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DLN: 93493135056545

Form **990** 

Department of the Treasury Internal Revenue Service

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

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

▶ Do not enter social security numbers on this form as it may be made public

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

Open to Public Inspection

A F	or the 2	2014 ca	lendar year, or tax year beginnin	g 01-01-2014 , and ending 12-31-	2014				
<b>B</b> C	heck if ap	pplicable	C Name of organization LABORERS' INTERNATIONAL UNION	OF HCI		D Emplo	yer iden	tification number	
☐ A	ddress ch	ange	B BONERO IN ENTENTION E ONION	53-00	53-0088501				
ГΝ	ame char	nge	Doing business as						
┌ Ir	ııtıal retur	m				E Telepho	ne numb	oer	
	nal :turn/term	nınated	Number and street (or P O box if n 905 16TH STREET NW	naıl ıs not delivered to street address) Roor	m/suite				
•	mended r					(202)	737-8	320	
_	menaea r pplication		City or town, state or province, cou WASHINGTON, DC 200061703	ntry, and ZIP or foreign postal code		<b>G</b> Gross re	eceıpts \$	105,998,953	
			<b>F</b> Name and address of prii	ncipal officer	H(a)	Is this a group	return	for	
			TERENCE M O'SULLIVAN		'(")	subordinates?	recuiii	Γ Yes <b>Γ</b> No	
			905 16TH STREET NW WASHINGTON, DC 20006	1703	ЦЪ	A II			
			·			Are all subordi included?	nates	Γ Y es Γ No	
I T	ax-exem	pt status	501(c)(3) 501(c)(5)	(insert no )		If "No," attach	a lıst (	(see instructions)	
JV	Vebsite	:: <b>►</b> WV	VW LIUNA ORG		H(c)	Group exempt	ion num	nber <b>⊳</b> 0121	
<b>K</b> Fo	rm of org	janizatior	Corporation Trust Association	n Cother ►	<b>L</b> Ye	ar of formation 19	03 <b>M</b> 9	State of legal domicile DC	
P	art I	Sum	nmary						
23	т	ГО ІМР	lescribe the organization's mission ROVE WORKING CONDITIONS TION AND TRAINING, EMPLOY	S AND LIVING STANDARDS OF M	EMBERS TH	HROUGH COLLI	ECTIVE	BARGAINING,	
Governance									
ē	-								
307	2 0	Check t	his box দ if the organization di	scontinued its operations or dispos	ed of more	than 25% of its	net ass	sets	
	3 1	Number	of voting members of the govern	ing body (Part VI, line 1a)			з	15	
Activities &				of the governing body (Part VI, line			4	0	
<u> </u>	5 T	Γotal nu	ımber of ındıvıduals employed ın	calendar year 2014 (Part V, line 2a	1)		5	275	
à	6 T	Γotal nu	ımber of volunteers (estımate ıf r	ecessary)			6	0	
	<b>7</b> a ⊺	Γotal un	related business revenue from P	art VIII, column (C), line 12			7a	0	
	b∖	Net unre	elated business taxable income f	rom Form 990-T, line 34			7b	0	
						Prior Year		Current Year	
a)	8			ne 1 h)			0	0	
Revenue	9			ne 2g)		77,786,483		78,820,603	
Æ	10 11			(A), lines 3, 4, and 7d) lines 5, 6d, 8c, 9c, 10c, and 11e)	·	272,0			
	12			(must equal Part VIII, column (A)	line	2/2,0	753	488,167	
					,	89,961,6	505	73,013,602	
	13		, ,	IX, column (A), lines 1-3)			0	0	
	14			X, column (A), line 4)			0	0	
ø	15	Saları 5–10		ee benefits (Part IX, column (A), lin	es	44,282,4	128	44,328,307	
Expenses	16a			column (A), line 11e)	—		0	0	
- <b>क</b>	ь		undraising expenses (Part IX, column (D						
Ð				· · · · · · · · · · · · · · · · · · ·	_	27,700,8	2.2.4	20 220 201	
	17 18			lines 11a-11d, 11f-24e) st equal Part IX, column (A), line 2		71,983,2		28,338,381 72,666,688	
	19			18 from line 12		17,978,3	_	346,914	
<u>*</u>			p. 22 22 2 222 323 1110			ginning of Curre	_	End of Year	
Net Assets or Fund Balances						Year			
A SS	20					172,931,5	_	179,121,289	
¥ 5	21					726,9		101,290	
	22 17t III		ssets or fund balances Subtract nature Block	line 21 from line 20	•	172,204,6	10	179,019,999	
U nd my l	er pena knowled	Ities of Ige and	perjury, I declare that I have ex	amined this return, including accom nplete Declaration of preparer (oth					
		<b>_</b>				2015-05-15			
Sig		Sign	ature of officer			Date			
Hei	re		AND SABITONI GENERAL SEC/TREAS						
		<u> </u>	e or print name and title Print/Type preparer's name	Preparer's signature	Data	T., . —	PTIN		
D-	id	[ ]	Print/Type preparer's name JOANN WOODSON CPA	JOANN WOODSON CPA	Date	Check If self-employed	P11N P01293	745	
Pai			Firm's name 🕩 CALIBRE CPA GROUP I	PLLC		Firm's EIN 🕨 47	7-090088	0	
	epare e Onl		Firm's address F 7501 WISCONSIN AVEN WEST BETHESDA, MD 20814			Phone no (202	) 331-98	80	

✓ Yes ☐ No

4e Total program service expenses ►

Part IV Checklist of Required Schedule	art IV	Checklist of	Required	Schedules
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			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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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 $I^{\bullet}$	3		No
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,	5	Yes	
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 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
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			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	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	Yes	
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	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
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		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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? <i>If "Yes," complete Schedule J</i>	23	Yes	
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		No
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		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	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 "Yes," complete Schedule L, Part II	26		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note, All Form 990 filers are required to complete Schedule O	38	Yes	

Vest   No.	Pal				_
1a Enter the number reported in 30x 3 of from 1.09 & Enter - 0 - if not applicable   10   0   0   0   0   0   0   0   0		Check if Schedule O contains a response or note to any line in this Part V	• •	Voc.	.l
be Enter the number of Forms W-2G included in the 1a Enter-O-1 finet applicable   10   10   10   10   10   10   10   1	1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable and 1a 69		res	NO
but the organization camply with backup withholding rules for reportable payments to vendors and reportable gaming (permitted) without part with the complex payments of the properties of the payment of the properties of the payment					
gamming (gamming) without prize without parts of the property of the promised of the property					
Tax Steements, filed for the celerary year ending with or within the year covered by this return 27 b of a least one is reported on line 2a, did the organization file all required dediral employment tax returns 27 b. If all least one is reported on line 2a, did the organization file all required tederal employment tax returns 27 b. Note. If the sum of lines 1 and 22 is greater than 250, you may be required to endine (see instructions).  30 Did the organization have unrelated businesses gross income of \$1,000 or more during the year?  30 Did the organization file all form 990-T for this year? If "No" to the 2b, provide an explanation or Schedule 0.  30 Did 11" (e.g., "In the 3 per 10 per		gaming (gambling) winnings to prize winners?	1c	Yes	
by this return	2a				
but it least one is reported on time 2s, did the organization file all required federal employment tax returns? Note. If the sum of lines 1 a and 2a is greater than 250, you may be required to e-file (see instructions)  30 Did the organization have unrelated business gross income of \$1,000 or more during the year? 31 Did the organization have unrelated business gross income of \$1,000 or more during the year? 32 Did the organization have unrelated business gross income of \$1,000 or more during the year? 33 Did 18 D					
Note. If the sum of lines 1a and 2 a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3b No  1 If Yes, "has it filed a Farm 950-T for this year? If "Wo" to line 3b, provide an explanation in Schedule O.  4a At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country. ►A  See instructions for filing requirements for FinC N Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5b Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  5c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  6c Does the organization have annual gross receipts that are normally greater than \$100,00 and did the organization have annual gross receipts that are normally greater than \$100,00 and did the organization have annual gross receipts that are normally greater than \$100,00 and did the organization have annual gross receipts that are normally greater than \$100,00 and did the organization have annual gross receipts that are normally greater than \$100,00 and did the organization have annual gross receipts that are normally greater than \$100,00 and did the organization have annual gross receipts that are normally greater than \$100,00 and did the organization include with every solicitation an express statement that such contributions or girls were included to the payor solicitation an express statement that such contributions or girls were included that the grown and that were the solicitation and payors that the grown and the solicitation and services provided?  7 Organization that may receive deductible contributions under section 170(c).  8 Did the organization processes a payment in excess of \$75 made partly six contribution and partly for poods and services provided?  9 Did the organizat	ь	27 1110 1011111 1 1 1 1 1 1 1 1 1 1 1 1 1			
b If Yes,* has a field a Form 90-T for this year* If Year to Inve 3b, provide an explanation in Schedule 0.  4a Karpy time dump the calendar year, did the organization have an interest in, or a signature or other authority or a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR)  5 Form interview in the financial account in a foreign country ▶CA  5 See instructions for finding requirements for FINCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)  5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5 Did any taxeble party notify the organization that it was or its a party to a prohibited tax shelter transaction?  5 Ci Firves,* to line 5 a or 5b, did the organization file Form 8886-T?  6 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that there not tax deductibles as character contributions?  6 If Yes,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization necesses and payment in excesses 6.75 made party as a contribution and partly for goods and services provided to the payor?  8 Diff Yes,* indicate the number of Forms 8.292 filed during the year.  7 If If Yes,* indicate the number of Forms 8.292 filed during the year.  7 If If we organization necesses any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 If the organization receive a contribution of cars, boats, airplanes, or other vehicles, did the organization file?  8 Possion for organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions			2b	Yes	
b If Yes,* has a field a Form 90-T for this year* If Year to Inve 3b, provide an explanation in Schedule 0.  4a Karpy time dump the calendar year, did the organization have an interest in, or a signature or other authority or a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR)  5 Form interview in the financial account in a foreign country ▶CA  5 See instructions for finding requirements for FINCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)  5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5 Did any taxeble party notify the organization that it was or its a party to a prohibited tax shelter transaction?  5 Ci Firves,* to line 5 a or 5b, did the organization file Form 8886-T?  6 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that there not tax deductibles as character contributions?  6 If Yes,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization necesses and payment in excesses 6.75 made party as a contribution and partly for goods and services provided to the payor?  8 Diff Yes,* indicate the number of Forms 8.292 filed during the year.  7 If If Yes,* indicate the number of Forms 8.292 filed during the year.  7 If If we organization necesses any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 If the organization receive a contribution of cars, boats, airplanes, or other vehicles, did the organization file?  8 Possion for organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions	За	Did the organization have unrelated husiness gross income of \$1,000 or more during the year?	3a		Nο
49. At any time during the celendar 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, or other financial account)?  5. If "Yea," enter the name of the foreign country > C.A.  5. See instructions for filling requirements for FincER Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5. Was the organization a party to a prohibited tax shelter transaction?  5. If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5. If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  5. Oses the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6. If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7. Organization shart may receive deductible contributions under section 170(c).  8. If the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payment of the organization necess of \$75 made partly as a contribution and partly for goods and services provided to the payment of the solid payment of the solid payment of the solid payment of the organization necess of \$75 made partly as a contribution and partly for goods and services provided to the payment of the solid payment of the solid payment of the solid payment of the organization necess of \$75 made partly as a contribution of the solid payment of the					-110
over, a financial account in a foreign country (such as a bank account, secuntes account, or other financial accounts (**Yes," enter the name of the foreign country (**DA**)  If "Yes," enter the name of the foreign country (**DA**)  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (**PAR**)  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (**PAR**)  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (**PAR**)  By the seed of the companies of the seed		· · · · · · · · · · · · · · · · · · ·			
b If "Yes," enter the name of the foreign country ▶ □ A See instructions for filling requirements for FinC EN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)  55 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  56 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  57 If "Yes," to line 5s or 5b, did the organization file Form 8886-T?  58 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  58 Organization include with every solicitation are express statement that such contributions or gifts were not tax deductible?  59 Organization shaft may receive deductible contributions under section 170(c).  10 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?  10 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?  11 Did the organization is sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82827?  12 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required?  13 Did the organization for general payor premiums, directly or indirectly, on a personal benefit contract?  14 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as form 1098-c?  15 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as form 1098-c?  16 Did the organization semitationing donor advised funds.  17 Did the organization and the payor		over, a financial account in a foreign country (such as a bank account, securities account, or other financial	42	v	
See instructions for filing requirements for FincE N Form 114, Report of Foreign Bank and Financial Accounts (FBAR)  58 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  59 No  10 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  50 Did any taxable party notify the organization file Form 8886-T2  69 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as chantable contributions?  60 Pi 'Yes,' ind the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  70 Organizations that may receive deductible contributions under section 170(c).  81 Did the organization traceive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?  81 Pi 'Yes,' indicate the number of forms 8282 filed during the year.  92 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82822?  93 If the organization received a contribution of undirectly, to pay premiums on a personal benefit contract?  94 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  95 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required?  95 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C2?  96 Did the sponsoring organizations maintaining donor advised funds.  97 Did the organization maintaining donor advised funds.  98 Did the sponsoring organization make any taxable distributions under section 4966?  99 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  90 Did the sponsoring org			- <del>1</del> a	Yes	
(FBAR)  Sa Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  Sa No b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  Sb No c If "Yes," to line 5 a or 5½, did the organization file Form 8886-T7  Sc Osos the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as chantable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?  Did the organization network the donor of the value of the goods or services provided?  The services provided to the payor?  Did the organization include with every solicitation and partly for goods and services provided to the payor?  If "Yes," indictate the number of forms 8282 filed during the year of the goods or services provided?  The provided to the payor?  Did the organization of the value of the goods or services provided?  The provided to the payor?  If "Yes," indictate the number of forms 8282 filed during the year.  A life organization during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  The provided to the payor of the payor o	b	If "Yes," enter the name of the foreign country  \(\bigs_CA\)			
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5 If "yes," to line 5 a or 5b, did the organization file Form 886-T7  5 C  6 Dose the organization have annual gross receipts that are normally greater than \$100,000, and did the organization object any contributions that were not tax deductible as charitable contributions?  6 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 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?  9 Did the organization notify the donor of the value of the goods or services provided?  10 Did the organization in notify the donor of the value of the goods or services provided?  11 "Yes," indicate the number of Forms 8282 filed during the year  2 Did the organization of uning the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  3 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8289 as required?  4 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  7 Did the sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  9 Did the sponsoring organizations make a distribution to a donor, donor advised, or related person?  9 Did the sponsoring organization make a distribution to a donor, donor advised, or related person?  9 Did the sponsoring organization make a distribution to a donor, donor advised, or related person?  9 Did the sponsoring organization make a distribution to a donor, donor advised, or related person?  9 Did the sponsoring organization an					
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c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  5c  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 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?  8 If "Yes," indicate the number of Forms 8282 filed during the year.  9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  10 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  11 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  12 Did the organization receive a contribution of qualified intellectual property, did the organization file Form 8899 as required?  13 Did the organization received a contribution of cars, boats, airplanes, or other whickes, did the organization file a Form 1098-C?  14 Did the organizations maintaining donor advised funds.  15 Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  18 Section 501(c)(7) organizations. Enter  19 Did the sponsoring organization make any taxable distributions under section 4966?  20 Section 501(c)(12) organizations. Enter  21 Institution fees and capital contributions included on Part VIII, line 12.  22 Section 501(c)(12) organizations. Enter  23 Section 501(c)(12) organizations. Enter  24 If "Yes," enter the amount of tax-exempt interest received or accrued during the year  25 Section 501(c)(12) qualified monprofit health insurance issuers.  1	b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5h		Νο
Sc   Sc   Sc   Sc   Sc   Sc   Sc   Sc			J.		
organization solicit any contributions that were not tax deductible as charitable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  Did the organization notify the donor of the value of the goods or services provided?  Did the organization in notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8.28.2?  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If the organization received a contribution of qualified intellectual property, did the organization file Form 8.899 as required?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  Did the sponsoring organization make any taxable distributions under section 4966?  Sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any taxable distribution to a donor, donor advisor, or related person?  Did the sponsoring organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  Section 501(c)(7) organizations. Enter  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  Section 501(c)(7) organizations fo	-	2	5c		
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a 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?  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  7 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1093-C?  Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Section 501(c)(7) organizations. Enter  1 Intiation fees and capital contributions included on Part VIII, line 12  Section 501(c)(12) organizations. Enter  3 Gross income from members or shareholders  6 Gross income from members or shareholders  6 Gross income from members or shareholders  6 Gross income from members or shareholders  1 Section 501(c)(12) organizations. Enter  a Gross income from members or shareholders  6 Gross income from members or shareholders  1 Section 501(c)(12) organizations in the organization in filing Form 990 in lieu of Form 1041?  1 Press, enter the amount of tax-exe	6a		6a		Νo
were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$7.5 made partly as a contribution and partly for goods and services provided to the payor?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  If Yes, 'indicate the number of Forms 8282 filed during the year 7d 7d  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sonosonio organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  By Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them)  Section 501(c)(12) organizations. Enter  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  Section 501(c)(12) organizations included on Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations in formation the organization must report on Schedule O  Formation of reserves the organization information the organi	b	·			
a 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?  7b   1f*Yes," did the organization notify the donor of the value of the goods or services provided?  7b   1f*Yes," did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form \$282?  d   1f*Yes," indicate the number of Forms \$282 filed during the year   7d   7d   7e   7d   7d   7d   7d   7d		were not tax deductible?	6b		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	_				
to Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year	а		7a		
file Form 8282?		· · · · · · · · · · · · · · · · · · ·	7b		
be Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	С		7c		
contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? f If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  Pa Did the sponsoring organization make any taxable distributions under section 4966?  9a Did the sponsoring organization make any taxable distributions under section 4966?  9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9b Did the sponsoring organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12  10a Did Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  1 Section 501(c)(12) organizations. Enter  3 Gross income from members or shareholders  4 Gross income from members or shareholders  5 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  11a	d	If "Yes," indicate the number of Forms 8282 filed during the year			
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	e		70		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  7h  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  8  9a Did the sponsoring organization make any taxable distributions under section 4966?  9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9b Did the sponsoring organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12  10a Did Core form 990, Part VIII, line 12, for public use of club facilities  1 Section 501(c)(12) organizations. Enter  3 Gross income from members or shareholders  4 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  11b	f				
required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  9a Did the sponsoring organization make any taxable distributions under section 4966?  9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9b Did the sponsoring organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12  10a Did Section 501(c)(7) organizations. Enter  3 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  1 Section 501(c)(12) organizations. Enter  3 Gross income from members or shareholders  4 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  11b		· · · · · · · · · · · · · · · · · · ·			
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Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	h				
Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			/h		
during the year?	0				
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		during the year?	8		
a Initiation fees and capital contributions included on Part VIII, line 12 10a   b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  1. Section 501(c)(12) organizations. Enter a Gross income from members or shareholders	9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a Initiation fees and capital contributions included on Part VIII, line 12 10a   b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  1. Section 501(c)(12) organizations. Enter a Gross income from members or shareholders	b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  1 Section 501(c)(12) organizations. Enter  a Gross income from members or shareholders	LO	Section 501(c)(7) organizations. Enter			
facilities  1. Section 501(c)(12) organizations. Enter  a Gross income from members or shareholders	а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
a Gross income from members or shareholders	b				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )	1	Section 501(c)(12) organizations. Enter			
against amounts due or received from them )	а	Gross income from members or shareholders			
2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	b	'			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		against amounts due or received from them)			
year	L2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
3 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand	-	year			
Note. See the instructions for additional information the organization must report on Schedule O  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand	L3 _				
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	а		13a		
c Enter the amount of reserves on hand	b	Enter the amount of reserves the organization is required to maintain by the states			
\		when the organization is needed to issue qualified fleater plans.			
	С	Enter the amount of reserves on hand	ļ	ļ	
	1 <b>4a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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 a	y line in this Part VI	▽

Se	ction A. Governing Body and Management					
					Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year	1a	15			
	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	0			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management con			3		No
4	Did the organization make any significant changes to its governing documents since filed?	the p	orior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the or	rganız	ation's assets? .	5		No
6	Did the organization have members or stockholders?			6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the pow	erto	elect or appoint one or			
	more members of the governing body?			7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?			7b	Yes	
8	Did the organization contemporaneously document the meetings held or written active year by the following	ons ui	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>			9		No
Se	ection B. Policies (This Section B requests information about policies not	requi	ired by the Internal R	even	ıe Cod	e.)
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization			10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of it the form?	s gov	erning body before filing	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this F	orm 9	90			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13 .			12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts?	y inte	erests that could give	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done	the p	olicy? If "Yes," describe	12c	Yes	
13	Did the organization have a written whistleblower policy?			13	Yes	
14	Did the organization have a written document retention and destruction policy? .			14	Yes	
15	Did the process for determining compensation of the following persons include a revi independent persons, comparability data, and contemporaneous substantiation of th					
а	The organization's CEO, Executive Director, or top management official			15a		No
b	Other officers or key employees of the organization			15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?	or sım	ıılar arrangement wıth a	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	step	s to safeguard the	16b		

#### Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
  - Own website Another's website Vupon 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, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records
  ►ARMAND E SABITONI GEN SEC-TREAS
  - 905 16TH STREET NW
    - WASHINGTON, DC 20006 (202) 737-8320

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ♦ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or 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 nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot	not box h an or/tr	checked Highest compensated	ess er e)	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
GENERAL PRESIDENT				х				670,907	0	171,642
(2) ARMAND E SABITONI  GENERAL SECRETARY/TREASURER	50 00			х				478,114	0	166,590
(3) VERE O HAYNES	12 00			Х				131,729	0	61,307
VICE PRESIDENT				Ĺ				131,723		01,307
(4) TERRENCE M HEALY	50 00			×				361,805	0	135,769
VICE PRESIDENT & REG MGR								001,000		
(5) RAYMOND M POCINO VICE PRESIDENT & REG MGR	50 00			х				315,901	0	106,904
(6) JOSEPH S MANCINELLI	50 00			х				276 726	0	110 509
VICE PRESIDENT & REG MGR								376,736	U	110,598
(7) ROCCO DAVIS	50 00			х				365,903	0	134,379
VICE PRESIDENT & REG MGR (8) VINCENT R MASINO	50 00			х				312,712	0	108,209
VICE PRES & ASST REG MGR  (9) DENNIS L MARTIRE	50 00									
VICE PRESIDENT & REG MGR				х				305,404	0	122,399
(10) ROBERT E RICHARDSON	50 00			х				309,031	0	121,017
VICE PRESIDENT & REG MGR (11) RALPH E COLE	12 00									
VICE PRESIDENT				Х				109,251	0	60,878
(12) JOHN F PENN	50 00			х				314,423	0	121,017
VICE PRESIDENT & REG MGR (13) OSCAR DE LA TORRE	12 00									
VICE PRESIDENT				Х				104,690	0	55,648
(14) SERGIO RASCON VICE PRESIDENT	12 00			х				104,840	0	55,211
	I	l				<u> </u>				Form <b>990</b> (2014)

## Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week (list	more pers	than on is	one bot	not box h ar	offic	ess er	( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	any hours for related organizations below dotted line)	a Individual trustee or director	a Institutional Trustee	Office:		# Highest compensated	•	organization (W- 2/1099- MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
(15) JOHN F HEGARTY VICE PRESIDENT	12 00			х				84,319	0	54,30
(16) RODERICK BENNETT CHIEF OF STAFF	45 00				х			231,117	0	87,46
(17) WILLIAM BERGFELD  EXEC ASSISTANT TO GP	45 00				х			269,480	0	92,970
(18) THEODORE GREEN GENERAL COUNSEL	45 00				х			348,643	0	130,83
(19) REX HOLLIS JR BUILDING MANAGER	45 00				х			179,358	0	84,760
(20) GREG HARRIS SUBREGIONAL MANAGER	45 00					х		214,039	0	64,43
(21) STEPHEN FARNER ASST REG MNGR	45 00					х		245,932	0	105,52
(22) DAVID HAYES ASST REG MNGR	45 00					х		223,402	0	87,270
(23) MICHAEL BARRETT ASSOC GENERAL COUNSEL	45 00					х		232,089	0	101,76
(24) JOHN REID  ASST REG MGR	45 00					х		272,969	0	86,94
(25) MICHAEL BEARSE FORMER GENERAL COUNSEL	4 00						х	168,440	0	22,27
1b Sub-Total			•			<b> </b>				
c Total from continuation sheets to Part	VII, Section A					•				
d Total (add lines 1b and 1c)	<u></u> .		<u>.                                    </u>			<u>•</u>		6,731,234	0	2,450,103
2 Total number of individuals (including h					201/6	) who	rec	ewed more than	•	

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►110

			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such		1	1
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

#### **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
REQUITY REAL ESTATE GROUP LLC 1210 CORBIN COURT MCLEAN, VA 22101	PROJECT CONSULTING	426,780
PATTON BOGGS LLP 2550 M STREET NW WASHINGTON, DC 20037	LEGAL	283,333
LAW OFFICES OF JAMES S RAY 706 DUKE ST ALEXANDRIA, VA 22314	LEGAL	247,068
MILLER & CHEVALIER CHARTERED 655 15TH STREET NW SUITE 900 WASHINGTON, DC 20005	LEGAL	239,601
SQUIRE PATTON BOGGS LLP 2550 M STREET NW WASHINGTON, DC 20037	LEGAL	220,343
- Takal ususahan aftur dan andan kasakusakan aftur (malisidus na kukusak lusak dan khasa lusak da kasak	\ la a	I

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►14

Part VIII	Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII								
	Check if Sched	uie O contains a respo	nse or note to any lin	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
v 1a	Federated cam	ipaigns 1a							
m m	Membership di	ues <b>1b</b>							
ן פֿבּי	: Fundraising ev	ents <b>1</b> 0							
. ₹ ( )	_								
.   ≣ ⊊		zations 1d							
ons, Gifts, Grants Similar Amounts	Government grant	ts (contributions) <b>1e</b>							
₽%  1	<ul> <li>All other contributi similar amounts no</li> </ul>	ions, gifts, grants, and <b>1f</b> ot included above							
tributio Other	9	ions included in lines	İ	i					
토필니 .	1a-1f \$	- 4 - 44							
<u> </u>	n Total. Add line	sla-1f	· · · · •						
e l			Business Code						
		HER FEES	900099	78,820,603	78,820,603				
ا عق	·								
936									
Ser   'S	i								
Program Service Revenue									
- Book   1	f All other progra	am service revenue							
<u>Ā</u> ,	<b>j Total.</b> Add line	s 2a-2f		78,820,603					
3		come (including divider		2,003,711			2,003,711		
4		lar amounts) stment of tax-exempt bond		, ,			<u> </u>		
5			` . F	803,799			803,799		
		(ı) Real	(II) Personal						
6	<b>a</b> Gross rents	950,817							
1	Less rental expenses	1,459,505							
(	D t - 1	-508,688							
		me or (loss)		-508,688			-508,688		
		(ı) Securities	(II) O ther						
7	Gross amount from sales of assets other than inventory	23,125,219							
1	Less cost or other basis and	22,944,201	8,479,897						
	sales expenses								
	Gain or (loss)	181,018	-8,479,897	0 200 070			0 200 070		
٩	<ul><li>Net gain or (los</li><li>Gross income t</li></ul>	ss)		-8,298,879			-8,298,879		
Other Kevenue	events (not inc \$	luding s reported on line 1c)							
높	•	а							
<u> </u>		penses b							
_   `		(loss) from fundraising	events 🛌						
9		from gaming activities ne 19							
		a							
1		openses b							
		(loss) from gaming act	ivities						
10	<ul> <li>Gross sales of returns and all</li> </ul>								
		a	231,127						
	Less cost of g	oods sold <b>b</b>	101,748						
_ (		(loss) from sales of inv	entory .	129,379	129,379				
	Mıscellaneou		Business Code	_					
114		OUS	900099	63,677	63,677				
'									
'									
	All other reven								
•	Total. Add line	s 11a-11d	•	63,677					
12	Total revenue.	See Instructions .	🕨	72.042.502	70.040.650				

	·	
Part IX	Statement of Functional Expenses	
Section 50	1(c)(3) and $501(c)(4)$ organizations must complete all columns	All other organizations must complete column (A)
<u> </u>		

		other organization			
	Check if Schedule O contains a response or note to any line in this	Part IX			
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	9,181,337			
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	19,587,825			
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	4,689,335			
9	Other employee benefits	9,324,565			
10	Payroll taxes	1,545,245			
11	Fees for services (non-employees)				
а	Management				
b	Legal	1,893,928			
c	Accounting	290,783			
d	Lobbying	204,264			
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	313,248			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	898,280			
12	Advertising and promotion	867,145			
13	Office expenses	2,462,686			
14	Information technology	1,025,832			
15	Royalties				
16	Occupancy	3,322,894			
17	Travel	3,798,062			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,600,742			
20	Interest				
21	Payments to affiliates	5,403,086			
22	Depreciation, depletion, and amortization	1,153,849			
23	Insurance	592,637			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	CONTRIBUTIONS	1,901,529			
b	ORGANIZING CAMPAIGN EXP	1,151,320			
c	FOREIGN EXCHANGE	660,529			
d	OTHER GENERAL ADMIN EXP	354,926			
е	All other expenses	442,641			<del></del> _
25	Total functional expenses. Add lines 1 through 24e	72,666,688			
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)				

Part X Balance Sheet

	· ·	Check if Schedule O contains a response or note to any line i	n this F	Part X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			163	1	475
	2	Savings and temporary cash investments			12,672,167	2	14,009,664
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			1,258,901	4	1,211,074
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete Schedule L	Part II			5	
<del>i</del> s	6	Loans and other receivables from other disqualified persons (section 4958(f)(1)), persons described in section 4958(c)(3 employers and sponsoring organizations of section $501(c)(9)$ beneficiary organizations (see instructions) Complete Part II	)(B), aı ) volun	nd contributing tary employees'		6	
Assets	7	Notes and loans receivable, net				7	
¥	8	·				8	
	_	Inventories for sale or use				9	
	9 10a	Prepaid expenses and deferred charges Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	47.070.000		9	
	Ь	Less accumulated depreciation	10b		14,696,595	100	9,596,466
	11	Investments—publicly traded securities		<u> </u>	50,082,525		53,050,252
	12	Investments—other securities See Part IV, line 11	94,151,321	12	100,699,137		
	13	·			94,151,521	13	100,099,137
		Investments—program-related See Part IV, line 11					
	14	Intangible assets			20.040	14	554.004
	15	Other assets See Part IV, line 11			69,912		554,221
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			172,931,584		179,121,289
	17	Accounts payable and accrued expenses				17	
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities				20	
$\mathcal{Q}$	21	Escrow or custodial account liability Complete Part IV of Sc	hedule	D		21	
ilitie	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqua					
Liabilit		persons Complete Part II of Schedule L				22	
<b>=</b>	23	Secured mortgages and notes payable to unrelated third part	ies .			23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to reland other liabilities not included on lines 17-24) Complete P			700 074		104.000
		D			726,974	25	101,290
	26	Total liabilities. Add lines 17 through 25			726,974	26	101,290
ري طا		Organizations that follow SFAS 117 (ASC 958), check here	√ an	d complete			
ĕ		lines 27 through 29, and lines 33 and 34.			172 204 610	37	179,019,999
<u>ත</u> ත	27	Unrestricted net assets			172,204,610		179,019,999
Fund Balance	28	Temporarily restricted net assets				28	
Ĭ	29	Permanently restricted net assets				29	
or Fu		Organizations that do not follow SFAS 117 (ASC 958), check complete lines 30 through 34.		•			ii
Ş	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other	r funds			32	
₹	33	Total net assets or fund balances			172,204,610	33	179,019,999
_	34	Total liabilities and net assets/fund balances		_	172.931.584	34	179.121.289

Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	•	• •		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		73,0	13,602
2	Total expenses (must equal Part IX, column (A), line 25)	2		72,6	66,688
3	Revenue less expenses Subtract line 2 from line 1	3		3	346,914
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		172,2	204,610
5	Net unrealized gains (losses) on investments	5		6,4	168,475
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		179,0	19,999
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. F
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed or	١		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ 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 audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	e <b>2c</b>		No
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
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		3b		

DLN: 93493135056545

## OMB No 1545-0047

Inspection

#### **SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

**Political Campaign and Lobbying Activities** 

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) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III **Employer identification number** Name of the organization LABORERS' INTERNATIONAL UNION OF HCL Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 2 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? 4a If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527

exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Yes

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing 5 organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount 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-
(1) LIUNA PAC	905 16TH STREET NW WASHINGTON, DC 20006	52-0886981		85,300

5 c	hedule C (Form 990 or 990-EZ) 2014					Page <b>2</b>
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	00		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	ır - 0 -				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	<b>(c)</b> 2013	( <b>d)</b> 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

Grassroots lobbying expenditures

Pa	rt II-B Complete if the organization is e filed Form 5768 (election under	exempt under section 501(c)(3) and has I section 501(h)).	ТОИ				
For e	each "Yes" response to lines 1a through 1i below, provide		( a	1)	(	b)	
activ		m rune iv a decaned description of the lobbying	Yes	No	Am	ount	
1 a	During the year, did the filing organization attempt to legislation, including any attempt to influence public through the use of Volunteers?		ĺ				
b c	Paid staff or management (include compensation in Media advertisements?	expenses reported on lines 1c through 1i)?					
d	Mailings to members, legislators, or the public?						_
е	Publications, or published or broadcast statements?	,					
f	Grants to other organizations for lobbying purposes?						
g	Direct contact with legislators, their staffs, governm	ent officials, or a legislative body?					
h i	Rallies, demonstrations, seminars, conventions, spe Other activities?	eches, lectures, or any similar means?					_
j	Total Add lines 1c through 1i		_				
2a b	Did the activities in line 1 cause the organization to If "Yes," enter the amount of any tax incurred under	<u>L</u>					
c	If "Yes," enter the amount of any tax incurred by org	janization managers under section 4912					_
d	If the filing organization incurred a section 4912 tax	, did it file Form 4720 for this year?					
Par	rt III-A Complete if the organization is e 501(c)(6).	exempt under section 501(c)(4), section 5	501(c)	)(5), c	r sec	tion	
					Y	es N	ю
1	Were substantially all (90% or more) dues received			L	1 Y	es	
2	Did the organization make only in-house lobbying ex				2		Ιo
3	Did the organization agree to carry over lobbying an				3		Ю
Par		exempt under section 501(c)(4), section 5 Part III-A, lines 1 and 2, are answered "					,
1	Dues, assessments and similar amounts from memb	pers	1				
2	Section 162(e) nondeductible lobbying and political expenses for which the section 527(f) tax was paid						
a	,		2a				_
D	Carryover from last year		2b				
c	Total	) nations of nandadisability continue 162(a) disc	2c				_
3	Aggregate amount reported in section 6033(e)(1)(A		3				_
4	If notices were sent and the amount on line 2c exce does the organization agree to carryover to the reas political expenditure next year?		4				
5	Taxable amount of lobbying and political expenditure	es (see instructions)	5				_
Pa	art IV Supplemental Information						
	ovide the descriptions required for Part I-A, line 1, Pai (see instructions), and Part II-B, line 1 Also, complete		ıp lıst),	Part II	-A , line	s 1 an	d
	Return Reference	Explanation					

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

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#### DLN: 93493135056545

OMB No 1545-0047

# **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.

Open to Public Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection

Name of the organization **Employer identification number** LABORERS' INTERNATIONAL UNION OF HCL 53-0088501 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education)  $\Gamma$  Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located **\(\mathbb{F}\_{\top}\)** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Part	Organizations Maintaining Collections of Art, H	istor	ric	al Tr	easu	res, or Otl	hei	Similar Ass	ets (c	ontinued)
3	Using the organization's acquisition, accession, and other records, collection items (check all that apply)	check	κа	ny of t	he foll	owing that ar	e a	significant use o	fıts	
а	Public exhibition		-	Loan	or excl	hange progra	ms			
b	Scholarly research	· 「	-	Other						
c	Preservation for future generations									
4	Provide a description of the organization's collections and explain h Part XIII	ow th	ey	furthe	r the c	organization's	ex	empt purpose ın		
5	During the year, did the organization solicit or receive donations of assets to be sold to raise funds rather than to be maintained as par								Yes	□ No
Par	Escrow and Custodial Arrangements. Complete Part IV, line 9, or reported an amount on Form 990,	ıf the	9 0	organi	zatıor			es" to Form 99	0,	<u>,                                      </u>
1a	Is the organization an agent, trustee, custodian or other intermedia included on Form 990, Part X?					or other asse	ts r	ot	Yes	
b	If "Yes," explain the arrangement in Part XIII and complete the foll	owing	ı ta	able						
						_	_	Amo	unt	
С	Beginning balance					1	.c			
d	Additions during the year					1	d			
е	Distributions during the year						e			
f	Ending balance					_ 1	f.			
2a	Did the organization include an amount on Form 990, Part X, line 2	1, for	es	crow o	rcusto	odial account	lıa	bility?	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII Check here if the ex	plana	tıo	n has l	oeen p	rovided in Pa	rt )	(III		Γ
Pai	rt V Endowment Funds. Complete if the organization a									
		<b>(b)</b> Prio	rу	ear	<b>b (c)</b> T	wo years back	(d)	hree years back (	<b>e)</b> Four y	ears back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the current year end balance (	line 1	g,	colum	n (a)) l	neld as				
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment ►									
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should equal 100%									
3a	Are there endowment funds not in the possession of the organization	n that	t a	re held	and a	dministered	for	the		
	organization by							2-45	Yes	No
	(i) unrelated organizations		•				•	3a(i)		
ь	(ii) related organizations	· · n Sche	edi	ule R?	٠		. '	3b	1	<del>                                     </del>
4	Describe in Part XIII the intended uses of the organization's endow									<u> </u>
Par	<b>t VI</b> Land, Buildings, and Equipment. Complete if the 11a. See Form 990, Part X, line 10.	orga	nı	zation	ansv	vered 'Yes'	to	Form 990, Part	IV, lı	ne
	Description of property			Cost or s (invest		( <b>b)</b> Cost or oth basis (other)		(c) Accumulated depreciation	( <b>d</b> ) Bo	ook value
1a l	_and	$\top$				1,478,0	04			1,478,004
	Buildings					4,214,6	_	3,878,361		336,258
	_easehold improvements					720,9		268,511		452,437
	Equipment					6,136,2	82	4,235,624		1,900,658
	 Other					5,429,1	-	· ·		5,429,109
	I. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, co	olumn	(E	3), line :	10(c).)			🕨		9,596,466
								Schedule D (	Form 9	90) 2014

See Form 990, Part X, line 12.	plete if the organization a	answered 'Yes' to Form 990, Part IV, line 11b.
(a) Description of security or category	( <b>b)</b> Book value	(c) Method of valuation
(Including name of security) (1)Financial derivatives		Cost or end-of-year market value
(2)Closely-held equity interests		
(3)Other (A) AFL-CIO HOUSING INVESTMENT TRUST	10,329,482	F
		-
(B) SSGA S & P 500 INDEX MUTUAL FUND	47,883,883	F
(C) IR&M SHORT FUND POOLED INVESTMENT FUND	42,485,772	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	, ,	
Part VIII Investments—Program Related. Cor See Form 990, Part X, line 13.	mplete if the organization	answered 'Yes' to Form 990, Part IV, line 11c
(a) Description of investment	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. Complete if the organization		, Part IV, line 11d See Form 990, Part X, line 15
(a) Descrip	tion	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.	)	
Part X Other Liabilities. Complete if the organ	nization 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	
Federal income taxes		
OTHER LIABILITIES	101,290	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	101,290	
2. Liability for uncertain tax positions In Part XIII, provide organization's liability for uncertain tax positions under FIN		
XIII		

Par	the organization answered 'Yes' t			nts With Revenue	per R	eturn Complete If
1	Total revenue, gains, and other support per	audited financial statements			1	88,180,759
2	Amounts included on line 1 but not on Form	990, Part VIII, line 12				
а	Net unrealized gains (losses) on investmen	ts	2a	6,468,475		
b	Donated services and use of facilities .		2b			
c	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII )		2d	8,698,682		
e	Add lines <b>2a</b> through <b>2d</b>				2e	15,167,157
3	Subtract line <b>2e</b> from line <b>1</b>				3	73,013,602
4	Amounts included on Form 990, Part VIII,	line 12, but not on line <b>1</b>				
а	Investment expenses not included on Form	990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII )		4b			
C	Add lines <b>4a</b> and <b>4b</b>				4c	0
5	Total revenue Add lines 3 and 4c. (This mu				5	73,013,602
Part	Reconciliation of Expenses per if the organization answered 'Yes				s per	Return. Complete
1	Total expenses and losses per audited finar				1	81,365,370
2	Amounts included on line 1 but not on Form	990, Part IX, line 25				
а	Donated services and use of facilities .		2a			
b	Prior year adjustments		2b			
C	Otherlosses		2c			
d	Other (Describe in Part XIII )		2d	8,698,682	_	
e	Add lines 2a through 2d				2e	8,698,682
3	Subtract line <b>2e</b> from line <b>1</b>				3	72,666,688
4	Amounts included on Form 990, Part IX, lin	e 25, but not on line <b>1:</b>				
а	Investment expenses not included on Form	990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII )		4b		_	
c	Add lines <b>4a</b> and <b>4b</b>				4c	0
5	Total expenses Add lines 3 and 4c. (This m	ust equal Form 990, Part I, lır	ne 18 )		5	72,666,688
	Supplemental Information					
Part	ide the descriptions required for Part II, lines V, line 4, Part X, line 2, Part XI, lines 2d and mation					de any additional
	Return Reference	Explanation				
	XI, LINE 2D - OTHER INCOME O	F LIUNA TRAVEL 218,785 L	.0 SS 0	N DISPOSAL OF FIXE	) ASSE	ETS 8,479,897
	XII, LINE 2D - OTHER EXPENSES STMENTS	OF LIUNA TRAVEL 218,785	LOSS	ON DISPOSAL OF FIX	EDAS	SETS 8,479,897

Jenedale 2 (1 31111 33 3) 23 13		r age 3				
Part XIII Supplemental Information	on (continued)					
Return Reference	Explanation					
l						
-						

Schedule D (Form 990) 2014

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As Filed Data -

DLN: 93493135056545

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

#### **Statement of Activities Outside the United States**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

: 14D, 15, 0F 16.

► Attach to Form 990.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

**Employer identification number** 

LAB	ORERS' INTERNATIONAL UNIO	NOFHCL				
					53-0088501	
Pa	rt I General Information "Yes" to Form 990, Pa			he United States. C	Complete if the organiz	ation answered
1	For grantmakers. Does the	organization m	naıntaın record	ds to substantiate the	amount of its grants	
	and other assistance, the gra	antees' eligibil	ity for the gra	nts or assistance, and	the selection criteria	
	used to award the grants or a	assistance? .				┌ Yes ┌ No
2	For grantmakers. Describe in assistance outside the United		ganızatıon's p	procedures for monitor	ang the use of its grant	s and other
3	Activites per Region (The follow	ung Part I, line :	3 table can be d	uplicated if additional sp	pace is needed )	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	NORTH AMERICA - CANADA AND MEXICO,BUT NOT THE UNITED STATES	2	19	PROGRAM SERVICES	SEE ORGANIZATIONAL MISSION	3,675,464
( 2)						
( 3)						
(4)						
( 5)						
За	Sub-total	2	19			3,675,464
Ь	Total from continuation sheets to Part I	0	0			0
•	: Totals (add lines 3a and 3b)	2	19			3.675.464

Pā						<b>ited States.</b> Comp duplicated if additioi			to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(	1)								
(	2)								
(	3)								
(	4)								
2						les by the foreign co (c)(3) equivalency l			
3	Enter total num	nber of other or	ganızatıons or ent	ities					

Schedule F (Form 990) 2014

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be	duplicated if addit	ional space is ne	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)
(1)							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
( 2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
( 12)							
(13)							
(14)							
( 15)							
( 16)							
( 17)							
( 18)							
	1			l .			

## Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Г	Yes	<u>\</u>	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	<u> </u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	⊽	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	<b>▼</b>	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Г	Yes	<u> </u>	Νo

Schedule F (Form 990) 2014

#### **Additional Data**

Software ID: Software Version:

**EIN:** 53-0088501

Name: LABORERS' INTERNATIONAL UNION OF HCL

Schedule F (Form 990) 2014

Page **5** 

#### Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

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DLN: 93493135056545

OMB No 1545-0047

Schedule J (Form 990)

**Compensation Information** 

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization LABORERS' INTERNATIONAL UNION OF HCL

**Employer identification number** 

53-0088501

Pa	rt I Questions Regarding Compensatio	n				
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	First-class or charter travel	굣	Housing allowance or residence for personal use			
	▼ Travel for companions	Г	Payments for business use of personal residence			
	▼ Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the o reimbursement or provision of all of the expenses d			1b	Yes	
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe			2	Yes	
3	Indicate which, if any, of the following the filing orga organization's CEO/Executive Director Check all t used by a related organization to establish compen	hat appl				
	Compensation committee		Written employment contract			
	☐ Independent compensation consultant	Γ	Compensation survey or study			
	Form 990 of other organizations	⊽	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	l paymer	nt?	4a	Yes	
b	Participate in, or receive payment from, a suppleme	ental non	equalified retirement plan?	4b	Yes	
c				4c		No
	If "Yes" to any of lines 4a-c, list the persons and p					
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiza	ations m	ust complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III	paid or a	accured pursuant to a contract that was	8		
9	If "Yes" to line 8, did the organization also follow th section 53 4958-6(c)?	ne rebutt	able presumption procedure described in Regulations	9		

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

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

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	<b>(B)</b> Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of	<b>(F)</b> Compensation in
	(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	column(B) reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2014

#### Part IIII Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

The second state and part is any as	
Return Reference	Explanation
PART I, LINE 1A	FIRST CLASS TRAVEL - GENERAL EXECUTIVE BOARD IS ALLOWED TO TRAVEL FIRST CLASS TRAVEL FOR COMPANIONS - THE CONSTITUTION OF LIUNA STATES THAT "TRAVEL EXPENSES MAY ALSO BE PROVIDED FOR AN OFFICER'S SPOUSE WHO ACCOMPANIES THE OFFICER WHEN THE OFFICER TRAVELS IN CONNECTION WITH THE PERFORMANCE OF OFFICIAL DUTIES AND RESPONSIBILITIES "THESE AMOUNTS ARE INCLUDED AS TAXABLE INCOME TO THE OFFICER TAX INDEMNIFICATION AND GROSS-UP PAYMENTS AND HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE - THE CONSTITUTION OF LIUNA STATES THAT "THE GENERAL PRESIDENT AND GENERAL SECRETARY-TREASURER SHALL EACH BE PROVIDED WITH THE USE OF ACCOMODATIONS PURCHASED OR LEASED BY THE UNION WHEN SUCH OFFICERS ARE IN THE CITY OF WASHINGTON, DISTRICT OF COLUMBIA, IN CONNECTION WITH THE PERFORMANCE OF THEIR DUTIES AND RESPONSIBILITIES "THE GENERAL EXECUTIVE BOARD HAS AUTHORIZED LIUNA TO RENT A HOUSE BASED ON THE CONSTITUTION FOR GENERAL PRESIDENT TERENCE MO'SULLIVAN IN ADDITION, AUTHORIZATION WAS GIVEN TO GROSS-UP THESE HOUSING EXPENSES TO HANDLE ALL THE TAXES
PART I, LINES 4A-B	LABORER'S INTERNATIONAL UNION OF NORTH AMERICA HAS AN EMPLOYEES SEVERANCE PAY PLAN AN EMPLOYEE WITH 10 YEARS OF QUALIFYING EMPLOYMENT IS ELIGIBLE FOR A LUMP SUM PAYMENT UPON TERMINATION OF THEIR EMPLOYMENT IN 2014 JOHN REID RECEIVED A SEVERANCE PAYMENT OF \$81,124 PART 1, LINE 4B LABORER'S INTERNATIONAL UNION OF NORTH AMERICA HAS A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN TO PAY BENEFITS THAT ARE NOT PAYABLE FROM THE PENSION FUND BECAUSE OF BENEFIT AND COMPENSATION LIMITS OF THE INTERNAL REVENUE CODE IN 2014 RAYMOND POCINO RECEIVED \$4,421 AND MICHAEL BEARSE RECEIVED \$34.809

Schedule J (Form 990) 2014

Software ID: Software Version:

**EIN:** 53-0088501

Name: LABORERS' INTERNATIONAL UNION OF HCL

#### Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Form 990, Schedule J, Pal	LLII	- Officers, Direct	.ors, irustees, key	Employees, and	nighest compens.	ateu Employees		'
(A) Name and Title	Compensation incentive repo			SC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	( <b>F)</b> Compensation in column (B) reported as deferred in prior Form 990
1 TERENCE M O'SULLIVAN, GENERAL PRESIDENT	(ı) (ıı)		0 0	183,870	139,630	32,012	842,549	0
1 ARMAND E SABITONI, GENERAL SECRETARY/TREASURER	(ı) (ıı)		0 0	9,884 0	134,740 0	31,850 0	644,704	0
2 VERE O HAYNES, VICE PRESIDENT	(ı) (ıı)		0 0	6,379 0	32,591 0	28,716 0	193,036	0
3 TERRENCE M HEALY, VICE PRESIDENT & REG MGR	(I) (II)		0 0		104,812	30,957 0	7 497,574 0 0	0
4 RAYMOND M POCINO, VICE PRESIDENT & REG MGR	(ı) (ıı)		0 0	- · /· - ·	90,529	16,375 0	422,805	0
5 JOSEPH S MANCINELLI, VICE PRESIDENT & REG MGR	(ı) (ıı)		0 0	-	97,951 0	12,647 0	7 487,334 0 0	0
6 ROCCO DAVIS, VICE PRESIDENT & REG MGR	(I) (II)	0	0 0	/	103,473	30,906 0	500,282	0
7 VINCENT R MASINO, VICE PRES & ASST REG MGR	(ı) (ıı)		0 0	. ,	91,868 0	16,341 0	420,921	0
8 DENNIS L MARTIRE, VICE PRESIDENT & REG MGR	(ı) (ıı)		0 0	2,067 0	91,868 0	30,531 0	427,803	0
9 ROBERT E RICHARDSON, VICE PRESIDENT & REG MGR	(I) (II)		0 0	= - /	90,529	30,488 0	430,048	0
10 RALPH E COLE, VICE PRESIDENT	(1) (11)		0 0	1 ' 1	32,424 0	28,454 0	170,129	0 0
11 JOHN F PENN, VICE PRESIDENT & REG MGR	(1) (11)	0	0 0	16,236 0	90,529	30,488 0	435,440	0
12 OSCAR DE LA TORRE, VICE PRESIDENT	(1) (11)	0	0 0	99 0	27,194 0	28,454 0	160,338	0
13 SERGIO RASCON, VICE PRESIDENT	(I) (II)	0	o o		26,780 0	28,431 0	1 160,051	0
14 JOHN F HEGARTY, VICE PRESIDENT	(ı) (ıı)	0	Ö	175 0	26,084 0	28,217 0	138,620	0 0
15 RODERICK BENNETT, CHIEF OF STAFF	(1) (11)	0	0	· · · · · · · · · · · · · · · · · · ·	57,633 0	29,832 0	318,582	0 0
16 WILLIAM BERGFELD, EXEC ASSISTANT TO GP	(I) (II)	0	ō	, i	77,097 0	15,873 0	362,450	0 0
17 THEODORE GREEN, GENERAL COUNSEL	(I) (II)	0	Ö	, ,	100,035	30,795 0	479,473 0 0	0 0
18 REX HOLLIS JR, BUILDING MANAGER	(I) (II)	0	o o			29,381 0	264,118	0 0
19 GREG HARRIS, SUBREGIONAL MANAGER	(I) (II)	214,039	0 0	I I		8,785 0	278,474	0

## Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title (B) Breakdown o (i) Base Compensation		W-2 and/or 1099-MIS (ii) Bonus & Incentive compensation	C compensation (iii) O ther reportable compensation	(C) Retirement and other deferred compensation	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990	
<b>21</b> STEPHEN FARNER,	(I)	243,551	0	2,381	75,501	30,020	351,453	0
ASST REG MNGR	(II)	0		0	0	0	0	0
1 DAVID HAYES, ASST REG	(I)	190,550	0 0	32,852	59,071	28,205	310,678	0
MNGR	(II)	0		0	0	0	0	0
2 MICHAEL BARRETT,	(I)	231,750	0 0	339	71,843	29,918	333,850	0
ASSOC GENERAL COUNSEL	(II)	0		0	0	0	0	0
<b>3</b> JOHN REID, ASST REG	(I)	185,400	0 0	87,569	57,474	29,467	359,910	0
MGR	(II)	0		0	0	0	0	0
4 MICHAEL BEARSE, FORMER GENERAL COUNSEL	(1)	0	0	168,440 0	0	22,275 0	190,715 0	0

DLN: 93493135056545

OMB No 1545-0047

Open to Public Inspection

#### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Transactions with Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 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.

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

LABODEDC' INTED	rganızatıon NATIONAL UNION	I OE HCI						E	mploy	er ident	ificatio	n numbe	er
LADORERS INTER	INATIONAL ONION	OF HEL						5	3-008	38501			
Part I Exc	ess Benefit	t Transa	ctions	(section	501(c)(3), s	ection 501(c	)(4), and 501	(c)(29	) orgar	nizations	only)		
	plete if the org												
<b>1 (a)</b> Nam	ne of disqualifi	ed person	<b>(b)</b> R		ıp between d		<b>(c)</b> Desc	ription	of trai	nsaction	<u> </u>	<b>(d)</b> Cor	
				person a	and organiza	tion						Yes	No
4958 .	amount of tax •••• amount of tax							he year	r under	rsection * \$ * \$			
Part II Loans to a Complete if th reported an ar	ne organizatior	nanswered	d "Yes" d	on Form 9	90-EZ, Part	V, line 38a, c	or Form 990, I	Part IV	, line 2	26, or if	the org	anızatıoı	า
Loans to a	ne organizatior	n answered n 990, Par uship ation Pur	d "Yes" of X, line  (c)  roose of	on Form 9	90-EZ, Part 2 to he	V, line 38a, c  (e)Original principal amount	or Form 990, I ( <b>f)</b> Balance due	Part IV <b>(g)</b> defa	In	26, or if (h) Approving by boar	ved d or	(i)Wri agreen	tten
Complete if the reported an arrange (a) Name of interested	ne organizatior mount on Form  (b) Relation	n answered n 990, Par uship ation Pur	d "Yes" of X, line  (c)  roose of	on Form 9 5, 6, or 2 (d) Loan or from t	90-EZ, Part 2 to he	(e)Original principal	<b>(f)</b> Balance	(g)	In	(h) A pprov	ved d or	(i)Wr	tten
Complete if the reported an arrange (a) Name of interested	ne organizatior mount on Form  (b) Relation	n answered n 990, Par uship ation Pur	d "Yes" of X, line  (c)  roose of	on Form 9 5, 6, or 2 (d) Loan or from t organizati	90-EZ, Part 2 to he on?	(e)Original principal	<b>(f)</b> Balance	(g) defa	In ult?	(h) A pprov by boar commit	ved d or tee?	(i)Wr	tten nent?
Loans to an Complete of the reported an arm (a) Name of interested person	(b) Relation with organiza	ship ation Pur sistance organiz (b) Relation interested	(c) rpose of loan  see Benefication are conship be	(d) Loan or from to organizati  To  Fiting In nswered between and the	to he on?  From  terested   "Yes" on F	(e)Original principal amount	( <b>f)</b> Balance due art IV, line 2	(g) defail Yes	In ult?	(h) A pprov by boar commit Yes	ved d or tee? No	(i)Wragreen	tten nent?

Part IV Business Transactions I			20- 20 20-					
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) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reveni	ation's			
				Yes	No			
See Additional Data Table								

# Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
	Schedule I (Form 990 or 990-E7) 2014

Software ID: Software Version:

**EIN:** 53-0088501

Name: LABORERS' INTERNATIONAL UNION OF HCL

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	organiz	aring of zation's nues?
	organization			Yes	No
(1)TERENCE J O'SULLIVAN	FAMILY MEMBER OF TERENCE M O'SULLIVAN, CURRENT GENERAL PRESIDENT	71,766	EMPLOYED BY ORGANIZATION		Νo
(2)YVETTE PENA-O'SULLIVAN	FAMILY MEMBER OF TERENCE M O'SULLIVAN, CURRENT GENERAL PRESIDENT	146,989	EMPLOYED BY ORGANIZATION		Νo
(3) KEVIN O'SULLIVAN	FAMILY MEMBER OF TERENCE M O'SULLIVAN, CURRENT GENERAL PRESIDENT	171,792	EMPLOYED BY ORGANIZATION		No
(4) BRENDAN O'SULLIVAN	FAMILY MEMBER OF TERENCE M O'SULLIVAN, CURRENT GENERAL PRESIDENT	138,499	EMPLOYED BY ORGANIZATION		No
(5) CAITLIN O'SULLIVAN	FAMILY MEMBER OF TERENCE M O'SULLIVAN, CURRENT GENERAL PRESIDENT	53,818	EMPLOYED BY ORGANIZATION		No
(6) PATRICK HEALY	FAMILY MEMBER OF TERENCE M HEALY, CURRENT VICE PRESIDENT REGIONAL MANAGER	131,738	EMPLOYED BY ORGANIZATION		No
(7) CHRISTOPHER SABITONI	FAMILY MEMBER OF ARMAND E SABITONI, CURRENT GENERAL SECRETARY- TREASURER	157,206	EMPLOYED BY ORGANIZATION		Νο
(8) MARIO DE LA TORRE JR	FAMILY MEMBER OF OSCAR DE LA TORRE, CURRENT VICE PRESIDENT	131,076	EMPLOYED BY ORGANIZATION		No
(9) LATAYSHA RICHARDSON	FAMILY MEMBER OF ROBERT E RICHARDSON, CURRENT VICE PRESIDENT	58,492	EMPLOYED BY ORGANIZATION		Νo

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493135056545

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# 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.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization LABORERS' INTERNATIONAL UNION OF HCL	Employer identification number
	53-0088501

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	EVERY FIVE YEARS MEMBERS OF LABORERS' INTERNATIONAL UNION OF NORTH AMERICA (LIUNA) ELECT DELEGATES THAT GO TO THE CONVENTION THE DELEGATES NOMINATE AND ELECT THE GENERAL EXECUTIVE BOARD MEMBERS, WITH THE EXCEPTION OF THE PRESIDENT OF THE MAIL HANDLERS DIVISION, WHO IS AN EX-OFFICIO MEMBER OF THE BOARD DELEGATES FROM THE MAIL HANDLERS DIVISION CANNOT VOTE TO NOMINATE VICE PRESIDENTS IN THEIR REGION ASSOCIATE MAIL HANDLERS ARE NOT REGULAR MEMBERS AND HAVE NO VOTING RIGHTS RETIREE MEMBERS OF LIUNA HAVE LIMITED VOTING RIGHTS DELEGATES ALSO APPROVE RESOLUTIONS AT THE CONVENTION THESE RESOLUTIONS CONCERN THE OPERATIONS OF THE LABORERS' INTERNATIONAL UNION OF NORTH AMERICAN AND ALSO CHANGES TO THE CONSTITUTION, WHICH IS THE GOVERNING DOCUMENT OF LIUNA

Return Reference	Explanation				
FORM 990, PART VI, SECTION A, LINE 7A	SEE SUMMARY ABOVE				

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	SEE SUMMARY ABOVE

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	FORM 990 WAS REVIEWED BY THE GENERAL PRESIDENT, GENERAL SECRETARY-TREASURER, AND GENERAL COUNSEL FOR THEIR APPROVAL. A COPY OF THE FORM 990 WAS MADE AVAILABLE TO EACH GENERAL EXECUTIVE BOARD MEMBER BEFORE IT WAS FILED

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE WRITTEN CONFLICT OF INTEREST POLICY IS INCLUDED IN THE CODE OF BEST PRACTICES ANY MEMBER OR EMPLOYEE OF THE ORGANIZATION CAN CONTACT THE LIUNA GENERAL PRESIDENT WITH ANY COMPLAINT ARISING UNDER THE CONSTITUTION, THE CODE OF BEST PRACTICES, OR ANY OTHER DISCIPLINARY RULE, REGULATION, PRACTICE, OR PROCEDURE ADOPTED BY THE LIUNA GENERAL EXECUTIVE BOARD THE CODE OF BEST PRACTICES EXPLAINS THE DISCIPLINARY PROCEDURE THAT MUST BE FOLLOWED WHEN NECESSARY AND THE INDEPENDENT OFFICERS WHO ARE ENTRUSTED TO ENFORCE THE CODE. THE US DEPARTMENT OF LABOR REQUIRES ALL NON-CLERICAL EMPLOYEES TO REPORT ON FORM LM-30 POTENTIAL SITUATIONS WHERE THERE MAY BE CONFLICTS OF INTEREST. THIS INFORMATION IS OPEN TO THE PUBLIC.

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	LIUNA FILES A DEPARTMENT OF LABOR (DOL) FORM LM-2, WHICH IS AVAILABLE TO THE PUBLIC THROUGH THE DOL'S WEBSITE (OLMS DIVISION, ONLINE PUBLIC DISCLOSURE ROOM) THIS FORM IS AN EXTENSIVE FINANCIAL REPORT CONCERNING LIUNA THE MOST RECENT CONSTITUTION (GOVERNING DOCUMENT) OF LIUNA HAD BEEN FILED WITH THE DEPARTMENT OF LABOR WITH THE 2011 LM-2 REPORT AS DISCUSSED IN THE ANSWER TO PART VI, LINE 12(C) THE CONFLICT OF INTEREST POLICY IS IN THE ETHICS AND DISCIPLINARY PROCEDURE, WHICH IS PART OF THE CONSTITUTION

#### DLN: 93493135056545

OMB No 1545-0047

Open to Public Inspection

# **SCHEDULE R**

**Related Organizations and Unrelated Partnerships** (Form 990)

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

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization LABORERS' INTERNATIONAL UNION OF HCL

Department of the Treasury

Internal Revenue Service

**Employer identification number** 

53-0088501

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) co	g) 512(b) ontrolled
						Yes	No
(1) LIUNA PAC 905 16TH STREET NW WASHINGTON, DC 20006	POLITICAL ORGANIZATION	DC	527		N/A		No
52-0886981							
(2) LIUNA STAFF & AFFILIATES PENSION FUND 905 16TH STREET NW WASHINGTON, DC 20006 52-0743575	PENSION FUND	DC	501(A)		N/A		No
(3) LIUNA NATIONAL 401 K RETIREMEMT SAVINGS PLAN 905 16TH STREET NW  WASHINGTON, DC 20006 52-6941497	PENSION FUND	DC	501(A)		N/A		No
(4) LABORERS' POLITICAL LEAGUE - EDUCATION FUND 905 16TH STREET NW  WASHINGTON, DC 20006 52-2257725	POLITICAL ORGANIZATION	DC	527		N/A		No
(5) NATIONAL POSTAL MAIL HANDLERS UNION PAC 905 16TH STREET NW WASHINGTON, DC 20006 20-8609421	POLITICAL ORGANIZATION	DC	527		N/A		No
(6) LABORERS' CHARITABLE FOUNDATION 905 16TH STREET NW  WASHINGTON, DC 20006 33-1082848	FINANCIAL ASSISTANCE TO NON-PROFITS AND MEMBERS	DC	501(C)(5)		N/A		No
(7) LIUNA BUILDING AMERICA 905 16TH STREET NW  WASHINGTON, DC 20006 47-1906702  For Paperwork Reduction Act Notice, see the Instructions for Form 990.	POLITICAL ORGANIZATION	DC  Cat No 5013	527		N/A Schedule R (Form	2 990) 3	No 014

Part II 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 III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "	Yes"	on Form	990, Pa	art IV,	line 3	4
	because it had one or more related organizations treated as a partnership during the tax year.						

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h	(1	(i)	(j)		(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Disprop	ortionate	Code V-UBI	General	∣or  P	Percentage
related organization		domicile	controlling	income(related,	total income	end-of-year	allocat	tions?	amount in box	manag	ng   d	ownership
		(state or	entity	unrelated,		assets			20 of	partne	r?	
		foreign		excluded from					Schedule K-1			
		country)		tax under					(Form 1065)			
				sections 512-								
				514)								
				,			Yes	No		Yes I	ol	

Part IV 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.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	(d) Direct controlling entity	controlling Type of entity	(g) Share of end-of- year assets	<b>(h)</b> Percentage ownership	Section (b) (control entited	n 512 13) olled
							Yes	No
(1) LIUNA TRAVEL INC	TRAVEL AGENT	DC	N/A	С		100 000 %		No
905 16TH STREET NW WASHINGTON, DC 20006 52-2088637								

chedule	e R (Form 990) 2014		Рa	age 3
Part \	Transactions With Related Organizations Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Not	te. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
<b>1</b> Durin	g the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
<b>a</b> Re	ceipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	Yes	
<b>b</b> Gif	ft, grant, or capital contribution to related organization(s)	1b	Yes	
<b>c</b> Gıf	ft, grant, or capital contribution from related organization(s)	1c		No
<b>d</b> Lo	ans or loan guarantees to or for related organization(s)	1d	Yes	
<b>e</b> Lo	ans or loan guarantees by related organization(s)	1e		No
<b>f</b> Div	vidends from related organization(s)	1f		No
<b>g</b> Sa	le of assets to related organization(s)	<b>1</b> g		No
<b>h</b> Pu	rchase of assets from related organization(s)	1h		No
i Exc	change of assets with related organization(s)	1i		No
<b>j</b> Lea	ase of facilities, equipment, or other assets to related organization(s)	<b>1</b> j		No
<b>k</b> Le	ase of facilities, equipment, or other assets from related organization(s)	1k		No

k	Lease of facilities,	equipment, o	or other	assets from	related	organization(s)	
---	----------------------	--------------	----------	-------------	---------	-----------------	--

- I Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- **s** Other transfer of cash or property from related organization(s)

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

(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) LIUNA TRAVEL INC	D	219,117	
(2) LIUNA TRAVEL INC	Q	100,000	

No

No

No

No

No

No No

1m

1n

10

1р

1r

1q Yes

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

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

1 <u> </u>													
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	so 50 organ	(e) all partners section 01(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionat allocations?	7	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
	<u> </u>	<u> </u>	514)	Yes	No	1	<u> </u>	Yes	No		Yes	No	
									$\Box$	1			

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2014

Page **5** 

Software ID: Software Version:

**EIN:** 53-0088501

Name: LABORERS' INTERNATIONAL UNION OF HCL

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

Form 990, Schedule R, Part II - Identification of Re	elated Tax-Exempt Orga	nizations					
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	<b>(f)</b> Direct controlling entity	Sectio (b)( conti	g) on 512 (13) rolled ity?
						Yes	No
(1) LIUNA PAC	POLITICAL ORGANIZATION	DC	527		N/A		No
905 16TH STREET NW							
WASHINGTON, DC 20006							
52-0886981							
(1) LIUNA STAFF & AFFILIATES PENSION FUND	PENSION FUND	DC	501(A)		N/A		Νo
905 16TH STREET NW							
WASHINGTON, DC 20006 52-0743575							
	DENCTON FUND	D.C.	E01/A)		N /A		NI -
(2) LIUNA NATIONAL 401 K RETIREMEMT SAVINGS PLAN	PENSION FUND	DC	501(A)		N/A		Νo
905 16TH STREET NW							
WASHINGTON, DC 20006							
52-6941497							
(3) LABORERS' POLITICAL LEAGUE - EDUCATION FUND	POLITICAL ORGANIZATION	DC	527		N/A		No
905 16TH STREET NW							
WASHINGTON, DC 20006							
52-2257725							
(4) NATIONAL POSTAL MAIL HANDLERS UNION PAC	POLITICAL ORGANIZATION	DC	527		N/A		No
905 16TH STREET NW							
WASHINGTON, DC 20006							
20-8609421							
(5) LABORERS' CHARITABLE FOUNDATION	FINANCIAL ASSISTANCE TO NON-	DC	501(C)(5)		N/A		No
905 16TH STREET NW	PROFITS AND MEMBERS						
WASHINGTON, DC 20006							
33-1082848							
(6) LIUNA BUILDING AMERICA	POLITICAL ORGANIZATION	DC	527		N/A		No
905 16TH STREET NW							
WASHINGTON, DC 20006							
47-1906702	I	I	I	l			I