


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 [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 11-01-2014 , and ending 10-31-2015

<b>B</b> Check if applicable <input type="checkbox"/> Address change  <input type="checkbox"/> Name change  <input type="checkbox"/> Initial return  <input type="checkbox"/> Final return/terminated  <input type="checkbox"/> Amended return  <input type="checkbox"/> Application pending	<b>C</b> Name of organization OFFICE & PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277		<b>D Employer identification number</b>  75-0850331	
	Doing business as			
	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone number	
	641 N CHERRY LN		(817) 246-4981	
	City or town, state or province, country, and ZIP or foreign postal code FORT WORTH, TX 76108		<b>G</b> Gross receipts \$ 2,558,037	
<b>F</b> Name and address of principal officer LINDA GONZALEZ 641 N CHERRY LA FORT WORTH, TX 76108		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)  <b>H(c)</b> Group exemption number ▶ 0940		
<b>I</b> Tax-exempt status <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) ( 5 ) ◀ (insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
<b>J Website:</b> ▶ N/A				

<b>K</b> Form of organization <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input checked="" type="checkbox"/> Association <input type="checkbox"/> Other ▶	<b>L</b> Year of formation 1952	<b>M</b> State of legal domicile TX
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Part I

Summary

Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities REPRESENTING OFFICE AND PROFESSIONAL MEMBER EMPLOYEES OF VARIOUS EMPLOYERS, INCLUDING ARBITRATION OF MEMBER'S GRIEVANCES AND NEGOTIATION OF CONTRACTS ON BEHALF OF MEMBERS		
<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
<b>3</b> Number of voting members of the governing body (Part VI, line 1a) . . . . .	<b>3</b>	7	
<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	<b>4</b>	4	
<b>5</b> Total number of individuals employed in calendar year 2014 (Part V, line 2a) . . . . .	<b>5</b>	28	
<b>6</b> Total number of volunteers (estimate if necessary) . . . . .	<b>6</b>	0	
<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .	<b>7a</b>	0	
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34 . . . . .	<b>7b</b>	0	
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g) . . . . .	0	0
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . . .	2,270,643	2,530,932
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,336	2,669
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	3,222	24,436
		2,276,201	2,558,037
Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . .	25,164	56,298
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . .	153,222	185,136
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	760,133	775,812
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) . . . . .	0	0
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <sup>0</sup>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .	1,244,793	1,356,153
	<b>18</b> Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	2,183,312	2,373,399
	<b>19</b> Revenue less expenses Subtract line 18 from line 12 . . . . .	92,889	184,638
Net Assets or Fund Balances		<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>20</b> Total assets (Part X, line 16) . . . . .	3,446,072	3,710,638
	<b>21</b> Total liabilities (Part X, line 26) . . . . .	98,012	99,392
	<b>22</b> Net assets or fund balances Subtract line 21 from line 20 . . . . .	3,348,060	3,611,246

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here	<div>*****</div> <div>Signature of officer</div>	<div>2016-09-15</div> <div>Date</div>
	<div>LINDA GONZALEZ SECRETARY/TREASURER</div> <div>Type or print name and title</div>	

Paid Preparer Use Only	Print/Type preparer's name DANNY G ADDISON	Preparer's signature DANNY G ADDISON	Date 2016-09-15	Check <input checked="" type="checkbox"/> if self-employed	PTIN P01392214
	Firm's name ▶ DANNY G ADDISON CPA			Firm's EIN ▶ 75-1731130	
	Firm's address ▶ 2901 W BOLT ST  FORT WORTH, TX 76110			Phone no (817) 921-4450	

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . ☒ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . . ☒

**1** Briefly describe the organization's mission

TO ORGANIZE ALL UNORGANIZED OFFICE, PROFESSIONAL AND CLERICAL EMPLOYEES, TO SECURE TERMS AND CONDITIONS OF EMPLOYMENT FOR ITS MEMBERS CONSONANT WITH IDEALS OF FAIR WAGES, TO PROMOTE AND ENCOURAGE HARMONIOUS RELATIONS BETWEEN OURSELVES AND OUR EMPLOYERS, TO RENDER ALL POSSIBLE ASSISTANCE TO OUR BROTHERS AND SISTERS IN THE AMERICAN FEDERATION OF LABOR AND CONGRESS OF INDUSTRIAL ORGANIZATIONS AND THE CANADIAN LABOUR CONGRESS, AND TO HAVE, IN GENERAL, THE SAME AIMS AND PURPOSES OF THE INTERNATIONAL UNION PROVIDED FOR IN ITS CONSTITUTION IN THE INTEREST OF ALL OFFICE, PROFESSIONAL AND CLERICAL WORKERS

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

**4a** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

AT THE END OF THE FISCAL YEAR ENDED OCTOBER 31, 2015, OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 REPRESENTED IN EXCESS OF 7,000 UNION MEMBERS IN CONTRACT NEGOTIATIONS ON BEHALF OF MEMBER EMPLOYEES WITH MANAGEMENT OF THEIR RESPECTIVE MEMBER EMPLOYEES' EMPLOYER COMPANY ALL EXPENDITURES BY OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 ARE FOR THIS PROGRAM SERVICE AND ALL OTHER EXPENDITURES RELATE TO THEIR EXEMPT PURPOSE

**4b** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

SETTLEMENT OF GRIEVANCES OF MEMBER EMPLOYEES WITH MANAGEMENT OF THEIR RESPECTIVE EMPLOYER COMPANY FOR IN EXCESS OF 7,000 MEMBERS ALL EXPENDITURES BY OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 ARE FOR THIS PROGRAM SERVICE AND ALL OTHER EXPENDITURES RELATE TO THEIR EXEMPT PURPOSE

**4c** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

COORDINATE AND PARTICIPATE IN ARBITRATION PROCEEDINGS FOR GRIEVANCES AND DISPUTES FOR IN EXCESS OF 7,000 EMPLOYEES WITH MANAGEMENT OF THEIR RESPECTIVE EMPLOYER COMPANY ALL EXPENDITURES BY OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 ARE FOR THIS PROGRAM SERVICE AND ALL OTHER EXPENDITURES RELATE TO THEIR EXEMPT PURPOSE

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

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses ▶

Part IV

Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .		No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . .		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		No
4 <b>Section 501(c)(3) organizations.</b> 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 . . . . .		
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	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 I		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		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		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	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		No
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		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		No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		No
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		No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		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		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .		No
14a Did the organization maintain an office, employees, or agents outside of the United States? . . . . .		No
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 . . . . .		No
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		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 . . . .		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) . . . . .		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 . . . . .		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 . . . . .		No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part 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? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	21	Yes	
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? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .	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	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	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? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . .	29		No
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? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	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? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . .	35b		
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? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

Check if Schedule O contains a response or note to any line in this Part V

Form **990** (2014)

Part VI

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 any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	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		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	Yes	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		No
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		No
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done		
13	Did the organization have a written whistleblower policy?		No
14	Did the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed

18 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 ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 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  
LINDA GONZALEZ SECRETARYTREASURER

Part VII

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

- List all of the organization’s **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization’s **current** key employees, if any See instructions for definition of "key employee "
- List the organization’s five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization’s **former** officers, key employees, 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) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) RAMONA ALEXANDER ..... TRUSTEE	6 00 .....	X						4,677	0	610
(2) DEAUNDRA CEPHUS ..... TRUSTEE	6 00 .....	X						2,238	0	0
(3) JACKIE CURRY ..... TRUSTEE	6 00 .....	X						3,044	0	1,978
(4) BECKY TURNER ..... PRESIDENT/BUSINESS MGR	40 00 .....			X				125,058	7,950	43,295
(5) NORMA L GONZALEZ ..... SECRETARY/TREASURER	40 00 .....			X				128,170	0	34,931
(6) GENE PATTON ..... VICE-PRESIDENT	6 00 .....			X				5,007	0	0
(7) TYLER L TURNER ..... RECORDING SECRETARY	40 00 .....			X				69,213	0	57,742

Part VII

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			

1b	Sub-Total . . . . .	▶			
c	Total from continuation sheets to Part VII, Section A . . . . .	▶			
d	Total (add lines 1b and 1c) . . . . .	▶	337,407	7,950	138,556

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization▶2

		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	No
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? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	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? <i>If "Yes," complete Schedule J for such person</i> . . . . .	5	No

Section B. Independent Contractors

1 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

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 ▶0



Part VIII

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . . . . 1a					
	b	Membership dues . . . . . 1b					
	c	Fundraising events . . . . . 1c					
	d	Related organizations . . . . . 1d					
	e	Government grants (contributions) 1e					
	f	All other contributions, gifts, grants, and similar amounts not included above 1f					
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f . . . . .					
Program Service Revenue	2a	DUES & INITIATION FEE	Business Code 900099	2,530,932	2,530,932		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f . . . . .		2,530,932			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . .	2,669	2,669		
4		Income from investment of tax-exempt bond proceeds . . . . .					
5		Royalties . . . . .					
6a		Gross rents	(i) Real (ii) Personal				
		b	Less rental expenses				
		c	Rental income or (loss)				
		d	Net rental income or (loss) . . . . .				
7a		Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
		b	Less cost or other basis and sales expenses				
		c	Gain or (loss)				
		d	Net gain or (loss) . . . . .				
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .	a				
		b	Less direct expenses . . . . . b				
		c	Net income or (loss) from fundraising events . . . . .				
9a		Gross income from gaming activities See Part IV, line 19 . . . . .	a				
		b	Less direct expenses . . . . . b				
		c	Net income or (loss) from gaming activities . . . . .				
10a		Gross sales of inventory, less returns and allowances . . . . .	a				
		b	Less cost of goods sold . . . . . b				
		c	Net income or (loss) from sales of inventory . . . . .				
Miscellaneous Revenue		Business Code					
11a		INSURANCE PROCEEDS-DAM	900099	22,513	22,513		
b	EDUCATIONAL EXPENSE RE	900099	1,500	1,500			
c	RESTORE LONG-TIME OUTS	900099	423	423			
d	All other revenue . . . . .						
e	Total. Add lines 11a-11d . . . . .		24,436				
12	Total revenue. See Instructions . . . . .		2,558,037	2,558,037	0	0	

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 . . . . .	56,298			
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 . . . . .	185,136			
5	Compensation of current officers, directors, trustees, and key employees . . . . .	414,562			
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 . . . . .	121,728			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	116,451			
9	Other employee benefits . . . . .	81,283			
10	Payroll taxes . . . . .	41,788			
11	Fees for services (non-employees)				
a	Management . . . . .				
b	Legal . . . . .	15,500			
c	Accounting . . . . .	21,300			
d	Lobbying . . . . .				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees . . . . .				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) . . . . .	3,719			
12	Advertising and promotion . . . . .				
13	Office expenses . . . . .	28,481			
14	Information technology . . . . .	6,385			
15	Royalties . . . . .				
16	Occupancy . . . . .	43,311			
17	Travel . . . . .	10,572			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19	Conferences, conventions, and meetings . . . . .	11,457			
20	Interest . . . . .				
21	Payments to affiliates . . . . .	1,022,301			
22	Depreciation, depletion, and amortization . . . . .				
23	Insurance . . . . .	9,263			
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 )				
a	CAPITAL OUTLAY	76,978			
b	NEGOTIATIONS, ARBITRATION	56,021			
c	TELEPHONE & POSTAGE	39,458			
d	REAL ESTATE PROPERTY TAX	11,407			
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,373,399			
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X

Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		230,464	1	215,385
	2	Savings and temporary cash investments		2,245,300	2	2,447,967
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a1,047,286			
	b	Less accumulated depreciation	10b0	970,308	10c	1,047,286
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		3,446,072	16	3,710,638
Liabilities	17	Accounts payable and accrued expenses		98,012	17	99,392
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		98,012	26	99,392
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets			27	
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
	Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds		2,377,652	30	2,563,960
	31	Paid-in or capital surplus, or land, building or equipment fund		970,408	31	1,047,286
	32	Retained earnings, endowment, accumulated income, or other funds		0	32	0
	33	Total net assets or fund balances		3,348,060	33	3,611,246
	34	Total liabilities and net assets/fund balances		3,446,072	34	3,710,638

Part XI Reconciliation 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	2,558,037
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,373,399
3	Revenue less expenses Subtract line 2 from line 1	3	184,638
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,348,060
5	Net unrealized gains (losses) on investments	5	
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	78,548
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3,611,246

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	No
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	No
3b	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	

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at**

***www.irs.gov/form990.***

OMB No 1545-0047

2014

Open to Public Inspection

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

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

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

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

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (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

Name of the organization OFFICE & PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277	Employer identification number  75-0850331
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

1	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).**

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$ _____
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$ _____
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," describe in Part IV	

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$ _____
2	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	▶ \$ _____
4	Did the filing organization file <b>Form 1120-POL</b> for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing 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) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A
- Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount Enter the amount from the following table in both columns															
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under section 501(h)  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

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

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i.			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912.			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	No

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	2,530,878
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV

Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
FORM 990, SCHEDULE C, SUPPLEMENTAL INFORMATION	OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 DID NOT MAKE ANY POLITICAL EXPENDITURES DURING THE CURRENT TAX YEAR OR PRIOR YEARS THEREFORE, NO SECTION 6033(E)(1)(A) NOTICES WERE REQUIRED. OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 DUES, FEES AND ASSESSMENTS ARE DEDUCTIBLE BY MEMBERS SUBJECT TO THE INTERNAL REVENUE SERVICE RULES GOVERNING THIS TYPE OF DEDUCTION.

[illegible]



SCHEDULE D  
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2014

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.  
► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization OFFICE & PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277	Employer identification number  75-0850331
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Part I 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
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ Preservation of open space

2

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
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4

Number of states where property subject to conservation easement is located ►

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$

8

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)?

☐ Yes ☐ No

9

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included in Form 990, Part VIII, line 1

► \$

(ii) Assets included in Form 990, Part X

► \$

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenue included in Form 990, Part VIII, line 1

► \$

b

Assets included in Form 990, Part X

► \$

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

Cat No 52283D

Schedule D (Form 990) 2014

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

- 3 Using the organization’s acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other
- 4 Provide a description of the organization’s collections and explain how they further the organization’s exempt purpose in Part XIII
- 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization’s collection? 

☐ Yes ☐ No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 

☐ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIII and complete the following table
- c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 

☐ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII 

☐

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

- |  | (a)Current year | (b)Prior year | b (c)Two years back | (d)Three years back | (e)Four years back |
|--|-----------------|---------------|---------------------|---------------------|--------------------|
| 1a Beginning of year balance . . . . .                     |                 |               |                     |                     |                    |
| b Contributions . . . . .                                  |                 |               |                     |                     |                    |
| c Net investment earnings, gains, and losses               |                 |               |                     |                     |                    |
| d Grants or scholarships . . . . .                         |                 |               |                     |                     |                    |
| e 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 1g, column (a)) held as
- a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c 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 that are held and administered for the organization by
- (i) unrelated organizations . . . . .

(ii) related organizations . . . . .
- |        | Yes | No |
|--------|-----|----|
| 3a(i)  |     |    |
| 3a(ii) |     |    |
| 3b     |     |    |
- b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .
- 4 Describe in Part XIII the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land . . . . .	105,000			105,000
b Buildings . . . . .	685,288			685,288
c Leasehold improvements . . . . .				
d Equipment . . . . .	186,998			186,998
e Other . . . . .	70,000			70,000
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . . . ▶				1,047,286



Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements . . . . .		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments . . . . .	2a		
b	Donated services and use of facilities . . . . .	2b		
c	Recoveries of prior year grants . . . . .	2c		
d	Other (Describe in Part XIII ) . . . . .	2d		
e	Add lines 2a through 2d . . . . .		2e	
3	Subtract line 2e from line 1 . . . . .		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a		
b	Other (Describe in Part XIII ) . . . . .	4b		
c	Add lines 4a and 4b . . . . .		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 ) . . . . .		5	

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements . . . . .		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities . . . . .	2a		
b	Prior year adjustments . . . . .	2b		
c	Other losses . . . . .	2c		
d	Other (Describe in Part XIII ) . . . . .	2d		
e	Add lines 2a through 2d . . . . .		2e	
3	Subtract line 2e from line 1 . . . . .		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a		
b	Other (Describe in Part XIII ) . . . . .	4b		
c	Add lines 4a and 4b . . . . .		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 ) . . . . .		5	

Part XIII

Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
FORM 990, PART X, PAGE 11 BALANCE SHEET, LINE 10B	OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION - LOCAL 277 DOES NOT RECORD DEPRECIATION ON ITS FIXED ASSETS, BUT RATHER RECOGNIZES THE PURCHASE OF FIXED ASSETS AS A CAPITAL OUTLAY IN THE YEAR OF PURCHASE. THE VALUE OF THE LAND ORIGINALLY PURCHASED WITH THE MAIN OFFICE BUILDING IN THE 1980'S IS INCLUDED IN THE COST OF THE BUILDINGS. THE FIXED ASSETS-OTHER ASSETS ARE IMPROVEMENTS TO THE PARKING LOT.

[illegible]

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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

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

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public  
Inspection

Name of the organization  
OFFICE & PROFESSIONAL EMPLOYEES  
INTERNATIONAL UNION-LOCAL 277

Employer identification number  
75-0850331

Part I

General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SHOOT FOR A CURE 1345 YOSEMITE CIRCLE OAKELY,CA 94561	80-0171936	501(C)(3)	10,000	0	NOT APPLICABLE	NOT APPLICABLE	TO AID IN CANCER RESEARCH AND ASSIST INDIVIDUALS WITH CANCER
(2) GUIDE DOGS OF AMERICA 13445 GLENOAKS BOULEVARD SYLMAR,CA 91342	95-1586088	501(C)(3)	6,000	0	NOT APPLICABLE	NOT APPLICABLE	TO TRAIN AND PROVIDE GUIDE DOGS AT NO CHARGE TO PEOPLE WHO ARE BLIND AND HAVE OTHER EYE SIGHT DEFICIENCIES
(3) TEXAS AFLCIO POST OFFICE BOX 12727 AUSTIN,TX 78711	74-1289747	501(C)(5)	10,000	0	NOT APPLICABLE	NOT APPLICABLE	ASSISTANCE AND SPONSORSHIP OF EVENTS TO PROMOTE ORGANIZED LABOR THROUGHOUT THE STATE OF TEXAS
(4) AMERICAN FRIENDS OF THE YITZHAK ROBIN CENTER 36-12 34TH AVENUE 4TH FLOOR NEWYORK,NY 11106	13-3962392	501(C)(3)	7,500	0	NOT APPLICABLE	NOT APPLICABLE	SPONSORSHIP OF AN AWARDS DINNER IN WHICH THE TOP MANAGEMENT OFFICIAL ONE OF OFFICE & PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277'S MEMBER COMPANIES WAS BEING HONORED

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . .

3

Enter total number of other organizations listed in the line 1 table . . . . .

**Part III**

**Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Return Reference	Explanation
PART I, LINE 2	OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 DOES NOT AWARD GRANTS, AS GRANTS ARE TYPICALLY DEFINED THE EXECUTIVE BOARD OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 REVIEWS ANY REQUESTS FOR ASSISTANCE TO U S BASED ORGANIZATIONS WHETHER SUCH REQUEST COMES DIRECTLY FROM MANAGEMENT, MEMBERS, OR FROM SOMEONE ON BEHALF OF THE ORGANIZATION THE EXECUTIVE BOARD THEN MAKES PROPER INQUIRIES AND REVIEWS APPROPRIATE INFORMATION PERTAINING TO THE ORGANIZATION THE EXECUTIVE BOARD THEN VOTES AS TO WHETHER OR NOT TO PROVIDE ASSISTANCE TO THE ORGANIZATION RECORDS SUBSTANTIATING THE AMOUNT OF ASSISTANCE ARE MAINTAINED WITH THE MINUTES OF THE EXECUTIVE BOARD MEETINGS

Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization  
OFFICE & PROFESSIONAL EMPLOYEES  
INTERNATIONAL UNION-LOCAL 277

Employer identification number  
  
75-0850331

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <div><div><input type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:		
a	Receive a severance payment or change-of-control payment?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a	The organization?	5a	
b	Any related organization?	5b	
	If "Yes," to line 5a or 5b, describe in Part III.		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a	The organization?	6a	
b	Any related organization?	6b	
	If "Yes," to line 6a or 6b, describe in Part III.		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	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)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 BECKY TURNER, PRESIDENT/BUSINESS MGR	(i)	125,058	0	0	0	43,295	168,353	0
	(ii)	..... 7,950	..... 0	..... 0	..... 0	..... 0	..... 7,950	..... 0
2 NORMA L GONZALEZ, SECRETARY/TREASURER	(i)	128,170	0	0	0	34,931	163,101	0
	(ii)	..... 0	..... 0	..... 0	..... 0	..... 0	..... 0	..... 0

**Part III**   **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

Return Reference	Explanation
PART I, LINE 3	ALL SALARIES OF THE OFFICE AND PROFESSIONAL INTERNATIONAL UNION-LOCAL 277 ARE REVIEWED AND APPROVED BY THE GOVERNING BODY OF THE ORGANIZATION, THE EXECUTIVE BOARD THIS INCLUDES ANY BONUSES AND PAY INCREASES THE OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 PAYS ANY OFFICER, TRUSTEE, AND/OR EMPLOYEE THAT PERFORMS SERVICES FOR THE ORGANIZATION, BUT DOES NOT PERFORM SERVICES ON A FULL TIME BASIS AND IS EMPLOYED BY ONE OF THE COMPANIES REPRESENTED BY OFFICE AND PROFESSIONAL EMPLOYEES INTERANTIONAL UNION-LOCAL 277, THE RATE OF PAY THEY ARE PAID BY THEIR EMPLOYER SUCH EMPLOYER WILL BE A BARGAINING UNIT MEMBER OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 AND SUCH EMPLOYEE WILL BE A MEMBER OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277

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](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization OFFICE & PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277	Employer identification number  75-0850331
--	--

<b>Part I Excess Benefit Transactions</b> (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b					
1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2	Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 . . . . .	▶ \$	
3	Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . .	▶ \$	

Part II

Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No

Total	▶ \$			
-------	------	--	--	--

<b>Part III Grants or Assistance Benefiting Interested Persons.</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 27.				
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				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
------------------	-------------

Additional Data

Software ID:  
Software Version:  
EIN: 75-0850331  
Name: OFFICE & PROFESSIONAL EMPLOYEES  
INTERNATIONAL UNION-LOCAL 277

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) BECKY TURNER	PRES & BUS MGR		TYLER L TURNER, THE SON OF BECKY TURNER-PRESIDENT AND BUSINESS MANAGER OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 IS EMPLOYED BY THE ORGANIZATION HE WAS HIRED AND HIS SALARY WAS SET BY AN ACTION OF THE EXECUTIVE BOARD, THE GOVERNING BODY, OF THE ORGANIZATION ANY SALARY INCREASES OR CHANGE OF DUTIES HAVE BEEN APPROVED BY THE EXECUTIVE BOARD SINCE HE HAS BEEN ON STAFF HIS POSITION AS RECORDING SECRETARY OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 IS SUBJECT TO ELECTION BY THE IN EXCESS OF 7,000 MEMBERS OF THE ORGANIZATION IN THE MOST RECENT ELECTION, HE WAS ELECTED BY ACCLAMATION WITHOUT OPPOSITION		No
(2) BECKY TURNER	PRES & BUS MGR		BECKY TURNER, PRESIDENT AND BUSINESS MANAGER OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277, SERVES AS THE VICE PRESIDENT OF REGION 4 FOR THE INTERNATIONAL OFFICE OF THE ORGANIZATION, OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-INTERNATIONAL OFFICE THIS POSITION SERVES AS THE REPRESENTIVE FOR THE LOCAL UNIONS IN REGION 4 TO OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-INTERNATIONAL OFFICE AND IS ELECTED BY THE MEMBERS OF REGION 4 THE FINANCIAL TRANSACTIONS BETWEEN OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 AND OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-INTERNATIONAL OFFICE ARE WITHIN THE ORDINARY COURSE OF THE RELATIONSHIP BETWEEN THE TWO ORGANIZATIONS AND ARE INCLUDED ON FORM 990, PART IX, PAGE 10, LINE 21, PAYMENTS TO AFFILIATES BECKY TURNER DID RECEIVE COMPENSATION IN THE AMOUNT OF \$7,950 FOR HER SERVICE AS VICE PRESIDENT OF REGION 4 FOR CALENDAR YEAR 2014, THE REPORTING PERIOD FOR SALARIES ON FORM 990		No
(3) BECKY TURNER	PRES & BUS MGR		BECKY TURNER, PRESIDENT AND BUSINESS MANAGER OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277, SERVED ON THE EXECUTIVE COMMITTEE OF SHOOT FOR A CURE, ONE OF THE ORGANIZATIONS THAT WAS GIVEN MONEY BY OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 DURING THE FISCAL YEAR THIS EXECUTIVE COMMITTEE POSITION WAS ONLY IN REGARD TO THE ANNUAL FUNDRAISER AND DID NOT INVOLVE ANY COMPENSATION TO BECKY TURNER, VOTING RIGHTS OR ANY OTHER INVOLMENT IN THE DAY TO DAY OPERATIONS OR BUSINESS OF THIS 501(C)(3) ORGANIZATION		No
(4) TYLER TURNER	RECORDING SECRETARY AND BUSINESS REPRESENTATIVE		TYLER TURNER, BUSINESS REPRESENTATIVE AND RECORDING SECRETARY OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 WAS MEMBER AT LARGE NO 2 ON THE EXECUTIVE BOARD OF THE TARRANT COUNTY CENTRAL LABOR COUNCIL AND A VICE PRESIDENT OF DISTRICT 8 OF THE TEXAS AFL/CIO, TWO OF THE ORGANIZATIONS TO WHICH OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 MADE DONATIONS OR SPONSORED EVENTS HONORING LABOR LEADERS DURING THE FISCAL YEAR IN ORDER TO PROMOTE ORGANIZED LABOR IN TARRANT COUNTY AND THE STATE OF TEXAS, THE DOMICILE OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 THERE IS NO COMPENSATION OR ANY MONETARY BENEFIT RECEIVED BY BEING A MEMBER OF THE EXECUTIVE BOARD OF THE TARRANT COUNTY CENTRAL LABOR COUNCIL OR BY BEING THE VICE PRESIDENT OF THE TEXAS AFL/CIO		No
(5) N LINDA GONZALEZ	SECRETARY TREASURER AND ASSISTANT BUSINESS MANAGER		LINDA GONZALEZ IS SECRETARY/TREASURER AND ASSISTANT BUSINESS MANAGER OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 HER HUSBAND IS A VOLUNTEER FOR COWBOY SANTAS IN FORT WORTH, TEXAS OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 MADE A SMALL DONATION IN THE AMOUNT OF \$350 TO COWBOY SANTAS OF FORT WORTH, TEXAS DURING THE FISCAL YEAR		No
(6) BECKY TURNER	PRES & BUS MGR		BECKY TURNER'S DAUGHTER-IN-LAW, KAYLEE TURNER, IS EMPLOYED BY ONE OF THE COMPANIES WHOSE EMPLOYEES ARE REPRESENTED BY OFFICE & PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 DURING THIS FISCAL YEAR, A NEW CONTRACT WAS NEGOTIATED BY OFFICE & PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 AND THE EMPLOYER COMPANY OF KAYLEE TURNER KAYLEE TURNER PARTICIPATED IN THE NEGOTIATIONS UNDER THE AGREEMENT WITH THE EMPLOYEE COMPANY, OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 PAID KAYLEE TURNER ALONG WITH TWO OTHER EMPLOYEES OF THE REPRESENTED COMPANY, CLOCK-TIME/LOST TIME IN THE AMOUNT OF \$396		No
(7) TYLER TURNER	RECORDING SECRETARY AND BUSINESS REPRESENTATIVE		TYLER TURNER'S WIFE, KAYLEE TURNER, IS EMPLOYED BY ONE OF THE COMPANIES WHOSE EMPLOYEES ARE REPRESENTED BY OFFICE & PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 DURING THIS FISCAL YEAR, A NEW CONTRACT WAS NEGOTIATED BY OFFICE & PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 AND THE EMPLOYER COMPANY OF KAYLEE TURNER KAYLEE TURNER PARTICIPATED IN THE NEGOTIATIONS UNDER THE AGREEMENT WITH THE EMPLOYER COMPANY, OFFICE & PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 PAID KAYLEE TURNER, ALONG WITH TWO OTHER EMPLOYEES FOR THE REPRESENTED COMPANY, CLOCK-TIME/LOST TIME IN THE AMOUNT OF \$396		No

**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](http://www.irs.gov/form990).**

OMB No 1545-0047

**2014****Open to Public  
Inspection**Name of the organization  
OFFICE & PROFESSIONAL EMPLOYEES  
INTERNATIONAL UNION-LOCAL 277**Employer identification number**

75-0850331

**Return  
Reference****Explanation**FORM 990,  
PART VI,  
SECTION A,  
LINE 2

OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 EMPLOYS THE SON OF THEIR PRESIDENT IN MAY OF 2011, THE EXECUTIVE BOARD OF OFFICE AND PROFESSIONAL EMPLOYEES UNION-LOCAL 277 HIRED/PROMOTED THE SON TO BE THE BUSINESS REPRESENTATIVE OF THE ORGANIZATION THEREBY RECOGNIZING HIM AS A KEY EMPLOYEE OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 BECAUSE OF THE EXPERIENCE HE HAS GAINED AND THE ABILITIES THAT HE HAS SHOWN IN HANDLING GRIEVANCES, NEGOTIATIONS, AND ALL RELATED ACTIVITIES OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277, HIS SALARY, BENEFITS, AND ANY APPLICABLE BONUSES ARE SET BY THE EXECUTIVE BOARD IN THE SAME MANNER AS OTHER EMPLOYEES OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 THAT ARE SIMILARLY SITUATED IN MARCH OF 2014, THE EXECUTIVE BOARD APPOINTED THE SON OF THE PRESIDENT TO THE EXECUTIVE BOARD OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 TO COMPLETE THE UNEXPIRED TERM OF THE RECORDING SECRETARY THAT RESIGNED DURING THAT FISCAL YEAR AT THAT TIME, THE RECORDING SECRETARY ASSUMED THE POSITION OF THE RETIRING SECRETARY/TREASURER BY ACTION OF THE EXECUTIVE BOARD AND RATIFIED BY THE MEMBERSHIP DURING THE REGULAR ELECTION OF OFFICERS AND TRUSTEES IN OCTOBER OF 2015, THE SON OF THE PRESIDENT WAS DULY ELECTED BY ACCLAMATION BY THE ENTIRE MEMBERSHIP OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 THE MEMBERSHIP AND THE EXECUTIVE BOARD OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 WANTS TO ENSURE THAT THE PRESIDENT'S SON BECOMES WELL SEASONED IN THE MANAGEMENT OF LOCAL 277 IN ORDER TO PROVIDE CONTINUITY OF OPERATIONS OVER THE NEXT SEVERAL YEARS AS OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 HAS GROWN DURING RECENT YEARS THE PRESIDENT'S SON HAS GRADUALLY BECOME MORE INVOLVED IN THE OPERATIONS BY TAKING OVER HANDLING MANY OF THE REPRESENTATION TASKS FOR THE VARIOUS COMPANIES REPRESENTED BY OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	<p>THE DAUGHTER-IN-LAW OF THE PRESIDENT WHO IS ALSO THE WIFE OF THE SON OF THE PRESIDENT, IS A MEMBER OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 BECAUSE OF HER EMPLOYMENT WITH A EMPLOYER COMPANY REPRESENTED BY OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 DURING THE CALENDAR YEAR 2014, THE EMPLOYER COMPANY WHOSE EMPLOYEES ARE REPRESENTED BY OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 WERE IN NEGOTIATIONS THE DAUGHTER-IN-LAW/WIFE, AS EMPLOYEE OF THIS MEMBER COMPANY, WAS INVOLVED IN THE NEGOTIATIONS ON BEHALF OF THE MEMBER COMPANY UNDER THE ARRANGEMENT FOR NEGOTIATIONS BETWEEN OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 AND THE MEMBER COMPANY, EMPLOYEES OF THE MEMBER COMPANY PARTICIPATING IN THE NEGOTIATIONS WERE PAID CLOCK-TIME/LOST TIME BY OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 FOR A PORTION OF THE TIME SPENT IN NEGOTIATIONS IN CALENDAR YEAR 2014, THE DAUGHTER-IN-LAW/WIFE WAS PAID A TOTAL OF \$396 BY OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 THIS AMOUNT WAS REPORTED ON FORM W-2 FOR 2014</p>

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 IS GOVERNED BY THE ENTIRE EMPLOYEE MEMBERS FROM WITHIN THE VARIOUS COMPANIES REPRESENTED THESE MEMBERS ELECT THE TRUSTEES AND OFFICERS OF ITS GOVERNING BODY , THE EXECUTIVE BOARD



Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	THE MEMBERSHIP OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 ELECT THE OFFICERS, THE TRUSTEES, AND MEMBERS AT LARGE (IF APPLICABLE) OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 WHICH COMPRISE THE GOVERNING BODY , THE EXECUTIVE BOARD

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	THE MEMBERSHIP OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 APPROVE THE ACTIONS OF THE ORGANIZATION'S GOVERNING BODY , THE EXECUTIVE BOARD

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 FILED BY OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 IS PREPARED BY AN INDEPENDENT CERTIFIED PUBLIC ACCOUNTANT ENGAGED BY THE EXECUTIVE BOARD, THE GOVERNING BODY OF OPEIU-LOCAL 277 THE INDEPENDENT CERTIFIED PUBLIC ACCOUNTANT GOES OVER THE COMPLETED FORM 990 IN DETAIL WITH THE SECRETARY/TREASURER OF OPEIU-LOCAL 277 THE SECRETARY/TREASURER OF OPEIU-LOCAL 277 THEN MAKES A DETAILED REPORT TO THE EXECUTIVE BOARD REGARDING THE COMPLETED FORM 990

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12	OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 DOES NOT HAVE A WRITTEN CONFLICT OF INTEREST POLICY OR WHISTLEBLOWER POLICY. HOWEVER, THE GOVERNING BODY OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277, WHICH IS THE EXECUTIVE BOARD, ACTS UPON ALL MAJOR AGREEMENTS, ACQUISITIONS AND CONTRACTS AND ARE TOLD OF ANY POTENTIAL CONFLICTS AT THAT TIME. OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 EXECUTIVE BOARD AND OFFICERS MAKE EVERY ATTEMPT TO AVOID ANY SITUATIONS OR TRANSACTIONS THAT COULD BE VIEWED AS A CONFLICT OF INTEREST.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	SALARIES OF ALL EMPLOYEES, WHETHER THE EMPLOYEE IS FULL TIME OR PART-TIME, INCLUDING THE TOP MANAGEMENT, PRESIDENT, BUSINESS MANAGER AND SECRETARY/TREASURER ARE SET BY THE INDEPENDENT EXECUTIVE BOARD OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 THE EXECUTIVE BOARD UTILIZES COMPARABILITY DATA AND OTHER FACTORS IN DETERMINING THE APPROPRIATE PAY RATES SHOULD A MEMBER NOT REGULARLY EMPLOYED BY OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 PERFORM SERVICES FOR OPEIU-LOCAL 277, SUCH MEMBER IS PAID FOR TIME SPENT ON OPEIU-LOCAL 277 UNION'S BUSINESS, SUCH AS SERVING ON A COMMITTEE, ETC , AT THE SAME PAY RATE AS THEY ARE PAID BY THEIR EMPLOYER, COMMONLY KNOWN AS LOST TIME OR CLOCK-TIME

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 18	THE FORM 1023 UNDER WHICH OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 IS EXEMPT IS MADE AVAILABLE UPON REQUEST

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 MAKES ALL DOCUMENTS OPEN TO PUBLIC INSPECTION AVAILABLE UPON REQUEST. AN AGREED UPON PROCEDURES REPORT IS PERFORMED EACH FISCAL QUARTER BY AN INDEPENDENT CERTIFIED PUBLIC ACCOUNTANT. THESE PROCEDURES INCLUDE A COMPREHENSIVE REVIEW OF THE FINANCIAL TRANSACTIONS OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 FOR THE QUARTER. THE INDEPENDENT CERTIFIED PUBLIC ACCOUNTANT'S REPORT FOR EACH QUARTER IS REVIEWED BY THE EXECUTIVE BOARD.

Return Reference	Explanation
FORM 990, PART VII	GENE PATTON - 10208 FIELDCREST DRIVE, BENBROOK, TX 76126 RAMONA ALEXANDER - 337 HILLVIEW DRIVE, HURST, TX 76054 DEAUNDRA CEPHUS - 5727 ROXANNE DRIVE, WACO, TX 76710 JACKIE CURRY - POST OFFICE BOX 954, JOSHUA, TX 76058



Return Reference	Explanation
FORM 990, PART VII, PAGE 7, COLUMN (F)	ALL OTHER COMPENSATION INCLUDED IN COLUMN (F) IS FROM OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 THESE AMOUNTS ARE REPORTED ON THE BASIS FISCAL YEAR ENDED OCTOBER 31, 2015 RATHER THAN A CALENDAR YEAR THERE WOULD BE NO SIGNIFICANT DIFFERENCE IF CALENDAR YEAR NUMBERS WERE USED NO COMPENSATION FROM RELATED OR UNRELATED ORGANIZATIONS IS INCLUDED

Return Reference	Explanation
FORM 990, PART XI, LINE 9	NET CHANGE-ACCOUNTS PAYABLE ON BALANCE SHEET/NOT ON REVENUES & EXPENDITURES 1,570 FIXED ASSET ACQUISITION RECOGNIZED AS EXPENSE AND ALSO CAPITALIZED 76,978

Return Reference	Explanation
FORM 990, PART VI, SECTION A, GOVERNING BODY AND MANAGEMENT, LINE 8B	NO COMMITTEE HAS AUTHORITY TO ACT ON BEHALF OF THE EXECUTIVE BOARD OF OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 277 COMMITTEES ARE REQUESTED TO EXAMINE OR INVESTIGATE CERTAIN SITUATIONS AND REPORT THEIR FINDINGS BACK TO THE EXECUTIVE BOARD THE EXECUTIVE BOARD THEN DOCUMENTS THEIR FINDINGS IN THE MINUTES OF THE EXECUTIVE BOARD MEETINGS

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
▶ Attach to Form 990.  
▶ Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization  
OFFICE & PROFESSIONAL EMPLOYEES  
INTERNATIONAL UNION-LOCAL 277

Employer identification number  
  
75-0850331

Part I Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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.

(a) Name, address, and EIN of related organization	(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	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-INTERNATIONAL OFFICE 80 EIGHTH AVENUE SUITE 610  NEW YORK, NY 10011 53-0175463	INTERNATIONAL ORGANIZATION OF LOCAL OFFICE & PROFESSIONAL EMPLOYEE UNIONS	NY	501(C)(5)	NOT APPLICABLE			No

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

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

**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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V

Transactions With Related Organizations

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to related organization(s)

c

Gift, grant, or capital contribution from related organization(s)

d

Loans or loan guarantees to or for related organization(s)

e

Loans or loan guarantees by related organization(s)

f

Dividends from related organization(s)

g

Sale of assets to related organization(s)

h

Purchase of assets from related organization(s)

i

Exchange of assets with related organization(s)

j

Lease of facilities, equipment, or other assets to related organization(s)

k

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

l

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)

o

Sharing of paid employees with related organization(s)

p

Reimbursement paid to related organization(s) for expenses

q

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)

Yes

No

1a

No

1b

No

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

No

1n

No

1o

No

1p

Yes

1q

Yes

1r

Yes

1s

No

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) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) OFFICE & PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-INTERNATIONAL OFFICE	Q		POLICY BETWEEN ORGANIZATIONS
(2) OFFICE & PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-INTERNATIONAL OFFICE	R		BASED ON MEMBERSHIP DUES & FEES
(3) OFFICE & PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-INTERNATIONAL OFFICE	R		BASED ON MEMBERSHIP DUES & FEES
(4) OFFICE & PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-INTERNATIONAL OFFICE	P		DISCRETIONARY BY LOCAL 277
(5) OFFICE & PROFESSIONAL EMPLOYEES INTERNATIONAL UNION-LOCAL 153 HEALTH FUND	P		HEALTH INSURANCE FOR SOME EMP

**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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

**Part VII**   **Supplemental Information**

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

Return Reference	Explanation
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