<b></b>								
Provide additional information for response	onses to questions on Schedule L (see i	nstructions).								
SCHEDULE L. PART II. LINE	1:									
IN 2012, MICHAEL COLLINS (	TRUSTEE) WAS HELPING	THE INTER	RNATIONAL WI	TH						
THE OBAMA CAMPAIGN AND THE	INTERNATIONAL WAS	ro PROVIDE	MICHAEL WIT	гн						
LOST TIME WAGES. MONTHS L	ATER, MICHAEL WAS NO	OT COMPENSA	ATED FOR HIS	5						
LOST TIME. CONSEQUENTLY,	MICHAEL SUBMITTED A	REQUEST TO	CASH OUT I	HIS						
PAID TIME OFF FROM HIS EMP	LOYER (UMC). AS A I	RESULT, UMC	PAID MICHA	AEL						
\$5,083.32 IN COMPENSATION.										
SUBSEQUENTLY, MICHAEL RECE	IVED A CHECK FROM T	HE INTERNAT	TIONAL FOR H	HIS						
LOST TIME WAGES. MICHAEL	WAS UNDER THE IMPRES	SSION THAT	THE							
COMPENSATION HE RECEIVED F				OFF						
WHILE UMC WAS UNDER THE IM		<u> </u>								
	THE CO	JIII LINDAI I OI	THID WAS I	OIC						
LOST TIME.				<del></del>						
UMC REQUESTED THAT THE COM	PENSATION PAID TO M	ICHAEL AS I	LOST TIME BI	<u> </u>						
REIMBURSED BY THE LOCAL. I	THE LOCAL INITIALLY DID NOT PAY UMC AS UMC									
SHOULD NOT HAVE PAID MICHA	EL LOST TIME WAGES.	MICHAEL V	VAS NOTTETE	) RV						

TIME AND ISSUED A LOAN TO MICHAEL FOR \$5,083.32 DURING MARCH 2013. Schedule L (Form 990 or 990-EZ) 2013

UMC THAT HE WOULD BE TERMINATED IF THE LOST TIME WAS NOT REIMBURSED.

FACING TERMINATION OF EMPLOYMENT, THE LOCAL REIMBURSED UMC THE LOST

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.

2013 Open to Public

OMB No 1545-0047

Open to Pu Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990
NEVADA SERVICE EMPLOYEES UNION
Emplo
SEIU LOCAL 1107
88

Employer identification number 88-6021265

FORM 990, PART VI, SECTION A, LINE 6:

EXPLANATION: THE CLASSES OF MEMBERS INCLUDE A PRESIDENT, AN EXECUTIVE VICE PRESIDENT, A SECRETARY, A TREASURER, AND THREE TRUSTEES. IN ADDITION,

MEMBERS ALSO INCLUDE A VICE PRESIDENT FROM EACH BARGAINING UNIT, AT LEAST ONE CHIEF STEWARD FROM EACH CHAPTER AND THE GENERAL MEMBERSHIP OF THE LOCAL.

FORM 990, PART VI, SECTION A, LINE 7A:

EXPLANATION: THE GENERAL MEMBERSHIP OF THE LOCAL HAVE THE RIGHT TO ELECT MEMBERS OF THE LOCAL'S GOVERNING BOARD AS THEIR TERMS EXPIRE.

FORM 990, PART VI, SECTION A, LINE 8B:

EXPLANATION: THE ORGANIZATION DOES NOT HAVE OTHER COMMITTEES WITH THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: THE ORGANIZATION PROVIDED ALL MEMBERS OF THE GOVERNING BODY
WITH A COPY OF THE FORM 990 VIA MAIL OR E-MAIL. THE FORM 990 WAS REVIEWED
BY THE GOVERNING BODY MEMBERS AT THE EXECUTIVE BOARD MEETING PRIOR TO
FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

EXPLANATION: THE ORGANIZATION REGULARLY AND CONSISTENTLY MONITORS AND
ENFORCES COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY DURING THEIR BOARD
MEETINGS. ALL DECISIONS AND TRANSACTIONS MUST BE APPROVED BY THE EXECUTIVE
BOARD. IF A CONFLICT OF INTEREST IS NOTED, APPROVAL IS DENIED. ALL

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 332211 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

Name of the organization NEVADA SERVICE EMPLOYEES UNION SEIU LOCAL 1107	Employer identification number 88-6021265
OFFICERS AND EMPLOYEES OF THE LOCAL ARE EXPECTED TO FOLLO	W THE CONFLICT OF
INTEREST POLICY.	
FORM 990, PART VI, SECTION C, LINE 19:	
EXPLANATION: THE ORGANIZATION MAKES ITS GOVERNING DOCUMEN	TS, CONFLICT OF
INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO TH	E PUBLIC UPON
REQUEST.	
FORM 990, PART XII, LINE 1:	
EXPLANATION: THE MODIFIED CASH BASIS OF ACCOUNTING WAS US	SED.
FORM 990, PART XII, LINE 2C:	
EXPLANATION: THE LOCAL'S FINANCE COMMITTEE ASSUMES RESPON	SIBILITY FOR
OVERSIGHT OF THE AUDIT, THE FINANCIAL STATEMENTS AND THE	SELECTION OF
AN INDEPENDENT ACCOUNTANT. THE LOCAL'S OVERSIGHT PROCESS	DURING THE
TAX YEAR HAS NOT CHANGED.	

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SCHEDULE R (Form 990)

(Form 990)
Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate

► See separate instructions.

2013

Open to Public Inspection

Trinctions is at

Employer identification number 88-6021265

NEVADA SERVICE EMPLOYEES UNION SEIU LOCAL 1107 Name of the organization

Direct controlling entity End-of-year assets **e** Total income € Legal domicile (state or Identification of Disregarded Entities Complete of the organization answered "Yes" on Form 990, Part IV, line 33. foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity Part

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Part

(a)	(q)	(2)	(D)	(e)	(£)	6)	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	section 5 12(b)(13)	Z(D)( 13) Iled
of related organization		foreign country)	section	status (if section	entity	entity?	U
				501(c)(3))		Yes	<b>№</b>
NEVADA SEIU LOCAL 1107 ISSUES COMMITTEE -					NEVADA SERVICE		
20-5499489, 3785 EAST SUNSET ROAD, LAS	POLITICAL ACTION				EMPLOYEES UNION		
VEGAS, NV 89120	COMMITTEE.	NEVADA	527	N/A	SEIU LOCAL 1107		×
	<b>_</b>						

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

Schedule R (Form 990) 2013

DocuSign Envelope ID. 58A2E0B4-3112-4ACE-B3B4-F5F38B1CFCEA NEVADA SERVICE EMPLOYEES UNION

Page 2

88-6021265

SEIU LOCAL 1107

Schedule R (Form 990) 2013

Seneral or Percentage managing ownership ड managing partner? Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. Yes 9 Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)  $\equiv$ Disproportionate Yes No allocations? Ξ Share of end-of-year assets <u>6</u> Share of total income Ξ Predominant income (related, unrelated, excluded from tax under sections 512-514) e Direct controlling entity ፱ (c)
Legal
domicile
(state or
foreign Primary activity Name, address, and EIN of related organization <u>a</u> Part III

Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. Part IV

organizations acated as a corporation of the carried the tan year.	and and the second second								
(a)	(q)	(၁)	(P)	(e)	<b>(£)</b>	( <del>6</del> )	E	=	ş
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp,	Share of total income	Share of end-of-year	Percentage ownership	Section 512(b)(13) controlled entity?	<sup>2</sup> €(3)3°
		country)		or trust)		dosels		Yes	<u>و</u>
	Ţ								
	<del></del>								
								_	
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	<b>.</b>								
332162 09-12-13		30				Sche	Schedule R (Form 990) 2013	1990) 2	2013

88-6021265

Page 3

Schedule R (Form 990) 2013

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II. III. or IV of this schedule.					Yes	2
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ns with one or more r	elated organizations listed	l in Parts II·IV?			+
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity					1a	X
<b>b</b> Gift, grant, or capital contribution to related organization(s)					1b	×
c Gift, grant, or capital contribution from related organization(s)					ئر د	×
d Loans or loan quarantees to or for related organization(s)					₽	×
e Loans or loan guarantees by related organization(s)	,	•	•		4	×
		•			2	
f Dividends from related organization(s)					*	×
Solo of accept to related properties (a)			•			×
		•			27 ;	<b>;</b>  >
n Furchase of assets from related organization(s)			:	•	=	4 :
<ul> <li>Exchange of assets with related organization(s)</li> </ul>				-	;=	4
j Lease of facilities, equipment, or other assets to related organization(s)			•		į	×
					:	<b>&gt;</b>
K Lease of facilities, equipment, or other assets from related organization(s)			:		¥	4
l Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)				=	×
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)				1m	×
n Sharing of facilities equilipment mailing lists or other assets with related organization(s)	(s)uui				4	×
	(a)					
<ul> <li>Sharing of paid employees with related organization(s)</li> </ul>	•				<u>و</u>	4
						;
<ul> <li>P Reimbursement paid to related organization(s) for expenses</li> </ul>			•		4	×
q Reimbursement paid by related organization(s) for expenses					19	×
r Other transfer of cash or property to related organization(s)		•			1.	×
s Other transfer of cash or property from related organization(s)		•			1s	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete the	nis line, including covered	relationships and transacti	ion thresholds.		
1						
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	Method of de	(a) Method of determining amount involved	olved	
(1)						
(2)						
(6)						
(4)						
(5)						
( <b>b</b> ) 332163 09-12-13	31			Schedule R (Form 990) 2013	(Form 990	) 2013

## NEVADA SERVICE EMPLOYEES UNION SEIU LOCAL 1107

Schedule R (Form 990) 2013

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

Page 4

88-6021265

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue).

(a)	(a)	(9)	(e) (p)	<b>(£)</b>	(b)	ε	(0)	9	8
Name, address, and EIN of entity	Primary activity	ë ë	Predominant income partners sec (related, unrelated, 501(c)(3) excluded from tax	φ _	of /ear	Dispropor- tionate allocations?	Dispropor- Code V-UBI General or Percentage broate amount in box 20 managing ownership allocations? of Schooling K-1 partner? ownership	ieneral or nanaging partner?	Percentage ownership
		country)	under section 512-514) Yes No	Income	assets	Yes No	(Form 1065)	Yes No	
			-				_		
						+		+	
								_	
	•							L	!
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Schedule R (Form 990) 2013

# 2013 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	MACHINERY & EQUIPMENT		1									
4	4FURNITURE	VARIESSL		.000	16	106,333.		<del>-</del>	106,333.	85,463.		5,531
u)	5SOFTWARE	VARIESSL		000.	16	20,000.	1		20,000.	8,667.		4,000
	990 FAGE 10 CHINERY & EQ					126,333.		0	126,333.	94,130.	0	9,531
	PROGRAM SERVICES			-								
¥	6VEHICLE	VARIESSL		.000	16	41,893.			41,893.	23,079.		8,378
	SERVIC					41,893.		0	41,893.	23,079.	0	8,378
	PAGE 10 DEPR					168,226.		0	168,226.	117,209.	0	17,909
					<u>-</u>				•			
							·					
				-								
				-								
											-	
			· · · · · ·									
										-		
		_	_		_							

(D) - Asset disposed

\*ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Department of the Treasury Internal Revenue Service (99)

**Depreciation and Amortization** (Including Information on Listed Property)

➤ See separate instructions.

► Attach to your tax return.

Form 4562 (2013)

Name(s) shown on return

Business or activity to which this form relates

990

Identifying number

NEVADA SERVICE EMPLOYE	ES UNION		L				
SEIU LOCAL 1107			FORM 99				88-6021265
Part I Election To Expense Certain Propert	y Under Section 1	79 Note: If you have	any listed pro	perty, co	omplete Part	V before yo	
1 Maximum amount (see instructions)						1	500,000.
2 Total cost of section 179 property place		•				2	0 000 000
3 Threshold cost of section 179 property I						3	2,000,000.
4 Reduction in limitation. Subtract line 3 fr						4	
5 Dollar limitation for tax year Subtract line 4 from line						5	
6 (a) Description of prop	berty	(b) Cos	st (business use o	niy)	(c) Elected	cost	
		<del></del>	<del></del>				
	_		· · · · · · · · · · · · · · · · · · ·				
7 Listed property Enter the amount from 1		<u> </u>	<del></del>				
7 Listed property. Enter the amount from 1	•	·	C a a a l Z	7			
<ul><li>8 Total elected cost of section 179 proper</li><li>9 Tentative deduction. Enter the smaller of</li></ul>	-	s in column (c), lines	6 and 7			8	
10 Carryover of disallowed deduction from		012 Form 4562				9	<del></del>
11 Business income limitation. Enter the sn				F		10	·
12 Section 179 expense deduction. Add lin				ie 5	•	11	
13 Carryover of disallowed deduction to 20				13			
Note: Do not use Part II or Part III below for				_13			
Part II   Special Depreciation Allowan			t include lister	d proper	tv 1		
14 Special depreciation allowance for qualif		<del></del>					
the tax year	ilou proporty (or	ioi indii iiotod prope	nty) piaced in	30,1100	during	14	
15 Property subject to section 168(f)(1) elec	ction					15	
16 Other depreciation (including ACRS)						16	17,909.
Part III MACRS Depreciation (Do not	include listed p	roperty.) (See instruc	ctions.)			,,	
		Section A	· ·				<u>,</u>
17 MACRS deductions for assets placed in	service in tax ye	ears beginning befor	e 2013			17	
18 If you are electing to group any assets placed in servi	ce during the tax year	into one or more general a	sset accounts, che	eck here	▶ □		
Section B - Assets I	Placed in Service	e During 2013 Tax	Year Using t	he Gene	eral Deprecia	tion Syste	em
(a) Classification of property	(b) Month and year placed in service	(c) Basis for deprecia (business/investment only - see instructio	use (a) H	ecovery eriod	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property							
<b>b</b> 5-year property				•		-	
c 7-year property							
d 10-year property							
e 15-year property	]						
f 20-year property	]						
g 25-year property			25	yrs.		S/L	
h Residential rental property	/		27.	5 yrs.	MM	S/L	
- Hesideridal Ferital property	/		27.	5 yrs.	MM	_S/L	
i Nonresidential real property	/	. <u> </u>	39	yrs.	MM	S/L	
	//	L			MM	S/L	<u> </u>
Section C - Assets PI	aced in Service	During 2013 Tax Y	ear Using the	e Altern	ative Deprec	iation Sys	tem
20a Class life						S/L	<u></u>
b 12-year			12	yrs.	ļ	S/L	<u> </u>
c 40-year	/		40	yrs.	MM	S/L	L
Part IV Summary (See instructions.)	<del></del>					<del></del>	
21 Listed property. Enter amount from line						21	<u> </u>
22 Total. Add amounts from line 12, lines 1							
Enter here and on the appropriate lines	-	·		ee instr	<u> </u>	22	17,909.
23 For assets shown above and placed in s	_	e current year, enter	the	_			
portion of the basis attributable to section	JII ZOJA COSTŠ			23			i

gcu;	Şı <b>y</b> n Envelo	pe ID: 58A2E(	)B4-3112-4/ NEV	ACE-B3B4-F	5F38B1CI	FCEA	OT.OVE	יביכ זו	NIT (	NT.						
For	rm 4562 (20	013)		U LOCA			LOIL	ט ממי	1410	14			88-	6021	265	Daga 0
_		isted Propert					cles, cer	tain com	puters	s, and pror	nerty use	ed for er	tertainn	nent rec	reation	Page 2
	a	musement.) <b>lote:</b> For any v hrough (c) of S	ehicle for wi	hich you are	using the	standar	d mileag	e rate or								
_	<del>,</del>			on and Othe					nstruc	tions for lii	mits for i	passeno	er auton	nobiles )		
24:	a Do vou ha	ve evidence to s						es L	No	24b If "Y					Yes	□No
=			(b)	(c)	1	-	<u> </u>	(e)	<u> </u>	(f)		g)				<u> NO</u>
	Type of p (list vehic	roperty	Date placed in service	Business investmer use percent	it o	( <b>d)</b> Cost or her basis	I /bus	sis for depre siness/inve use only	stment	Recovery period	Met	hod/ ention	Depre	h) eciation uction	Elec sectio co	ted n 179
25	Special de	preciation allo	wance for q	ualified listed	property	/ placed	in servi	ce during	the to	ax year an	d					
	used more	than 50% in	a qualified b	usiness use								25	_	_		
<u>26</u>	Property u	ised more than	1 50% in a c	ualified busi	ness use.											
					%											_
				_	%											
_					%					L			<u> </u>			
27	Property L	ised 50% or le	ess in a quali	fied busines	1						<del></del>					
_					%						S/L -		-			
					%						S/L·					
20	Add amou	ents en column	(b) lines 05	through 07	<u>% </u> Fatar bas		- 1 01				S/L -	1 00		-		
		ints in column						, page 1				28	<u> </u>	1 00		
<u> 23</u>	Add amou	into in column	(I), III IE 20. L		Section I			on Hso	of Vot	niolos	<del></del>		-	29	<u> </u>	
to y	your emplo	yees, first ansv	wer the ques	stions in Sec		see if yo a)	1	an excep b)	otion to	(c)	, <del></del>	ection f	r	vehicles e)	s. (f	)
30		ess/investment r t include comm		uring the	Vel	nicle	Vel	hicle	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	/ehicle	Veh	icle	Veh	nicle	Vehi	cle
31	Total com	muting miles d	lrıven durıng	the year						,						
32	Total othe driven	r personal (nor	ncommuting	) miles												
33		driven during 30 through 32	the year.													
34	Was the v	ehicle availabl	e for person	al use	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	during off-	duty hours?														
35		ehicle used pr wner or relate		more					<u> </u> 							
36	Is another use?	vehicle availal	ble for perso	onal												
			Section C	- Questions	for Emp	loyers V	Vho Pro	vide Vel	nicles	for Use b	y Their I	Employ	ees	-		
		questions to d ted persons.	letermine if y	you meet an	exception	n to com	pleting	Section I	B for v	ehicles us	ed by er	nployee	s who a	re not m	ore than	5%
37	Do you ma	aintain a writte s?	n policy stat	ement that p	orohibits a	all perso	nal use o	of vehicle	es, inc	luding cor	nmuting	, by you	ır		Yes	No
38		aintain a writte s? See the inst										our				
39		at all use of ve					1110010, 0		, 01 17	o or more	04411613					<del>                                     </del>
		ovide more tha	-	· ·	-		Informat	tion from	vour	emplovees	s about				1	<b>†</b>
		the vehicles, a							,	,5.0,000						
41		et the require					monstra	ation use	?							1
		our answer to 3								covered ve	hicles.					
P	art VI A	mortization														
		(a) Description of	costs	Da	(b) te amortization		(C) Amortizat	ole		<b>(d)</b> Code		(e) Amortiza		A	(f) mortization	

Part VI Amortization					
(a) Description of costs	(b) Date amortization begins	(C) Amortizable amount	(d) Code section	(e) Amortization penod or percentage	(f) Amortization for this year
42 Amortization of costs that begins during	your 2013 tax year:				
43 Amortization of costs that began before	your 2013 tax year			43	
44 Total. Add amounts in column (f). See the	he instructions for whe	ere to report		44	

316252 12-19-13

Form **4562** (2013)