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Department of the

DLN: 93493320128486

OMB No 1545-0047

Open to Public

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

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

▶ Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990 and its instructions is at <u>www IRS gov/foim990</u>

Treasu	ıry	of the venue Servi	► Information a	about Form 990 and its instructi		•	•		Open to Public Inspection
			alendar year, or tax year beg	inning 01-01-2015 , and endin	g 12-31-20	15			
_ A	ddress	applicable s change	C Name of organization UNITED FOOD AND COMMERC INTERNATIONAL UNION	IAL WORKERS				oyer ider 220586	ntification number
Name change Initial return Final return/terminated			Doing business as						
			Number and street (or P O bo 1775 K STREET NW	ox if mail is not delivered to street addre	ess) Room/s	uite	· ·	none num	
Amended return Application pendin			City or town, state or province	e, country, and ZIP or foreign postal cod	le		(202	) 223-3	111
			WASHINGTON, DC 20006	1.6					5 404,224,213
			F Name and address of pr ESTHER R LOPEZ 1775 K STREET NW WASHINGTON, DC 2000			S	s this a grou ubordinates No	· •	for Yes 🗸
I Ta	x-exe	empt status	501(c)(3) <b>3</b> 501(c) (	5 ) <b>◀</b> (insert no ) 4947(a)(1) or	527	` '	Are all subord ncluded?		\[\text{Yes}  \text{No}\]
J W	ebsit	te:► WV	VW UFCW ORG				r 'No," attac Group exemp		(see instructions) nber ►
<b>K</b> For	n of c	organization	Corporation Trust 🗸 A	Association Other ►			of formation 1		State of legal domicile D
Pa	rt I	Sum	ımary						
Activities & Governance	-	TO ORGA	ANIZE ALL WORKERS FOR	ssion or most significant activiti THE ECONOMIC, MORAL & SO  on discontinued its operations o	CIAL ADV				
205			,						
<b>≫</b> 5 √			-	verning body (Part VI, line 1a)				3	55
Æ.				ers of the governing body (Part of d in calendar year 2015 (Part V		•		5	0 444
ÇĘ.				e if necessary)	•			6	0
⋖				om Part VIII, column (C), line 12				7a	0
	ь	Net unrel	ated business taxable incom	ne from Form 990-T, line 34 .				7b	
							Prior Year		Current Year
Qı.	8		Contributions and grants (Part VIII, line 1h)				457,450		188,98
en ue v	9	_	rogram service revenue (Part VIII, line 2g)					,065	219,939,48
P.ċ.	10			•	3,657,688 22,522,702 251,789,905		3,417,066 19,809,904		
	12			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) e—add lines 8 through 11 (must equal Part VIII, column (A), line			243,355,44		
	13		s and similar amounts paid (	(Part IX, column (A), lines 1-3	)		3,157	,153	2,496,243
	14	Benef	fits paid to or for members (F		6,243	,629	5,528,909		
8	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)					147,871	136,990,75	
Expenses	16a		ssional fundraising fees (Pa	•		0	(		
五	ь		undraising expenses (Part IX, colur				05.250	F 1 7	00 702 101
	17 18		r expenses (Part IX, column expenses Add lines 13–17	•	95,359 252,632	-	98,792,105		
	19			line 18 from line 12			-842		-452,57
Net Assets or Fund Balances							ing of Current		End of Year
Asser Bala	20	Total	assets (Part X, line 16) .				199,565		196,439,948
E E	21		liabilities (Part X, line 26)			•		,724	626,812
	22		ssets or fund balances  Subt <b>1ature Block</b>	tract line 21 from line 20			199,091	,042	195,813,136
Unde my k	r per nowle	nalties of edge and	perjury, I declare that I hav	e examıned this return, including d complete Declaration of prepa					
			ature of officer				2016-11-15		
Sign		-   (	ature of officer				Date		
Her	E		HONY M PERRONE INT'L SECRETA e or print name and title	RY-TREASURER					
			Print/Type preparer's name SCOTT E HALLBERG CPA	Preparer's signature SCOTT E HALLBERG CPA		Date	Check I if	PTIN P01081	188
Paid							self-employed		
Pre	-	er ⊦	Firm's name ► CALIBRE CPA GR Firm's address ► 7501 WISCONSIN				Firm's EIN ► 4		
Use	Or	nly  ˈ	WEST					_, 551-30	· <del>··</del>

Form 990 (2015)

	990 (2015)			Page <b>3</b>
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🔰	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Yes	
	Section 501(c)(3) organizations.  Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?  If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19?  If "Yes," complete Schedule C, Part III	5	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	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III "	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🐿	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	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	<b>11</b> c		No
	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 2	<b>11</b> d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?  If "Yes," complete Schedule D, Part X	<b>11</b> f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII 2	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^7$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form	990 (2015)			Page <b>4</b>
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	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? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	<b>24</b> c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

**b** Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

member of any of these persons? If "Yes," complete Schedule L, Part III . . . . . . . . . . . . . .

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

**b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

**b** If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

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

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

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . . 🛸

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

29

30

31

No

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

35a

35b

36

37

38

Yes

Yes

Νo

Νo

Nο

Νo

Nο

Nο

Nο

Nο

Nο

Νo

Par	t V	Statements Regarding Other IRS Filings and Tax Compliance		<b>N</b> /			_
		Check if Schedule O contains a response or note to any line in this	Part	<u>v</u>		Yes	No
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	191			
b	Enter	the number of Forms W-2G included in line 1a Enter -0 - if not applicable	1b	0			
c		ne organization comply with backup withholding rules for reportable payments to ng (gambling) winnings to prize winners?	vend	dors and reportable	1c	Yes	
2a	_	the number of employees reported on Form W-3, Transmittal of Wage and	·	 		. 00	
	Tax S	tatements, filed for the calendar year ending with or within the year covered s return	2a	444			
b		east one is reported on line 2a, did the organization file all required federal emp If the sum of lines 1a and 2a is greater than 250, you may be required to e-file			2b	Yes	
3a	Did th	ne organization have unrelated business gross income of \$1,000 or more during	the y	year?	3a		No
b	If "Yes	s," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation	on in S	Schedule O	3b		
4a	over, a	y time during the calendar year, did the organization have an interest in, or a si- a financial account in a foreign country (such as a bank account, securities acc int)?			4a	Yes	
b		es," enter the name of the foreign country ►CA nstructions for filing requirements for FinCEN Form 114, Report of Foreign Bank R)	and	Financial Accounts			
5a	Was th	he organization a party to a prohibited tax shelter transaction at any time durin	g the	tax year?	5a		No
b	Dıd an	ny taxable party notify the organization that it was or is a party to a prohibited t	ax sh	elter transaction?	5b		No
С	If"Ye	s," to line 5a or 5b, did the organization file Form 8886-T?					
<b>6</b> a		the organization have annual gross receipts that are normally greater than \$10			5c 6a	Yes	
b	If"Ye	ization solicit any contributions that were not tax deductible as charitable cont es," did the organization include with every solicitation an express statement th				V	
7		not tax deductible?	• •		6b	Yes	
	Did th	ne organization receive a payment in excess of \$75 made partly as a contribution of the payor?		d partly for goods and	7a		
b	If"Ye	s," did the organization notify the donor of the value of the goods or services pi	rovide	ed?	7b		
c		ne organization sell, exchange, or otherwise dispose of tangible personal proper orm 8282?	•	which it was required to	<b>7</b> c		
d	If"Ye	s," indicate the number of Forms 8282 filed during the year	7d				
е	Dıd th	ne organization receive any funds, directly or indirectly, to pay premiums on a p	erson	al benefit contract?	7e		
f	Did th	ne organization, during the year, pay premiums, directly or indirectly, on a perso	nal b	enefit contract?	7f		
g	If the require	organization received a contribution of qualified intellectual property, did the ored?	rganız • •	zation file Form 8899 as	<b>7</b> g		
h		organization received a contribution of cars, boats, airplanes, or other vehicles 1098-C?	, dıd	the organization file a	7h		
8	Did a	soring organizations maintaining donor advised funds. donor advised fund maintained by the sponsoring organization have excess bus g the year?	sines:	s holdings at any time	8		
9a	Did th	ne sponsoring organization make any taxable distributions under section 4966			9a		
		ne sponsoring organization make a distribution to a donor, donor advisor, or rela		erson?	9b		
10		on 501(c)(7) organizations. Enter					
а	Initiat	tion fees and capital contributions included on Part VIII, line 12	<b>10</b> a				
b	Gross facılıtı	receipts, included on Form 990, Part VIII, line 12, for public use of club les	10b				
11	Sectio	on 501(c)(12) organizations. Enter		•			
		s income from members or shareholders	11a				
b		s income from other sources (Do not net amounts due or paid to other sources st amounts due or received from them )	11b				
		on <b>4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990	ın lıe	u of Form 1041?	12a		
b	If "Ye: year	es," enter the amount of tax-exempt interest received or accrued during the	12b				
13	Sectio	on 501(c)(29) qualified nonprofit health insurance issuers.					
	additio	e organization licensed to issue qualified health plans in more than one state? <b>N</b> onal information the organization must report on Schedule O	ote. S	See the instructions for	13a		
	ın whic	the amount of reserves the organization is required to maintain by the states ch the organization is licensed to issue qualified health plans	13b				
С	Enter	the amount of reserves on hand	13c				
		ne organization receive any payments for indoor tanning services during the tax	•		14a		No
b	If"Ye	s," has it filed a Form 720 to report these payments? <i>If "No," provide an explana</i>	tion ir	Schedule O	14b		

orm	990 (2015)					Page
Par	For each "Yes" response to lines 2 through 7b below, and for a "No describe the circumstances, processes, or changes in Schedule O. S.			or 10	Ob belo	w,
	Check if Schedule O contains a response or note to any line in this Part VI					[
Se	ction 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	1a	55			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	0			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2	Yes	
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3		No
4	Did the organization make any significant changes to its governing documents since filed?	the p	orior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the o	rganız	ation's assets?	5		No
6	Did the organization have members or stockholders?			6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?			7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approve or persons other than the governing body?			7b	Yes	
8	$\operatorname{Did}$ the organization contemporaneously document the meetings held or written active by the following	ons u	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			<b>8</b> b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No
Se	ction B. Policies (This Section B requests information about policies not	requ.	ired by the Internal R	even	ue Cod	e.)
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			<b>10</b> a	Yes	

**b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b Yes 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 Yes **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . . . . . . Yes Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12h Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe **12**c Yes 13 13 Nο Did the organization have a written document retention and destruction policy? . . . 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official . . . . . 15a Yes 15b 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 **16**a Νo **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . . . . . . . . . . . . . . . 16b

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

9 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

Section C. Disclosure

interest policy, and financial statements available to the public during the tax year

State the name, address, and telephone number of the person who possesses the organization's books and records
►ESTER R LOPEZ INTERNATIONAL SECRE 1775 K STREET NW WASHINGTON, DC 20006 (202) 223-3111

Part VII

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

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (B) (C) (D) (F) (A) (E) Name and Title Average Position (do not check Reportable Reportable Estimated hours per more than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization (Worganizations from the (W-2/1099for related 2/1099-MISC) organization and Former Highest compensat employee Individual trustee É organizations MISC) related ũ stitutional below organizations employee 更合 dotted line) Trustee See Additional Data Table

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

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	(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-	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Former Highest compensated employee		2/1099-MISC)	2/1099-MISC)	organization and related organizations
See Additional Data Table										
1b Sub-Total c Total from continuation sh	eets to Part VII, S	ection A				. •				
d Total (add lines 1b and 1c)						<b>&gt;</b>		5,916,958	621,929	1,376,300

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

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

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

compensation from the organization Report compensation for the care	<del></del>	<del></del>
(A)	(B)	(C)
Name and business address	Description of services	Compensation
PARK STREET STRATEGIES LLC	CONSULTING SERVICES	771,979
9217 GLENVILLE ROAD		
SILVER SPRING, MD 20901		
COHEN WEISS AND SIMON COUNSELORS AT LAW	LEGAL SERVICES	475,153
330 WEST 42ND STREET		
NEW YORK, NY 10036		
WEINBERG ROGER AND ROSENFIELD	LEGAL SERVICES	348,475
1001 MARINA VILLAGE PARKWAY SUITE		
ALAMEDA, CA 94501		
RED COATS INC	CLEANING SERVICES	311,843
4401 EAST WEST HIGHWAY SUITE 500		
BETHESDA, MD 20814		
CALIBRE CPA GROUP	ACCOUNTING SERVICES	283,966
7501 WISCONSIN AVENUE SUITE 1200 WE		
BETHESDA, MD 20814		
2 Total number of independent contractors (including but not limited to the	ose listed above) who received more than	

Yes

No

Form 99	0 (20	15)						Page <b>9</b>
Part V	* • • •	Statement o	f Revenue					
		Check If Schedu	ule O contains a respo	nse or note to any lir	ne in this Part VIII  (A)  Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s &	1a	Federated cam	paigns 1a					
ons, Gifts, Grants Similar Amounts	b	Membership du	es <b>1b</b>					
9 E	С	Fundraising eve	ents <b>1c</b>					
fts. Ir A	d	Related organiz	zations 1d					
i2 i⊑	e	Government grants		116,775				
Contributions, and Other Sim		_		72,212				
tributio Other	f	similar amounts no						
e E	g	Noncash contribute	ons included in lines					
Contand	h	Total. Add lines	s 1a-1f		188,987			
				Business Code				
Program Service Revenue	2a	MEMBERSHIP DUE	S	900099	219,939,484	219,939,484		
3. ?	ь							
πĺ	С							
¥ ×	d							
% =	е							
gran	f	All other progra	am service revenue					
δ	_	Total Add lines	s 2a-2f	•	219,939,484			
	g 3		ome (including dividen					
		and other simila	aramounts)	▶	3,366,882			3,366,882
	4		stment of tax-exempt bond	·	2 162 712			2,163,713
	5	Royalties	() D1	<b>&gt;</b>	2,163,713			2,163,713
	6a	Gross rents	(ı) Real 2,989,131	(II) Personal				
			2 2 4 2 5 7 7					
	b	Less rental expenses	2,340,577					
	С	Rental income or (loss)	648,554					
	d	Net rental inco	me or (loss)		648,554			648,554
	_	C	(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	158,578,379					
	b	Less cost or other basis and	158,528,195					
		sales expenses						
	C	Gain or (loss)	50,184		50,184			50,184
	d 8a	Net gain or (los Gross income f			30,164			30,184
Other Revenue		events (not inc \$						
her Re		See Part IV, lin	ne 18 a					
ŏ	b c		penses <b>b</b> (loss) from fundraising	events •				
	9a		rom gaming activities	CVCINCS				
			ne 19					
	_		a					
	b c		penses <b>b</b> (loss) from gaming acti	VITIES				
		Tree meanie or (	(1033) Hom gaming acti	<b>▶</b>				
	10a	Gross sales of returns and allo						
	b c	_	oods sold <b>b</b> (loss) from sales of inv	entory ▶				
		Miscellaneous		Business Code				
	11a	BENEFIT REIM		900099	11,374,588	11,374,588		1
	Ь	ADMIN REIME	3 FROM REL	900099	2,499,166	2,499,166		
	C .	INITIATION/R		900099	1,987,075	1,987,075		
	d	All other reven			1,136,808	1,136,808		
	е	Total. Add lines		•	16,997,637			
	12	Total revenue.	See Instructions .	· · · · · •	243,355,441	236,937,121		6,229,333

101111 990 (2013)	Page <b>1</b>
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 TX	

	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and				
	domestic governments See Part IV, line 21	2,242,587			
2	Grants and other assistance to domestic				
	ındıvıduals See Part IV, line 22	60,000			
3	Grants and other assistance to foreign organizations, foreign				
	governments, and foreign individuals See Part IV, lines 15 and 16	193,656			
4	Benefits paid to or for members	5,528,909			
5	Compensation of current officers, directors, trustees, and	3,328,909			
•	key employees	5,595,649			
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	32,937,594			
8	Pension plan accruals and contributions (include section 401(k)	32,337,331			
	and 403(b) employer contributions)	86,685,381			
9	Other employee benefits	8,797,924			
10	Payroll taxes	0.074.007			
		2,974,207			
11	Fees for services (non-employees)				
a	Management				
b	Legal	1,174,114			
C	Accounting	184,856			
d	Lobbying				
e f	-	227 211			
ı g	Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A)	327,211			
g	amount, list line 11g expenses on Schedule O)	1,869,656			
12	Advertising and promotion	320,431			
13	Office expenses	2,330,284			
14	Information technology	1,244,649			
15	Royalties				
16	Occupancy	1,106,741			
17	Travel	10,568,197			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,386,410			
20	Interest				
21	Payments to affiliates	11,956,558			
22	Depreciation, depletion, and amortization	1,115,245			
23	Insurance	1,377,229			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	RETIREE HEALTH AND LIFE	29,991,650			
b	RWDSU COUNCIL ASSISTANC	14,554,720			
c	FINANCIAL ASSISTANCE	8,924,286			
d	STRUCTURED CAMPAIGN EXP	4,545,407			
e	All other expenses	4,814,461			
25	<b>Total functional expenses.</b> Add lines 1 through 24e	243,808,012			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X	Balance	Sheet

orm	990 (2	2015)			Page <b>11</b>
Par	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing	15,400,718	1	16,214,690
	2	Savings and temporary cash investments	29,503,931	2	28,043,037
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	317,378	4	220,953
	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	
Assets	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 Pa II of Schedule L	ert	6	
As	7	Notes and loans receivable, net	1,534,663	7	1,229,472
	8	Inventories for sale or use	217,768	8	141,706
	9	Prepaid expenses and deferred charges	2,.00	9	,. 30
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  10a  34,900,3	53		
	Ь	Less accumulated depreciation 10b 28,975,3	20 6.478.101	10c	5,925,033
	11	Investments—publicly traded securities	144,642,999	11	143,278,680
	12	Investments—other securities See Part IV, line 11	995,167	12	1,003,611
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	475,041	15	382,766
	16	Total assets. Add lines 1 through 15 (must equal line 34)	199,565,766	16	196,439,948
	17	Accounts payable and accrued expenses	182,979	17	279,765
	18	Grants payable	102,010	18	270,100
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
		·		-	
ties	21 22	Escrow or custodial account liability Complete Part IV of Schedule D  Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		21	
<u> </u>		persons Complete Part II of Schedule L		22	
Liabilit	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	,	2-4	
		· · · · · · · · · · · · · · · · · · · ·	291,745	25	347,047
	26	Total liabilities. Add lines 17 through 25	474,724	26	626,812
		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🕡 and complet	е		
nces		lines 27 through 29, and lines 33 and 34.			
<u> </u>	27	Unrestricted net assets	198,223,819	27	195,523,924
8	28	Temporarily restricted net assets	867,223	28	289,212
Ĕ	29	Permanently restricted net assets		29	
Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
556	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
Set	33	Total net assets or fund balances	199,091,042	33	195,813,136
	34	Total liabilities and net assets/fund balances	199,565,766	34	196,439,948

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

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

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Schedule O

Single Audit Act and OMB Circular A-133?

2c

3а

3b

Yes

Software ID: Software Version:

**EIN:** 53-0220586

Name: UNITED FOOD AND COMMERCIAL WORKERS

INTERNATIONAL UNION

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Inde	ſ	iiti at	1015				1	ı	1	I
<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours for related	more pers and	than on is	one bot ecto	not box h an or/tr	offic ustee	ess er e)	(D) Reportable compensation from the organization (W- 2/1099-	Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization
	organizations below dotted line)	Individual trustee or director	Institutional Trust⊭e	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	and related organizations
PERRONE ANTHONY INTERNATIONAL PRESIDENT	39 80  0 20	x		х				307,666	0	58,52:
O'NEILL PATRICK J INTERNATIONAL SECRETARY-TREASURER	39 80  0 20	x		х				245,965	0	56,539
APPELBAUM STUART H  EXECUTIVE VP/PRESIDENT RWDSU	10 00 30 00	x		х				0	249,556	62,37
LOPEZ ESTHER R  EXECUTIVE VICE PRESIDENT	39 80  0 20	x		х				235,735	0	55,82:
MEINEMA PAUL  EXEC VP/NATL PRES UFCW CANADA	39 80  0 20	x		х				189,777	0	48,391
BARCLAY WARREN S INTERNATIONAL VICE PRESIDENT/DIRECTOR, ORGANIZING	40 00	×		x				323,779	0	58,32:
CYPHERS FRANK INTERNATIONAL VICE PRESIDENT/COUNCIL PRESIDENT	40 00	х		×				174,040	0	54,183
JONES MILTON L INTERNATIONAL VICE PRESIDENT/REGION DIRECTOR	40 00	x		х				178,161	0	52,265
LAURITSEN MARK D INTERNATIONAL VICE PRESIDENT/DEPARTMENT DIRECTOR	40 00	×		×				198,733	0	57,837
NEFF CHRISTYNE L INTERNATIONAL VICE PRESIDENT/EXEC ASST TO THE PRES	40 00 0 00	х		х				235,978	0	58,527

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** 

2,541

14,705

9,726

4.440

(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee		key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
ORLANDO GEORGE J	40 00									
INTERNATIONAL VICE PRESIDENT/DISTILLERY DIRECTOR	0 00	X		×				181,809	0	54,321
PLUMB LAWRENCE G	40 00									
INTERNATIONAL VICE PRESIDENT/REGION DIRECTOR	0 00	Х		Х				178,909	0	55,227
RAMIREZ LETICIA	40 00									
INTERNATIONAL VICE PRESIDENT/REGION DIRECTOR	0 00	Х		X				177,842	0	52,363
THOMSON EDWARD D	40 00									
INTERNATIONAL VICE PRESIDENT/REGION DIRECTOR	0 00	X		Х				226,767	0	57,027
VINCENT JR ALVIN	40 00									
INTERNATIONAL VICE PRESIDENT/REGION DIRECTOR	0 00	X		X				177,172	0	54,981
WILLIAMSON KEVIN	40 00									
INTERNATIONAL VICE PRESIDENT/DIRECTOR, COLL BARGAI	0 00	×		X				301,363	0	55,991

40 00

0 00 40 00

0 00

40 00

0 00

1 10

0.00

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24,148

272,573

281,219

20,000

D

YOUNG CHAD CARL

PLUMB THOMAS A

BOTH BRUCE

SALEEBY II GEORGE J

..... INTERNATIONAL VICE PRESIDENT/REGION DIRECTOR

RETIRED INTERNATIONAL VICE PRESIDENT/RETAIL FOOD

RETIRED INTERNATIONAL VICE PRESIDENT

NON-DIRECTOR INT'L VICE PRESIDENT

4,440

3,661

3,661

4,440

Compensated Employees, and Inde	ependent Co	ntrac	tor	s			-, -			
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	unles	ore tl ss pe	than ersoi icer a tor/t	not one on is and trust	itee)	, a Forme	(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
		Stee	โกกรุก		ID	pensated				
BOYD KENNETH R NON-DIRECTOR INT'L VICE PRESIDENT	1 10			x				20,000	0	4,440
CHORPENNING II JOSEPH M NON-DIRECTOR INT'L VICE PRESIDENT	1 10			x				20,000	0	4,440
CONGER GREG M NON-DIRECTOR INT'L VICE PRESIDENT	1 10			x				20,000	0	4,440
CORDOVA KIM C NON-DIRECTOR INT'L VICE PRESIDENT	1 10			x				18,214	0	4,044
DERISO FRANK NON-DIRECTOR INT'L VICE PRESIDENT	1 10			x				20,000	0	4,440
DURSO JOHN NON-DIRECTOR INT'L VICE PRESIDENT	1 10			x				20,000	0	4,440

1 10

0 00 1 10

0 00 1 10

0 00

Х

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Х

20,000

15,850

15,850

20,000

EIDEN JOHN

FILATO ANTONIO

HAGGERTY MICHAEL S

HALL JR CHARLES

NON-DIRECTOR INT'L VICE PRESIDENT

NON-DIRECTOR INT'L VICE PRESIDENT

NON-DIRECTOR INT'L VICE PRESIDENT

NON-DIRECTOR INT'L VICE PRESIDENT

3,700

4,440

4,440

3,661

Compensated Employees, and Inde	pendent Co	ntrac	ctor	s		•			
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	unles	ore tl ss pe offic	(C) In (do not check than one box, erson is both an ficer and a ctor/trustee)  Former  Former  Former  Cofficer  Cofficer		( <b>D</b> ) 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	
HANLEY WAYNE E  NON-DIRECTOR INT'L VICE PRESIDENT	1 10			×			15,850	0	3,661
HOPKINS WILLIAM NON-DIRECTOR INT'L VICE PRESIDENT	1 10			×			20,000	0	4,440
ICAZA RICARDO F NON-DIRECTOR INT'L VICE PRESIDENT	1 10			×			20,000	0	4,440
KASPARIAN MICKEY NON-DIRECTOR INT'L VICE PRESIDENT	1 10			x			20,000	0	4,440
LOMAX DONALD S  NON-DIRECTOR INT'L VICE PRESIDENT	0 00			×			20,000	0	4,440
LOPRESTI GEMMA NON-DIRECTOR INT'L VICE PRESIDENT	1 10			x			19,107	0	4,242

0.00 1 10

0 00 1 10

0 00 1 10

0 00

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16,667

20,000

20,000

15,850

LOVEALL JACQUES

MCLAUGHLIN JAMES J

NICCOLLAI JOHN T

O'HALLORAN DOUG G

NON-DIRECTOR INT'L VICE PRESIDENT

NON-DIRECTOR INT'L VICE PRESIDENT

NON-DIRECTOR INT'L VICE PRESIDENT

NON-DIRECTOR INT'L VICE PRESIDENT

2,960

4,440

20,195

61,172

Compensated Employees, and Inde	pendent Co	ntrac	:tor	s					•	
(A) Name and Title	(B) A verage hours per week (list any hours for related	(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-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
POWELL RONALD E	1 10			x			\[ \]	20,000	C	4,440
NON-DIRECTOR INT'L VICE PRESIDENT	0 00	<u></u> '	ഥ′		L'	'	L'	<u> </u>	<u> </u>	<u> </u>
POWELL STEVEN M NON-DIRECTOR INT'L VICE PRESIDENT	1 10  0 00			×				20,000	0	4,440
RENNE FIORIGI NON-DIRECTOR INT'L VICE PRESIDENT	1 10			x				20,000	0	4,440
ROBINSON ROGER D NON-DIRECTOR INT'L VICE PRESIDENT	1 10			x				18,214	0	4,044
RODRIGUEZ JOHN NON-DIRECTOR INT'L VICE PRESIDENT	1 10			×				20,000	0	4,440
SAWYER PEARL	1 10			×				15,850	0	3,661

0.00 1 10

0 00 1 10

0 00 1 10

0 00

Х

Х

Х

13,333

20,000

20,000

134,786

237,587

NON-DIRECTOR INT'L VICE PRESIDENT

WHALEN RICHARD

WHILLE HARVEY L

WHITAKER JOHN A

WURM JACK C

18,491

54,821

56,021

54,527

Compensated Employees, and Inde	pendent Co	ntrac	:tor	s						
(A) Name and Title	week (list any hours officer and a for related director/trustee) (						from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the	
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
WYATT LENNIE NON-DIRECTOR INT'L VICE PRESIDENT	1 10			x				20,000	0	4,440
YOUNG IV WENDEL W NON-DIRECTOR INT'L VICE PRESIDENT	1 10			×				20,000	0	4,440
CHARETTE RICHARD O RETIRED NON-DIRECTOR INT'L VICE PRESIDENT	1 10			×				3,333	0	740
RUSSOW MARVIN D RETIRED NON-DIRECTOR INT'L VICE PRESIDENT	1 10			x				3,333	0	740
SCHMITZ DAVID C RETIRED NON-DIRECTOR INT'L VICE PRESIDENT	1 10			x				10,000	0	2,220
CLARK NICHOLAS W	40 00					X		217,130	0	56,421

0 00 40 00

0 00 40 00

0 00 40 00

0 00 40 00

0 00

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229,245

184,342

182,826

183,470

GENERAL COUNSEL

DIRECTOR OF UNION ADMINISTRATION

MERCER BETTE

RENTZ CAROL

COMPTROLLER

SULLIVAN KEVIN

DIRECTOR OF FINANCE

ASSOCIATE GENERAL COUNSEL

WISZYNSKI GEORGE

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Inde	pendent Co	ntrac	ctors	s					•	
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Pos m unles	sition ore t ss pe	(C) (do than ersoi cer (	not one n is and rust	tee)		(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
HANSEN JOSEPH T FORMER INTERNATIONAL PRESIDENT	0 00						×	386,858	0	759

Employer identification number

53-0220586

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

Department of the Treasury Internal Revenue

Name of the organization

INTERNATIONAL UNION

UNITED FOOD AND COMMERCIAL WORKERS

Political expenditures

Volunteer hours

Service

1

2

3

Part I-B

### **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.

2015
Open to Public Inspection

If the organization answered "Yes" on 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

Provide a description of the organization's direct and indirect political campaign activities in Part IV

Complete if the organization is exempt under section 501(c)(3).

Enter the amount of any excise tax incurred by the organization under section 4955

Section 527 organizations Complete Part I-A only

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

If the organization answered "Yes" on 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

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

• 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" on 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

_	Effect the amount of any	cacise tax incurred by organization i	managers under seem	UII 7 7 3 3 P	P
3	If the organization incur	red a section 4955 tax, did it file For	m 4720 for this year?		Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Pai	rt IV			
Pai	rt I-C Complete if t	he organization is exempt ui	nder section 501	(c), except section 50	01(c)(3).
1	Enter the amount direct	ly expended by the filing organization	for section 527 exem	npt function activities 🕨	\$
2	Enter the amount of the exempt function activiti	ns for section 527	\$		
3	Total exempt function e	\$			
4	Did the filing organization	on file <b>Form 1120-POL</b> for this year?			☐ Yes ☐ No
5	organization made paym amount of political conti	sses and employer identification num nents For each organization listed, er ributions received that were promptly nd or a political action committee (PA	nter the amount paid fi and directly delivered	rom the filing organization's d to a separate political org	funds Also enter the anization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
	UFCW ACTIVE BALLOT CLUB EDUCATION FUND	1775 K STREET NW WASHINGTON, DC 20006	52-1066961		295,450
2					
3					
4					
5					
5					
or	Paperwork Reduction Act No	otice, see the instructions for Form 990	or 990-EZ.	Cat No 50084S Schedule C	(Form 990 or 990-EZ) 2015

Subtract line 1g from line 1a  $\,$  If zero or less, enter -0-Subtract line 1f from line 1c If zero or less, enter -0-

10	nedule (	- (F	orm 990 or 990-E2) 2015			Page 2
P	art II-	Α	Complete if the organization is exempt under section $501(c)(3)$ and under section $501(h)$ .	file	ed Form 5768	(election
١.	Check	<b>&gt;</b>	If the filing organization belongs to an affiliated group (and list in Part IV each affiliated expenses, and share of excess lobbying expenditures)	l gro	up member's nar	ne, address, EIN
3	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	lobby	ıng)	oying expenditures to influence public opinion (grass roots			

		oying Expenditures means amounts paid or incurred.)	organization's totals	group totals
a	Total lobbying expenditures to influence public lobbying)	opinion (grass roots		•
b	Total lobbying expenditures to influence a legi	slative 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 amoun	t from the following table in both columns		
	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 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?

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 Expe	nditures During	4-Year Avera	ging Period									
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2012	<b>(b)</b> 2013	<b>(c)</b> 2014	<b>(d)</b> 2015	(e) Total							
Lobbying nontaxable amount												
Lobbying ceiling amount (150% of line 2a, column(e))												
Total lobbying expenditures												
Grassroots nontaxable amount												
Grassroots ceiling amount (150% of line 2d, column (e))												
Grassroots lobbying expenditures												
	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 2a, column(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 2d, column (e))	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 2a, column(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 2d, column (e))	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 2a, column(e))  Total lobbying expenditures  Grassroots nontaxable amount (150% of line 2d, column (e))	Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 2a, column(e))  Total lobbying expenditures  Grassroots nontaxable amount (150% of line 2d, column (e))  Grassroots lobbying expenditures	Calendar year (or fiscal year beginning in)  (a)2012 (b)2013 (c)2014 (d)2015  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 2a, column(e))  Total lobbying expenditures  Grassroots nontaxable amount (150% of line 2d, column (e))							

Return Reference

PART I-A, LINE 1

	edule C (Form 990 or 990-EZ) 2015				P	age <b>3</b>
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)).	ТОИ				
`or o		(	a)		(b)	
ctiv	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying ity	No		A mount		nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local	Yes		1		
_	legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	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?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
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?					
aı	t III-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	<b>01</b> (c	)(5),	or s	ectio	n
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		ſ	1	Yes	
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?		Ī	3		Νo
	Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."	No" C				
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	20				
a	Current year	2a				
b	Carryover from last year	2b				
С -	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				
	art IV Supplemental Information	1				
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou	n liet\	Dort II	г л ।	linos 1	
T I (	ovide the descriptions required for mart 1-A, time 1, mart 1-D, time 4, mart 1-C, time 5, mart 11-A (affiliated grou	ι <b>Ρ Π</b> 5 L),	, rail II	ι-A, Ι	mes I	anu

Explanation

UFCW SUPPORTED UFCW ACTIVE BALLOT CLUB EDUCATION FUND

2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

**SCHEDULE D** (Form 990)

Department of the

Treasury

**Supplemental Financial Statements** 

▶ Complete if the organization answered "Yes," on 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.

OMB No 1545-0047

DLN: 93493320128486

Open to Public **Inspection** 

Intern	nal Revenue Service	` '			znopection
<b>Na</b> ı UNI	me of the organization TED FOOD AND COMMERCIAL WORKERS ERNATIONAL UNION			-	oyer identification number
	rt I Organizations Maintaining Donor	r Advised Funds or C	ther Similar Fu		220586 or <b>Accounts</b>
	Complete if the organization answere			nus o	i Accounts.
		(a) Donor advised funds		(b)F	unds 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 a funds are the organization's property, subject to			or advis	ed Yes No
6	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?	benefit of the donor or don	or advisor, or for an	y other	Yes No
	rt II Conservation Easements. Comple			1 Form	990, Part IV, line 7.
1	Purpose(s) of conservation easements held by th	= '	hat apply)		
	Preservation of land for public use (e.g., recreducation)	eation or	Preservation of an	histori	cally important land area
	Protection of natural habitat				d historic structure
	Preservation of open space	·			
2	Complete lines 2a through 2d if the organization easement on the last day of the tax year	held a qualified conservati	on contribution in th	ne form	of a conservation
					Held at the End of the Year
а	Total number of conservation easements			2a	
b	Total acreage restricted by conservation easeme	ents		2b	
c	Number of conservation easements on a certified	l historic structure include	dın (a)	<b>2</b> c	
d	Number of conservation easements included in (a historic structure listed in the National Register	c) acquired after 8/17/06,	and not on a	2d	
3	Number of conservation easements modified, tra	nsferred, released, extingu	iished, or terminated	d by the	organization during the
	tax year ▶				
4	Number of states where property subject to cons	ervation easement is locat	ted <b>▶</b>	_	
5	Does the organization have a written policy regar violations, and enforcement of the conservation e		ng, inspection, hand	ling of	☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, year  •	inspecting, handling of vio	lations, and enforcin	ig cons	ervation easements during the
7	A mount of expenses incurred in monitoring, insperior \$	ecting, handling of violatio	ns, and enforcing co	nservat	tion easements during the year
8	Does each conservation easement reported on Ii (B)(i) and section $170(h)(4)(B)(ii)$ ?	ne 2(d) above satisfy the r	equirements of sect	:ion 17(	0 (h)(4)
9	In Part XIII, describe how the organization reporbalance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the orga			
Par	Complete if the organization answere	ed "Yes" on Form 990,	Part IV, line 8.		
<b>1</b> a	If the organization elected, as permitted under SI works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the foot	assets held for public exh	iibition, education, c	r resea	rch in furtherance of public
b	If the organization elected, as permitted under SI works of art, historical treasures, or other similar	•	•		

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

**▶** \$ \_\_\_

service, provide the following amounts relating to these items

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

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

Part	111	Organizations Maintaining (continued)	Collections of A	Art, Hi	stori	cal T	reasu	res, or C	Oth	er Simila	r Ass	ets	
3	_	the organization's acquisition, accetion items (check all that apply)	ession, and other rec	cords, c	heck a	any of	the follo	owing that	are	a significan	t use o	fits	
а		Public exhibition		d		Loai	n or exc	hange prog	gran	ıs			
b	Γ :	Scholarly research		e	Г	O th	er						
c		Preservation for future generations											
4	Provid Part X	de a description of the organization's (III	s collections and exp	plaın ho	w they	y furth	er the o	rganızatıor	ı's e	xempt purp	ose in		
5	asset	g the year, did the organization solic s to be sold to raise funds rather tha								milar 	Yes	∏ No	o
Par	t IV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		n Form	990,	Part	IV, line	e 9, or rep	port	ed an am	ount c	n Forr	m 990,
1a	Is the	e organization an agent, trustee, cus led on Form 990, Part X?	todian or other inter	mediary	/ for c	ontrib	utions o	r other ass	sets	_	Yes	┌ No	•
b	If"	Yes," explain the arrangement in Pa	art XIII and complet	e the fo	llowin	g table	e				A mou	nt	
c	Вед	ginning balance						1c					
d	Ado	ditions during the year						1d					
e	Dis	tributions during the year						1e					
f	End	ding balance						1f					
<b>2</b> a	Did th	ne organization include an amount oi	n Form 990, Part X,	lıne 21,	for es	crow	orcusto	dial accou	ınt lı	ability?	Yes	□ No	<b>)</b>
										·		·	_
ь	If"Ye	s," explain the arrangement in Part											
Par	t V	Endowment Funds. Comple					es" to F	orm 990,	, Pa	rt IV, line	10.		
			(a)Current year	<b>(b)</b> P	nor yea	ar	<b>b (c)</b> Two	years back	(d)	Three years b	ack (e	e)Four ye	ears back
<b>1</b> a	_	nning of year balance											
b	Conti	ributions											
c	Net II losse	nvestment earnings, gains, and											
d		ts or scholarships											
e		r expenditures for facilities irograms											
f	A dmi	nistrative expenses											
ď		of year balance											
9													
2	Provid	de the estimated percentage of the o	current year end bala	ance (lir	ne 1g,	, colun	nn (a)) h	eld as					
а	Board	designated or quasi-endowment 🕨											
ь	Perma	anent endowment ►											
с	Temn	orarily restricted endowment <b>&gt;</b>											
_		ercentages on lines 2a, 2b, and 2c	should equal 100%										
3a	A re th	nere endowment funds not in the pos	session of the organ	nızatıon	that a	are hel	ld and a	dmınıstere	d fo	r the			
	organ	ization by	_									Yes	No
	(i) un	related organizations									3a(i)		<u> </u>
		lated organizations			C-b	 					3a(ii)	1	<del>                                     </del>
ь 4		is" on 3a(ii), are the related organiza Tibe in Part XIII the intended uses o	•				· · ·		•		3b		<u></u>
	t VI	Land, Buildings, and Equip		endown	Terre ic	ilius							
Fei	CVI	Complete if the organization a		Form 9	90, F	art I	V, line	11a.See	Fori	n 990, Pa	rt X, l	ine 10	
		Description of property			ost or c	a) other ba stment)	isis Cos	(b) st or other ba (other)		Accumul (c)deprecia	ated		ok value
<b>1</b> a	and							2,387,5	501				2,387,501
b i	Buildin	gs						<u>.</u>	$\dashv$				
								19,865,9			26,826		1,239,133
c l	_easeh	nold improvements		· <u> </u>				2,954,3	388		98,179		656,209
		nent		·  _				9,692,5	505	8,0	50,315		1,642,190
<b>e</b> (	Other												

**Total.** Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

5,925,033

		(1)0	
(a) Description of security or category (including name of security)		( <b>b)</b> Book value	(c)Method of valuation Cost or end-of-year market va
L)Financial derivatives L)Closely-held equity interests			
Other			
tal. (Column (b) must equal Form 990, Part X, col (B) line 12)  art VIII Investments—Program Related.	•		
Complete if the organization answered	l 'Yes' on Form 990,	Part IV, line 11c.s	See Form 990, Part X, line 13.
(a) Description of investment		(b) Book value	(c) Method of valuation Cost or end-of-year market va
			,
otal. (Column (b) must equal Form 990. Part X. col (B) line 13 )	<b>•</b>		
art IX Other Assets. Complete if the organization		rm 990, Part IV, line	
		rm 990, Part IV, line	e 11d See Form 990, Part X, line 15  (b) Book value
art IX Other Assets. Complete if the organization		rm 990, Part IV , line	
art IX Other Assets. Complete if the organization		rm 990, Part IV, line	
art IX Other Assets. Complete if the organization		rm 990, Part IV, line	
art IX Other Assets. Complete if the organization		rm 990, Part IV, line	
art IX Other Assets. Complete if the organization		rm 990, Part IV, line	
art IX Other Assets. Complete if the organization		rm 990, Part IV, line	
art IX Other Assets. Complete if the organization		rm 990, Part IV, line	
art IX Other Assets. Complete if the organization		rm 990, Part IV, line	
art IX Other Assets. Complete if the organization		rm 990, Part IV, line	
art IX Other Assets. Complete if the organization (a) Description	ription	rm 990, Part IV, line	(b) Book value
otal. (Column (b) must equal Form 990, Part X, col (B) line in Part X  Other Assets. Complete if the organization (a) Description (a) Description (b) Description (b) Description (b) Description (b) Description (b) Description (c) Descript	ription		(b) Book value
otal. (Column (b) must equal Form 990, Part X, col (B) line 1  Part X  Other Assets. Complete if the organization (a) Description (a) Description (b) Description (b) Description (b) Description (b) Description (c) Descript	anization answered		(b) Book value
otal. (Column (b) must equal Form 990, Part X, col (B) line in Part X  Other Assets. Complete if the organization (a) Description (a) Description (b) Description (b) Description (b) Description (b) Description (b) Description (c) Descript	ription		(b) Book value
otal. (Column (b) must equal Form 990, Part X, col (B) line 2  Part X Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability	anization answered		(b) Book value
otal. (Column (b) must equal Form 990, Part X, col (B) line at Part X  Other Liabilities. Complete if the organization of liability  (a) Description of liability	anization answered		(b) Book value
tal. (Column (b) must equal Form 990, Part X, col (B) line 1  Part X Other Liabilities. Complete if the organization of liability  deral income taxes  CURITY DEPOSITS	anization answered (b) Book value		(b) Book value
tal. (Column (b) must equal Form 990, Part X, col (B) line 2  Part X Other Liabilities. Complete if the organization of liability  deral income taxes  CURITY DEPOSITS  JE TO CHARTERED BODIES	(b) Book value		(b) Book value
art IX Other Assets. Complete if the organization (a) Description (a) Description (b) Description (b) Description (c) Description (c) Description (d) Descript	(b) Book value		(b) Book value
art IX Other Assets. Complete if the organization (a) Description (a) Description (b) Description (b) Description (c) Description (c) Description (d) Descript	(b) Book value		(b) Book value
contail. (Column (b) must equal Form 990, Part X, col (B) line at the organization of the part X.  Other Liabilities. Complete if the organization of the part X.  (a) Description of liability.  Description of liability.	(b) Book value		(b) Book value
cotal. (Column (b) must equal Form 990, Part X, col (B) line at the organization of the part X.  Other Liabilities. Complete if the organization of the part X.  (a) Description of liability	(b) Book value		(b) Book value
Other Assets. Complete if the organization (a) Description of Italia (Column (b) must equal Form 990, Part X, col (B) line in Part X Other Liabilities. Complete if the organization of Italia (a) Description of Italia (b) Description of Italia (b) Description of Italia (b) Description of Italia (c) Descr	(b) Book value		(b) Book value
Other Assets. Complete if the organization (a) Description of Italia (Column (b) must equal Form 990, Part X, col (B) line in Part X Other Liabilities. Complete if the organization of Italia (a) Description of Italia (b) Description of Italia (b) Description of Italia (b) Description of Italia (c) Descr	(b) Book value		(b) Book value
Other Assets. Complete if the organization (a) Description of Liabilities. Complete if the organization of Liabilities. Complete if the organization of Liability.  Other Liabilities. Complete if the organization of Liability.  (a) Description of Liability.	(b) Book value		(b) Book value
otal. (Column (b) must equal Form 990, Part X, col (B) line in Part X  Other Liabilities. Complete if the organise See Form 990, Part X, line 25.	(b) Book value		(b) Book value

243,534,30	1		Complete if the organization answered 'Yes' on Form 990, Pa Total revenue, gains, and other support per audited financial statements.
2 10 70 0 170 0	_		Amounts included on line 1 but not on Form 990, Part VIII, line 12
		<b>2a</b> -2,529,885	, , , , , , , , , , , , , , , , , , ,
		2b	
		2c	<u> </u>
			Other (Describe in Part XIII )
		<b>2d</b> 2,867,336	
337,45	2e		Add lines <b>2a</b> through <b>2d</b>
243,196,85	3		Subtract line <b>2e</b> from line <b>1</b>
			Amounts included on Form 990, Part VIII, line 12, but not on line 1
		4a	Investment expenses not included on Form 990, Part VIII, line 7b .
		<b>4b</b> 158,589	Other (Describe in Part XIII )
158,589	4c		Add lines <b>4a</b> and <b>4b</b>
243,355,44	5	2 )	Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 13
		tements With Expenses	Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' on Form 990, Pa
		tements With Expenses art IV, line 12a.	XII Reconciliation of Expenses per Audited Financial Stat
turn.	per Re	tements With Expenses art IV, line 12a.	Reconciliation of Expenses per Audited Financial Stat Complete if the organization answered 'Yes' on Form 990, Pa
turn.	per Re	tements With Expenses art IV, line 12a.	Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' on Form 990, Pa Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25
turn.	per Re	tements With Expenses art IV, line 12a.	Reconciliation of Expenses per Audited Financial State Complete If the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities
turn.	per Re	tements With Expenses art IV, line 12a.	Reconciliation of Expenses per Audited Financial State Complete If the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities
turn.	per Re	tements With Expenses art IV, line 12a	Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' on Form 990, Par Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities
turn.	per Re	tements With Expenses art IV, line 12a.  2a 2b 2c	Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities
<b>turn.</b> 242,819,16	per Re	tements With Expenses art IV, line 12a.  2a 2b 2c	Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements
<b>turn.</b> 242,819,16	per Re	tements With Expenses art IV, line 12a.  2a 2b 2c	Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII)
<b>turn.</b> 242,819,16	per Re	tements With Expenses art IV, line 12a.  2a 2b 2c	Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII ) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:
<b>turn.</b> 242,819,16	per Re	Za         2c           2d         3,223,445	Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII )  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:  Investment expenses not included on Form 990, Part VIII, line 7b
<b>turn.</b> 242,819,16	per Re	Za         2c           2d         3,223,445	Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII ) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII )

Return Reference	Explanation
PART X, LINE 2	THE INTERNATIONAL UNION IS QUALIFIED AS A TAX-EXEMPT ORGANIZATION UNDER THE PROVISIONS OF INTERNAL REVENUE CODE SECTION 501(C)(5), THEREFORE, NOT SUBJECT TO TAX UNDER PRESENT INCOME TAX LAWS, EXCEPT THAT ANY UNRELATED BUSINESS INCOME IS SUBJECT TO FEDERAL AND DISTRICT OF COLUMBIA INCOME TAXES THERE WERE NO ACCRUED INCOME TAXES FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014 ACCOUNTING PRINCIPLES REQUIRE MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE INTERNATIONAL UNION AND RECOGNIZE A TAX LIABILITY (OR ASSET) IF THE ORGANIZATION HAS TAKEN AN UNCERTAIN TAX POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY THE INTERNAL REVENUE SERVICE MANAGEMENT HAS ANALYZED THE TAX POSITIONS TAKEN BY THE INTERNATIONAL UNION, AND HAS CONCLUDED THAT AS OF DECEMBER 31, 2015, THERE ARE NO UNCERTAIN POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY (OR ASSET) OR DISCLOSURE IN THE FINANCIAL STATEMENTS THE INTERNATIONAL UNION IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS, HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS MANAGEMENT BELIEVES THAT THE INTERNATIONAL UNION'S INCOME TAX RETURNS FOR
	THE TAX YEARS ENDED DECEMBER 31, 2012 THROUGH 2014 REMAIN SUBJECT TO EXAMINATION, BASED ON THE NORMAL STATUTORY PERIODS SUBJECT TO AUDIT, NOTWITHSTANDING ANY EVENTS OR CIRCUMSTANCES THAT MAY EXIST WHICH COULD EXPAND THE OPEN PERIOD

Schedule D (Form 990) 2015	Page <b>5</b>
Part XIII Supplemental 1	Information (continued)
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	AMOUNT OF RENTAL EXPENSES OFFSET AGAINST RENTAL INCOME -2,340,577 ADMIN REIMB FROM RELATED ORG 2,499,166
PART XII, LINE 2D - OTHER ADJUSTMENTS	AMOUNT OF RENTAL EXPENSE OFFSET AGAINST RENTAL INCOME 2,340,577 EXPENSES OF ORGANIZATION UNITED FOR RESPECT AT WALMART 70,361 EXPENSES OF UFCW BUILDING CORP 542,648 ADMIN REIMB FROM RELATED ORG -2,499,166 EXPENSES FROM RELATED ENTITIES 2,769,025
PART XII, LINE 4B - OTHER ADJUSTMENTS	LOSS ON CURRENCY EXCHANGE 4,137,664 OFFICE SPACE/FACILITY RENT 74,628

Schedule D (Form 990) 2015

efile GRAPHIC print - D	OO NOT PROCESS	As Filed Da	DLN:	N: 93493320128486		
SCHEDULE F (Form 990)	Statement of	Activities (	Outside the Uni	ted States	OMB No 1545-0047	
Department of the Treasury	► Complete		2015			
Internal Revenue Service	Information about Sched	ule F (Form 990) a	and its instructions is at v	ww.irs.gov/form990.	Open to Public Inspection	
Name of the organization UNITED FOOD AND COMME INTERNATIONAL UNION	RCIAL WORKERS			<b>Employer ident</b> 53-0220586	tification number	
	rmation on Activit e organization answe		<b>he United States.</b> orm 990, Part IV, line	e 14b.		
	the grantees' eligib		ds to substantiate the nts or assistance, and		√ Yes  No	
assistance outside the	e United States			ing the use of its gran	ts and other	
			luplicated if additional sp	,	T	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region	
(1) NORTH AMERICA (EXCLUDING U S )	4	74	PROGRAM SERVICES	LABOR ORGANIZATION ACTIVITIES - TO ORGANIZE ALL WORKERS FOR ECONOMIC, MORAL, AND SOCIAL ADVANCEMENT OF THEIR CONDITION AND STATUS	35,662,141	
( 2)						
(3)						
(4)						
(5)						
3a Sub-total b Total from continuation to Part I c Totals (add lines 3a and For Paperwork Reduction Act No	sheets (	1 74		No 50082W <b>Sched</b>	35,662,141 0 35,662,141 Jule F (Form 990) 2015	

Dort II	Grants and Other Assistance to Organizations or Entities Outside the United States.
	diants and other Assistance to organizations of Entitles outside the officed states.

Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data								
( 2)								
(3)								
(4)								
( 5)								
( 6)								
(7)								
(8)								
( 9)								
( 10)								
( 11)								
( 12)								
( 13)								
( 14)								
( 15)								
( 16)								
( 10)								
2								

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country	, recognized as
	tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	

1

Enter total number of other organizations or entities . . . . . . . . . . . . . . . . .

10

	ther Assistance duplicated if addit			ed States. Complete	if the organization a	nswered "Yes" to Form	990, Part IV, line 16.
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
( 2)							
(3)							
(4)							
( 5)							
( 6)							

(2)				
(3)				
(4)				
( 5)				
(6)				
(7)				
(8)				
(9)				
( 10)				
(11)				
( 12)				
(42)				

(4)									
( 5)									
(6)									
(7)									
(8)									
(9)									
( 10)									
( 11)									
( 12)									
( 13)									
( 14)									
( 15)									
( 16)									
( 17)									
( 18)									
	Schedule F (Form 990) 2015								

(9)								
( 10)								
(11)								
( 12)								
( 13)								
( 14)								
( 15)								
( 16)							,	
( 17)								
( 18)								
	Schedule F (Form 990) 2015							

5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)

Yes ▼ No

Old the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form

5713, do not file with Form 990)

Yes **▼** No

Page 5

method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

### 990 Schedule F, Supplemental Information

Schedule F (Form 990) 2015

Return Reference	Explanation
PART I, LINE 2	REQUESTS FOR CONTRIBUTIONS ARE EITHER INITIATED BY THE REQUESTING ORGANIZATION OR RECOMMEN DED BY THE NATIONAL PRESIDENT IN CANADA THE ORGANIZATION'S MISSION AND/OR CHARITABLE PURP OSE OF THE CONTRIBUTION ARE CONSIDERED IN THE GRANTING OF SUCH CONTRIBUTIONS THE MAJOR PR OGRAMS SUPPORTED IN NORTH AMERICA ARE REVIEWED ON AN ONGOING BASIS TO ENSURE THAT THE PROG RAMS ARE EFFECTIVE IN ORDER FOR FUNDING TO BE RENEWED AND CONTINUED THE REQUESTS FOR DONA TIONS AND SUPPORTING APPROVAL ARE MAINTAINED FOR ALL CONTRIBUTIONS THAT ARE GIVEN THE REC EVING ORGANIZATION IS NOT REQUIRED TO ACCOUNT BACK TO UFCW FOR THE CONTRIBUTIONS IT RECEIVES

#### **Additional Data**

Software ID: Software Version:

**EIN:** 53-0220586

Name: UNITED FOOD AND COMMERCIAL WORKERS

INTERNATIONAL UNION

Form 990 Schedule F Part II	<ul> <li>Grants or Er</li> </ul>	ntities Outside '	The United	States
(b) IRS code				

(a) Name of organization	section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	valuation (book, FMV, appraisal, other)
		NORTH AMERICA	GENERAL SUPPORT	5,129	CHECK			
		NORTH AMERICA	GENERAL SUPPORT	5,384	СНЕСК			
		NORTH AMERICA	GENERAL SUPPORT	9,510	CHECK			
		NORTH AMERICA	GENERAL SUPPORT	5,944	СНЕСК			

(i) Method of

(b) IRS code (i) Method of (g) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (d) Purpose of grant (c) Region non-cash cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) NORTH AMERICA GENERAL SUPPORT 6.340 CHECK NORTH AMERICA IGENERAL SUPPORT I 7.925 CHECK NORTH AMERICA GENERAL SUPPORT 31,700 CHECK

7.925 CHECK

Form 990 Schedule F Part II - Grants or Entities Outside The United States

NORTH AMERICA

GENERAL SUPPORT

(b) IRS code (I) Method of (g) A mount of non-(h) Description of (e) A mount of (f) Manner of (a) Name of section valuation (d) Purpose of grant (c) Region non-cash cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) NORTH AMERICA IGENERAL SUPPORT 16.524 CHECK NORTH AMERICA IGENERAL SUPPORT I 23.775 CHECK

7,925 CHECK

Form 990 Schedule F Part II - Grants or Entities Outside The United States

NORTH AMERICA

GENERAL SUPPORT

Schedule I
(Form 990)

Grants and C
Governments
Complete if the organization
UNITED FOOD AND COMMERCIAL WORKERS

As Filed Data Grants and C
Governments

Find ormation about Schedule

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

## Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

2015

Open to Public Inspection

Schedule I (Form 990) 2015

**DLN: 93493320128486**OMB No 1545-0047

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	Yes No
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?	'
the selection criteria used to award the grants or assistance?	'
	recipient
<b>Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for an that received more than \$5,000 Part II can be duplicated if additional space is needed	
	rpose of grant Istance
See Additional Data Table	
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	10

Cat No 50055P

Schedule I (Form 990) 2015

	recipients	cush grane	non cash assistance	Title, applaisal, ether	
(1) UFCW SCHOLARSHIP AWARDS - 2015	29	60,000	0		

					1	1
Part IV Supplem	ental Informat	ion. Provide the infor	rmation required in P	art I, line 2, Part III,	column (b), and any other	additional information.
Return Reference	Explanation	on				
PART I, LINE 2	DEPARTM	ENT HEADS THE ORGA	ANIZATION'S MISSIO	N AND/OR CHARITABL	ING ORGANIZATION OR REC .E PURPOSE OF THE CONTRI ID SUPPORTING APPROVAL	IBUTION ARE CONSIDERED IN THE

CONTRIBUTIONS THAT ARE GIVEN THE RECEIVING ORGANIZATION IS NOT REQUIRED TO ACCOUNT BACK TO UFOW FOR THE

CONTRIBUTIONS IT RECEIVES SCHOLARSHIPS ARE AWARDED TO ELIGIBLE CANDIDATES WHO ARE MEMBERS OF UFCW INTERNATIONAL UNION FOR ONE YEAR OR MORE

SCHEDULE I, PART III SCHOLARSHIPS OR TO THEIR UNMARRIED CHILDREN THE APPLICANTS MUST BE 20 YEARS OF AGE OR YOUNGER AT THE CLOSING DATE OF THE APPLICATION PROCESS THE SCHOLARSHIPS ARE AWARDED ANNUALLY FOR A FOUR YEAR PERIOD, SUBJECT TO REVIEW, SUBMISSION OF

GRADES AND MAINTENANCE OF SATISFACTORY SCHOLASTIC STANDARDS Schedule I (Form 990) 2015

Page **2** 

#### **Additional Data**

50 BROADWAY SUITE 29 NEW YORK, NY 100041696

WASHINGTON, DC 20036

AMERICA VOTES
1155 CONNECTICUT AVE

NW SUITE 600

26-4568349

Software ID: Software Version:

**EIN:** 53-0220586

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C) (4)

Name: UNITED FOOD AND COMMERCIAL WORKERS

INTERNATIONAL UNION

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant ıf applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 52-2277805 501 (C)(4) 125,000 GENERAL SUPPORT ALLIANCE FOR RETIRED AMERICANS 815 16TH STREET NW WASHINGTON, DC 200064103 20-0559291 52,000 ALIGN THE ALLIANCE FOR 501 (C)(3) GENERAL SUPPORT A GREATER NY INC

150,000

GENERAL SUPPORT

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) AMERICA'S AGENDA 20-0682634 501 (C)(4) 52,500 GENERAL SUPPORT HEALTH CARE FOR ALL 1150 CONNECTICUT

AVENUE NW 1020 WASHINGTON, DC 20036					
BALLOT INITIATIVE STRATEGY CENTER INC 1825 K STREET NW SUITE 411	04-3411708	501 (C)(4)	150,000		GENER

CHANGE

1536 U STREET NW WASHINGTON, DC 20009

RAL SUPPORT WASHINGTON, DC 20006 501 (C)(3) CENTER FOR COMMUNITY 52-0888113 50,000 GENERAL SUPPORT

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) CHICAGO FEDERATION OF 36-3977262 501 (C)(3) 10,000 GENERAL SUPPORT LABOR WORKERS' ASSISTANCE COMMITTEE 130 E RANDOLPH ST SUITE 2600 CHICAGO, IL 60601 KAISER PERMANENTE 94-3382057 501 (C)(5) 35,048 GENERAL SUPPORT LABOR MANAGEMENT PARTNERSHIP TRUST ONE KAISER PLAZA 24 LAKESIDE

OAKLAND, CA 94612

100,000

GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C) (4)

COALITION TO STOP FAST TRACK

815 16TH STREET WASHINGTON, DC 20006 47-2965424

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıc able grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) COLOROFCHANGEORG 20-4496889 501 (C) (4) 70,000 GENERAL SUPPORT 1714 FRANKLIN STREET STE 100-136 OAKLAND.CA 94612 AL SUPPORT

CONSUMER FEDERATION OF AMERICA 1620 EYE STREET NW 200 WASHINGTON, DC 20006	52-0880625	501 (C)(3)	6,500		GENERAL SUPPORT
CORNELL UNIVERSITY	22-2848738	501 (C)(3)	10,000		GENERAL SUPPORT

FOUNDATION 130 EAST SENECA STREET

ITHACA, NY 14850

SUITE 400

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) ECONOMIC POLICY 52-1368964 501 (C)(3) 62,000 GENERAL SUPPORT INSTITUTE 1333 H STREET NW SUITE 300 FAST TO WER WASHINGTON, DC 20005 FAIR FLECTIONS LEGAL 20-5087102 20,000 GENERAL SUPPORT NETWORK 1825 K STREET NW SUITE 450 WASHINGTON, DC 20006

HARKIN INSTITUTE FOR 42-0680460 501 (C)(3) 125,000 GENERAL SUPPORT PUBLIC POLICY AND CITIZEN ENGAGEMENT DRAKE UNIVERSITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2507 UNIVERSITY AVENUE

DES MOINES, IA 503114505

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) HUMAN RIGHTS CAMPAIGN 52-1243457 501 (C)(4) 6,000 GENERAL SUPPORT INC 1640 RHODE ISLAND AVENUE NW WASHINGTON, DC 200363278 RALSUPPORT

INSTITUTE FOR GLOBAL LABOUR AND HUMAN RIGHTS INC 11 STANWIX ST 5 GATEWAY CENTER PITTSBURGH,PA 15222	13-3695377	501 (C)(3)	60,000		GENERAL SUPPORT
INSTITUTE FOR POLICY	52-0788947	501 (C)(3)	15,000		GENERAL SUPPORT

STUDIES 1112 16TH STREET NW SUITE 600

WASHINGTON, DC 200364823

(a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) INTERFAITH WORKER 36-4063982 108.000 **GENERAL SUPPORT** 501 (C) (3) JUSTICE 1020 W BRYN MAWR CHICAGO, IL 606604627 JAMES R HOFFA MEMORIAL 52-2206826 501 (C)(3) 000,8 GENERAL SUPPORT SCHOLARSHIP FUND 25 LOUISANA AVENUE NW

WASHINGTON, DC 20001 10BS WITH JUSTICE 52-1865575 501 (C)(3) 26,500 **EDUCATION FUND** 

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

200054180

GENERAL SUPPORT 1325 MASSACHUSETTS AVE NW SUITE 200 WASHINGTON, DC

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) LABOR COUNCIL FOR 52-1002207 501 (C)(3) 10,000 GENERAL SUPPORT LATIN AMERICAN ADVANCEMENT 815 16TH STREET NO 3RD FLOOR WASHINGTON, DC 20006 LABOR HERTIAGE 52-1313015 501 (C)(3) 5,250 GENERAL SUPPORT FOUNDATION

815 16TH STREET NW WASHINGTON, DC 20006 LEADERSHIP CONFERENCE 52-0789800 501 (C) (4) 6,000 GENERAL SUPPORT ON CIVIL & HUMAN RIGHTS INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1629 K STREET NW 10TH FLOOR WASHINGTON, DC 20006

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) LOS ANGELES ALLIANCE 95-4459427 501 (C)(3) 10.000 GENERAL SUPPORT FOR A NEW ECONOMY 464 LUCAS AVE SUITE 202 LOS ANGELES, CA 000172074 AL SUPPORT

9001/20/4					
LUTHERN IMMIGRATION AND REFUGEE SERVICE INC	13-2574854	501 (C)(3)	10,000		GENERAL
700 LIGHT STREET					
BALTIMORE,MD 21230					

25,000

GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C)(3)

MAKE THE ROAD NEW YORK 11-3344389

92-10 ROOSEVELT AVENUE JACKSON HEIGHTS, NY

11372

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) CENTER FOR LABOR 22-2604923 501 (C)(3) 30,065 GENERAL SUPPORT EDUCATION AND RESEARCH INC 3353 WASHINGTON STREET JAMAICA PLAIN, MA 021302617 AL SUPPORT

THE MIGUEL CONTRERAS FOUNDATION 2130 JAMES M WOOD BLVD LOS ANGELES,CA 900062202	27-1149852	501 (C)(3)	30,000		GENERAL SUPPORT
NATIONAL ALLIANCE OF	34-2066826	501 (C) (3)	20,000		GENERAL SUPPORT

LATIN AMERICAN AND CARIBBEAN COMMUNITIES 1638 S BLUE ISLAND CHICAGO, IL 60608

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) NATIONAL ASSOCIATION 13-1084135 501 (C)(3) 6,000 GENERAL SUPPORT FOR THE ADVANCEMENT OF COLORED PEOPLE (NAACP) 4805 MOUNT HOPE DRIVE BALTIMORE, MD 21215 NATIONAL CONCUMENC E2 0242020 E01 (C) (2) 10 000 GENERAL SUPPORT

LEAGUE INC 1701 K STREET NW SUITE 1200 WASHINGTON,DC 20006	53-0242038	501 (C) (3)	10,000		GENERAL SUPPORT
NATIONAL COALITION ON BLACK CIVIC PARTICIPATION INC 1050 CONNECTICUT	52-1253112	501 (C)(3)	7,000		GENERAL SUPPORT

AVENUE NW 10TH

WASHINGTON, DC 20036

FLOOR

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) NEW ORLEANS WORKERS 33-1176415 501 (C)(3) 538,295 GENERAL SUPPORT CENTER FOR RACIAL JUSTICE 217 N PRIEUR STREET RAL SUPPORT

NEW ORLEANS, LA 70112					
NEW YORK IMMIGRATION COALITION INC 137-139 WEST 25TH STREET NEW YORK,NY 10001	13-3573409	501 (C)(3)	10,000		GENERA

25,000

GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C)(3)

26-1601472

THE OHIO ORGANIZING

COLLABORATIVE
25 E BOARDMAN STREET
YOUNGSTOWN, OH 44503

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) PEOPLE FOR THE 13-3065716 501 (C)(3) 10,000 GENERAL SUPPORT AMERICAN WAY 1101 15TH STREET NW SUITE 600 WASHINGTON, DC 20005 RALSUPPORT

PLANNED PARENTHOOD FOUNDATION 434 WEST 33RD STREET NEW YORK,NY 100012601	13-3772613	501 (C)(3)	10,000		GENERAL SUPPORT
PRESERVE MIDDLE CLASS	80-0734319	501 (C) (4)	50,000		GENERAL SUPPORT

AMERICA 1850 EAST DIVISION

SPRINGFIELD, MO 65803

STREET

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) PUBLIC JUSTICE CENTER 52-1412226 501 (C)(3) 10,000 GENERAL SUPPORT ONE NORTH CHARLES STREET SUITE 200 DALTIMODE MD 31301 AL SUPPORT

BALTIMORE, MD 21201					
RAINBOWPUSH COALITION 930 EAST 50TH STREET CHICAGO,IL 60615	36-4131441		5,850		GENERAL SUPPORT
RWDSU DISTRICT COUNCIL	13-1426674	501 (C)(5)	10,000		GENERAL SUPPORT

OF THE UFCW 370 SEVENTH AVENUE

NEW YORK, NY 10001

SUITE 501

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) SAMUEL DEWITT PROCTOR 06-1707903 501 (C)(3) 7,500 GENERAL SUPPORT CONFERENCE INC 4533 S LAKE PARK CHICAGO,IL 60653 RAL SUPPORT

SIXTEEN THIRTY FUND	26-4486735	501 (C) (4)	10,000		GENER.
1201 CONNECTICUT					
AVENUE NW SUITE					
300					
WASHINGTON, DC 20036					

10,000

GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C) (6)

52-2117494

UFCW MINORITY COALITION

4301 GARDEN CITY DRIVE LANDOVER, MD 20785

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) UFCW OUTREACH 46-2734109 501 (C)(5) 12,000 GENERAL SUPPORT C/O LORI RICHARDS 1775 K STREET NW WASHINGTON, DC 20006 AL SUPPORT

UFCW WOMEN'S NETWORK	38-9194001	501 (C)(5)	10,000		GENERA
425 MERRICK AVENUE 221-					
10 JAMAICA					
AVENUE					
WESTBURY,NY 11590					

11041 GARLAND ROAD DALLAS, TX 75218

UNITED LATINOS OF THE 20-2928527 501 (C)(5) 10,000 GENERAL SUPPORT

UFCW INC

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (q) Description of (h) Purpose of grant organization if applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance ALLIANCE FOR GLOBAL 52-2094677 501 (C)(3) 6,000 GENERAL SUPPORT

JUSTICE 225 F 26TH STREET TUCSON, AZ 85713

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

815 16TH STREET NW WASHINGTON, DC 20006

WORKING AMERICA 20-0263611 501 (C)(5) 60,000 GENERAL SUPPORT **Compensation Information** 

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

**Compensated Employees** ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990.

2015

OMB No 1545-0047

DLN: 93493320128486

Open to Public

Department of the

Schedule J (Form 990)

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

eas	ury ial Revenue Service				Insp	ectio	n
	me of the organization			Employer identificati	on nur	nber	
UNI	TED FOOD AND COMMERCIAL WORKERS ERNATIONAL UNION			. ,			
				53-0220586			
Pe	rt I Questions Regarding Compensation					l	
						Yes	No
La	Check the appropriate box(es) if the organization provide 990, Part VII, Section A, line 1a Complete Part III to						
	✓ First-class or charter travel		Housing allowance or residence for	-			
	✓ Travel for companions	<u> </u>	Payments for business use of pers	,	<u> </u>	i	
	▼ Tax idemnification and gross-up payments	<u> </u>	Health or social club dues or initia		İ	<u> </u>	
	Discretionary spending account	<u> </u>	Personal services (e.g., maid, cha		<u> </u>	<u> </u>	
	place country apending account	'	r ersonar services (e g , mara, ena	anear, enery	<u> </u>	<u> </u>	
b	If any of the boxes in line 1a are checked, did the organ reimbursement or provision of all of the expenses descr				1b	Yes	
2	Did the organization require substantiation prior to reim directors, trustees, officers, including the CEO/Executive		· .	•	2	Yes	
	and catalogy and catalogy and all of the catalogy and	•••	meetor, regarding the items effective	a III IIII a La	<del>-</del>	res	
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all that a used by a related organization to establish compensation	apply	Do not check any boxes for metho	ods			
	Compensation committee	Г	Written employment contract				
	Independent compensation consultant	~	Compensation survey or study				
	▼ Form 990 of other organizations	<b>~</b>	Approval by the board or compens	ation committee			
1	During the year, did any person listed on Form 990, Par or a related organization	rt VII	I, Section A, line 1a with respect to	the filing organization			
а	Receive a severance payment or change-of-control pay	/men	t?		4a		Νo
b	Participate in, or receive payment from, a supplemental	none	qualified retirement plan?		4b		Νo
C	Participate in, or receive payment from, an equity-base		· ·		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provided in the persons are provided in the persons and provided in the persons are provided in the persons and provided in the persons are provided in the person and provided in the person are provided in the person and provided in the person are provided in the person and provided in the person are provided in the person and person are provided in the person and person are provided in the person and person are provided in the person are person are person are provided in the person are pers	de th	e applicable amounts for each item	in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organization	ıs mı	ist complete lines 5-9.				
5	For persons listed on Form 990, Part VII, Section A, lir compensation contingent on the revenues of		·	any			
_	,				 		
a h	The organization?  Any related organization?				5a Eb		
b	If "Yes," on line 5a or 5b, describe in Part III				5b		
5	For persons listed on Form 990, Part VII, Section A, lir compensation contingent on the net earnings of	ne 1a	, did the organization pay or accrue	any			
а	The organization?				6a		
a b	Any related organization?				6b		
_	If "Yes," on line 6a or 6b, describe in Part III				<del> </del>		
7	For persons listed on Form 990, Part VII, Section A, lir payments not described in lines 5 and 6? If "Yes," desc			on-fixed	7		
3	Were any amounts reported on Form 990, Part VII, paid			was	<b></b>		
-	subject to the initial contract exception described in Re in Part III				8		
Ð	If "Yes" on line 8, did the organization also follow the resection 53 4958-6(c)?	ebutt	able presumption procedure describ	ed in Regulations	9		

ruge Z								
Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.								
ınstructions, on row (ii) Do not list ar	tion must be reported on Schedule J, report compensation from the only individuals that are not listed on Form 990, Part VII for each listed individual must equal the total amount of Form 990, F							
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in			

(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	( <b>D</b> ) Nontaxable	' '	(F) Compensation in
	Base	(ii)	(ıiı)	other deferred	benefits	(B)(ı)-(D)	column(B) reported
	(ı) compensation	Bonus & incentive compensation	Other reportable compensation	compensation			as deferred on prior Form 990

Schedule 1 (Form 990) 2015

See Additional Data Table

Schedule J (Form 990) 2015	Page <b>3</b>				
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 1A	CERTAIN PAYMENTS IN CONNECTION WITH HOME RELOCATION ARE GROSSED UP FOR TAX PURPOSES				

Schedule J (Form 990) 2015

### Software ID: **Software Version:**

**EIN:** 53-0220586

Name: UNITED FOOD AND COMMERCIAL WORKERS INTERNATIONAL UNION

Form 990, Schedule J, Pa	rt I	: - Officers, Direct	tors, Trustees, Ke	y Employees, and	Highest Compens	sated Employees	· · · · · · · · · · · · · · · · · · ·	Т	
(A) Name and Title			W-2 and/or 1099-MIS		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in	
		(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) O ther reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990	
1PERRONE ANTHONY	(1)	297,362	0	10,304	42,450	16,071	366,187	0	
INTERNATIONAL PRESIDENT	(11)	0	0	0	0			0	
10'NEILL PATRICK J	(1)	243,631	0	2,334	41,762	14,777	302,504	0	
INTERNATIONAL SECRETARY- TREASURER	(11)	0	0						
			0	0	Ü	0	0		
2APPELBAUM STUART H EXECUTIVE VP/PRESIDENT	(1)	0	0	0	33,300	0	33,300	0	
RWDSU	(11)	242,262	0	7,294	0	- 29,071	278,627	0	
3LOPEZ ESTHER R EXECUTIVE VICE PRESIDENT	(1)	228,492	0	7,243	41,250	14,571	291,556	0	
	(11)	0	0	0	0	- 0	- 0	0	
4MEINEMA PAUL EXEC VP/NATL PRES UFCW	(1)	179,659	0	10,118	40,991	7,400	238,168	0	
CANADA	(11)	0	0	0	0			0	
5BARCLAY WARREN S INTERNATIONAL VICE	(1)	228,492	0	95,287	41,250	17,071	382,100	0	
PRESIDENT/DIRECTO	(11)	0	0	0	0			0	
6CYPHERS FRANK	(1)	171,986	0	2,054	39,612	14,571	228,223	0	
INTERNATIONAL VICE PRESIDENT/COUNCIL	(11)	0	0	0	0	-		0	
<b>7</b> JONES MILTON L	(1)	173,191	0	4,970	37,240	15,025	230,426	0	
INTERNATIONAL VICE PRESIDENT/REGION	(11)	0	0	4,970	37,240		230,420	0	
8LAURITSEN MARK D	(1)	191,569		7.464	10.200	0	0		
INTERNATIONAL VICE PRESIDENT/DEPARTM	(11)	191,309	0  0	7,164 	40,200	17,637 	256,570 	0	
ONICE CUDICT/NE I	1,					0	0		
9NEFF CHRISTYNE L INTERNATIONAL VICE PRESIDENT/EXEC AS	(I) (II)	226,569	0	9,409	41,250	17,277	294,505	0	
			0	0	0	0	0		
10ORLANDO GEORGE J INTERNATIONAL VICE	(1)	176,569	0	5,240	39,750	14,571	236,130	0	
PRESIDENT/DISTILL	(11)	0	0	0	0	<b>-</b> 0	_ 0	0	
11 PLUMB LAWRENCE G INTERNATIONAL VICE	(1)	176,569	0	2,340	39,750	15,477	234,136	0	
PRESIDENT/REGION	(11)	0	0	0	0	- 0	_ _ 0	0	
12RAMIREZ LETICIA INTERNATIONAL VICE	(1)	173,191	0	4,651	37,240	15,123	230,205	0	
PRESIDENT/REGION	(11)	0	0	0	0			0	
13THOMSON EDWARD D INTERNATIONAL VICE	(1)	176,569	0	50,198	39,750	17,277	283,794	0	
PRESIDENT/REGION	(11)	0	0	0	0			0	
14VINCENT JR ALVIN	(1)	176,569	0	603	39,750	15,231	232,153	0	
INTERNATIONAL VICE PRESIDENT/REGION	(11)	0	0	0	0			0	
15WILLIAMSON KEVIN	(1)	228,492	0	72,871	41,250	14,741	357,354	0	
INTERNATIONAL VICE PRESIDENT/DIRECTO	(11)	0	0		0			0	
16PLUMB THOMAS A	(1)	97,962	0	174.611	11.264	0	0		
RETIRED INTERNATIONAL VICE PRESIDENT	(11)	0	0	174,611  0	11,364	3,341 	287,278	0	
17SALEEBY II GEORGE J	1,,	60.200				0	0		
RETIRED INTERNATIONAL VICE PRESIDENT	(I) (II)	60,288  0	0 	220,931	7,633	2,093	290,945	0	
18WHITAKER JOHN A	(1)	20,000	9	0	4.440	0	0		
NON-DIRECTOR INT'L VICE PRESIDENT	(1)	131,292	0	0	4,440	0	24,440	0	
ADMILIDM TACK C		131,232	0	3,494	0	- 15,755	150,541	0	
<b>19</b> WURM JACK C NON-DIRECTOR INT'L VICE PRESIDENT	(1)	0	0	0	33,300	0	33,300	0	
	(11)	232,262	0	5,325	0	27,872	<b>-</b> 265,459	0	

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation in other deferred benefits (B)(ı)-(D) column (B) (i) (ii) (iii) compensation reported as deferred Base Bonus & Other on prior Form 990 Compensation incentive reportable compensation compensation 21 CLARK NICHOLAS W 206,569 (1)10,561 40,650 15,771 273,551 GENERAL COUNSEL (11) 1MERCER BETTE (1) 55,166 174,079 13,902 4,589 247,736 DIRECTOR OF UNION ADMINISTRATION (II) 2RENTZ CAROL (1)177,003 7,339 39,750 15,071 239,163 COMPTROLLER (11) 3SULLIVAN KEVIN (1)177,067 5,759 39,750 16,271 238,847 DIRECTOR OF FINANCE [(II) **4**WISZYNSKI GEORGE (1)176,569 6,901 39,750 14,777 237,997 ASSOCIATE GENERAL COUNSEL (11) 5 HANSEN JOSEPH T 3,420 (1)383,438 759 387,617 FORMER INTERNATIONAL

PRESIDENT

(11)

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule L

(Form 990 or 990-EZ)

**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.

DLN: 93493320128486 OMB No 1545-0047

2015

Department of the Freasury		▶Information		Attach to Form 9 chedule L (Form <u>www.irs.go</u>	990 or Form 99	90-EZ.	ıctions	is at		Ope	n to P	ublic
nternal Revenue Se Name of the org UNITED FOOD AND INTERNATIONAL UI	ganization COMMERCIAL	WORKERS						nploye		ficatio	n numbe	r
		t Transactio	<b>ns</b> (sect	tion 501(c)(3), s	ection 501(c)	(4), and 501(d				only)		
				s" on Form 990,							40b	
<b>1 (a)</b> Nam	e of disqualif	ied person	(b)	Relationship bet	ween disquali	fied person an	d (4	c) Des	cription	of	(d) Cor	rected?
				0	rganization			trans	saction		Yes	No
							_					
							-					
2 Enterthe a	mount of tax	incurred by org	anızatıor • • •	n managers or dis		ons during the	•		section section			
	mount of tax	if any on line 3		, reimbursed by t								
<b>3</b> Linter the a	illoulit of tax	, ii aiiy, oii iiile 2	., above,	, reninbursed by t	ne organizacio	····		•	Ф			
				ed Persons.								
				Yes" on Form 99		line 38a, or Fo	orm 99	0, Par	t IV, lin	ie 26, d	or if the	
org	anization rep	orted an amoun	t on For	n 990, Part X, Iır	ie 5, 6, 01 22							
(a) Name of interested person	<b>(b)</b> Relation with organization	Purpose of	(d) Lo or froi organiz	m the	(e)O riginal principal amount	<b>(f)</b> Balance due	(g) In default?		(h) A pproved by board or		r	
								T	commi	1		1
			To	From			Yes	No	Yes	No	Yes	No
				+						+		
										+		
										<del> </del>		
										<del>                                     </del>		
Total	•	<b>▶</b> \$		•	•				•		•	
				Interested I								
				red "Yes" on Fo								
(a) Name of II perso		( <b>b)</b> Relationsh interested personalized	son and		t of assistance	e <b>(d)</b> Type	ofassı	stance	e ( <b>e</b> )	Purpos	se of ass	istance
		_							•			

(1) LOPEZ-BASTOS EMMANUELLE

(2) LAURITSEN THERON

(3) NEFF CHRISTYNE L

(4) PERRONE DONNA

(5) PLUMB LAWRENCE

(6) PLUMB THOMAS

(9) RUSSOW MICHAEL

(10) VINCENT JR ALVIN

Part V

No

Nο

Νo

Nο

Nο

Νo

Νo

Νo

Νo

(e) Sharina

of organization's revenues? Yes

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

SPOUSE OF WAYNE

BROTHER OF MARK

LAURITSON, VICE

SPOUSE OF ALVIN

VINCENT, JR, VICE

HANLEY, VICE

PRESIDENT

PRESIDENT

PRESIDENT

SPOUSEOF

ANTHONY M

BROTHER OF

**BROTHER OF** 

THOMAS A PLUMB, VICE PRESIDENT

BROTHER OF MARVIN

CHRISTYNE L NEFF,

VICE PRESIDENT

RUSSOW, VICE

PRESIDENT

SPOUSEOF

PERRONE, SECRETARY-TREASURER

(a) Name of Interested person	(b) Relationship between interested person and the	(c) A mount of transaction
	organization	

111,257 EMPLOYEE-SALARY AND BENEFITS

137,560 EMPLOYEE-SALARY AND

294,505 OFFICER COMPENSATION

AND BENEFITS

134,180 EMPLOYEE-SALARY AND

234,136 OFFICER COMPENSATION

AND BENEFITS

287,278 EMPLOYEE-SALARY AND

BENEFITS

232,153 OFFICER COMPENSATION

AND BENEFITS

BENEFITS

BENEFITS

(d) Description of transaction

Nο Nο

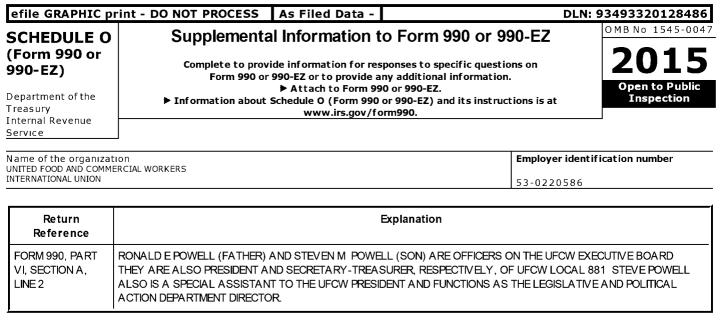
LAWRENCE C PLUMB, BENEFITS VICE PRESIDENT (7) POWELL RONALD E 24,440 OFFICER COMPENSATION FATHER OF STEVEN POWELL, VICE AND BENEFITS PRESIDENT 24,440 OFFICER COMPENSATION (8) POWELL STEVEN M SON OF RONALD POWELL, VICE AND BENEFITS PRESIDENT

137,725 EMPLOYEE-SALARY AND

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

**Supplemental Information** 

Return Reference **Explanation** 



Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	MEMBERSHIP IS IN ACCORDANCE WITH THE FOLLOWING CLASSIFICATIONS ACTIVE, AFFILIATED, ASSOCIATE, PAID-UF LIFE, NONACTIVE, GENERAL, AND HONORARY NO MEMBER CAN HOLD MORE THAN ONE CLASSIFICATION OF MEMBERSHIP AT ANY ONE TIME ONLY ACTIVE MEMBERS HAVE VOTING RIGHTS INCLUDING RIGHTS TO VOTE AND HOLD OFFICE IN THEIR RESPECTIVE LOCAL UNIONS

Return Reference	Explanation
FORM 990, PART	THE MEMBERS OF EACH LOCAL UNION ELECT DELEGATES TO THE UFCW INTERNATIONAL CONVENTION WHICH
VI, SECTION A, LINE	CONVENES EVERY FIVE YEARS THE DELEGATE APPORTIONMENT IS BASED ON THE NUMBER OF MEMBERS OF THE
7A	LOCAL UNION THE DELEGATES TO THE CONVENTION ELECT THE GOVERNING BODY OF THE ORGANIZATION, WHICH
	IS THE UFCW EXECUTIVE BOARD

Return Reference	Explanation
FORM 990, PART	THE ORGANIZATION'S CONSTITUTION IS ITS GOVERNING DOCUMENT. THE DOCUMENT DESCRIBES THOSE DECISIONS
VI, SECTION A,	THAT HAVE TO BE MADE, RATIFIED OR APPROVED BY THE DELEGATES TO THE CONVENTION BETWEEN
LINE 7B	CONVENTIONS, THE UFCW EXECUTIVE BOARD IS THE HIGHEST AUTHORITY OF THE ORGANIZATION AS PROVIDED IN
	THE CONSTITUTION THE BOARD'S RESPONSIBILITIES AS WELL AS THOSE OF THE EXECUTIVE COMMITTEE ARE SPELLED
	OUT IN THE CONSTITUTION

Return Reference	Explanation
FORM 990, PART VI,	FORM 990 IS DRAFTED THROUGH A COLLABORATIVE EFFORT OF THE ORGANIZATION'S OUTSIDE AUDIT FIRM AND
SECTION B, LINE 11	IN-HOUSE FINANCIAL AND LEGAL PROFESSIONALS THE DRAFT IS DISTRIBUTED TO THE UFCW EXECUTIVE  COMMITTEE FOR REVIEW PRIOR TO FILING THE FORM IS THEN FINALIZED AND SUBMITTED

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	PER THE ORGANIZATION'S CONSTITUTION, ANY OFFICER OR EMPLOYEE OF THE INTERNATIONAL UNION OR ANY OF ITS CHARTERED BODIES ACCEPTING ANY POLITICAL OFFICE, OR OTHER EMPLOYMENT OR POSITION, WHICH IN THE JUDGMENT OF THE INTERNATIONAL EXECUTIVE BOARD PRESENTS A CONFLICT OF INTEREST SHALL NOT BE ELIGIBLE TO SERVE AS AN OFFICER OF THE INTERNATIONAL UNION OR ANY OF ITS CHARTERED BODIES, AND ANY SUCH OFFICER OR EMPLOYEE SHALL RESIGN HIS OR HER OFFICE OR POSITION WITH THE UNION IMMEDIATELY, UPON ORDER OF THE INTERNATIONAL EXECUTIVE BOARD, UNLESS A LEAVE OF ABSENCE IS GRANTED WITH THE APPROVAL OF THE INTERNATIONAL EXECUTIVE BOARD THE ORGANIZATION ADOPTED A CODE OF CONDUCT PROMOTING THE BEST INTERESTS OF THE UNION THE ORGANIZATION WILL TAKE ALL APPROPRIATE ACTION, CONSISTENT WITH THE LAW AND THE UFCW INTERNATIONAL CONSTITUTION, IN ANY INSTANCE OF MISAPPROPRIATION OR ABUSE OF UNION FUNDS, OR OTHER FORM OF CORRUPTION AT ANY LEVEL OF THE UNION COMMENCING WITH TAX YEAR 2008, QUESTIONNAIRES ARE SENT TO OFFICERS AND FORMER OFFICERS ANNUALLY CONCERNING CONFLICTS OF INTEREST. THESE QUESTIONNAIRES ARE REVIEWED FOR ANY POTENTIAL CONFLICTS OF INTEREST AND, TO DATE, NONE HAVE BEEN REPORTED IF A CONFLICT SHOULD BE REPORTED IN THE FUTURE, THE APPROPRIATE ACTION WOULD BE TAKEN BY THE OFFICERS IN ADDITION, OUR OFFICERS AND EMPLOYEES HAVE BEEN ADVISED OF OUR WRITTEN POLICY TO AVOID CONFLICTS OF INTEREST WHICH WOULD RESULT IN THE FILING OF FORM LM-30 WITH THE U.S. DEPARTMENT OF LABOR

Return Reference	Explanation
FORM 990,	THE COMPENSATION OF THE PRESIDENT AND SECRETARY-TREASURER OF THE ORGANIZATION IS DETERMINED BY AND
PART VI,	APPROVED BY THE UFCW EXECUTIVE BOARD THE LAST CHANGES OCCURRED IN MARCH 2004 AND WERE DECREASES IN
SECTION B,	SALARY REQUESTED BY THE PRESIDENT AND SECRETARY-TREASURER WHICH WERE RATIFIED BY THE BOARD THE
LINE 15	COMPENSATION OF OFFICERS IS DETERMINED BY THE UFCW PRESIDENT, IN CONSULTATION WITH THE UFCW SECRETARY-
	TREASURER COMPARABILITY DATA IS ANALYZED AS PART OF THE PROCESS THE LAST SALARY CHANGES FOR
	OFFICERS WHO ARE IN THE PRIMARY EMPLOYMENT OF THE ORGANIZATION OCCURRED IN JANUARY 2010 AND PRIOR TO
	THAT IN JANUARY 2006 FOR THOSE OFFICERS WHO ARE PRIMARILY EMPLOYED BY THEIR RESPECTIVE LOCAL UNIONS,
	THE LAST INCREASE IN THE OFFICER STIPEND AMOUNT WAS IN 1989

Return Reference	Explanation
	THE UFCW'S ANNUAL FINANCIAL RETURN, FORM LM-2 IS FILED WITH THE DEPARTMENT OF LABOR AND IS AVAILABLE ON THEIR WEBSITE COPIES OF FORM 990 ARE ALSO AVAILABLE UNDER THE IRS PUBLIC INSPECTION PROVISIONS

Return Reference	Explanation
FORM 990, PART XI, LINE 9	TRANSFER TO UFCW ACTIVE BALLOT CLUB EDUCATION FUND -295,450

Explanation
THE ORGANIZATION'S CONSOLIDATED STATEMENTS ARE PRESENTED ON A MODIFIED CASH BASIS METHOD OF ACCOUNTING GENERALLY, REVENUE IS RECOGNIZED WHEN RECEIVED RATHER THAN EARNED AND EXPENSES ARE RECOGNIZED WHEN PAID RATHER THAN WHEN THE OBLIGATION IS INCURRED THESE INCLUDE UNREALIZED APPRECIATION (DEPRECIATION) OF INVESTMENTS, DEPRECIATION AND AMORTIZATION OF PROPERTY AND EQUIPMENT, AMORTIZATION OF DEFERRED LEASING COMMISSIONS, LIABILITIES FOR PAYROLL WITHHOLDINGS AND CERTAIN ASSETS AND LIABILITIES RESULTING FROM CASH TRANSACTIONS WITH CHARTERED BODIES THE ACCOUNTING METHOD DID NOT CHANGE FROM THE PRIOR YEAR

Return Reference	Explanation
FORM 990,	THE ORGANIZATION RECEIVED A CONSOLIDATED AUDIT THE GENERAL PROCESS OF THE CONSOLIDATED AUDIT IS THAT
PART XII, LINE	THE INTERNATIONAL EXECUTIVE BOARD EMPLOYS A CERTIFIED PUBLIC ACCOUNTANT TO PERFORM AN AUDIT OF THE
2C	FINANCIAL BOOKS AND RECORDS OF THE INTERNATIONAL UNION THE BOARD OF AUDIT REVIEWS THE REPORT OF THE
	CERTIFIED PUBLIC ACCOUNTANT RETAINED BY THE INTERNATIONAL EXECUTIVE BOARD TO AUDIT THE FINANCIAL BOOKS
	AND RECORDS OF THE INTERNATIONAL UNION THE FINANCIAL STATEMENTS OF THE CERTIFIED PUBLIC ACCOUNTANT AND
	REPORT OF THE BOARD OF AUDIT ARE THEN FURNISHED TO EACH LOCAL UNION AND EACH INTERNATIONAL OFFICER THE
1	PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493320128486
OMB No 1545-0047

Related Organizations and Unrelated Partnerships

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

Identification of Disregarded Entities Complete of the organization answered "Yes" on Form 990, Part IV, line 33.

**Employer identification number** 

53-0220586

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

INTERNATIONAL UNION

Part I

Name of the organization

UNITED FOOD AND COMMERCIAL WORKERS

(Form 990)

► Attach to Form 990.

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

(b) (d) (f) (c) (e) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one Part II or more related tax-exempt organizations during the tax year. (b) (c) (d) (e) (f) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No See Additional Data Table

Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form	990, Pa	art IV, I	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)	al Direct Predominant Share of Share of Disproprtionate Colle controlling income(related, total income end-of-year allocations? are or entity unrelated, gn excluded from	Share of	Share of total income end-of-year assets Share of total income end-of-year assets Share of total income end-of-year assets Schedul	Share of end-of-year	Share of end-of-year	of Disproprtionate year allocations?	Disproprtionate allocations? 20 c Schedule	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana parti	ral or aging	<b>(k)</b> Percentage ownership
				] 3117			Yes	No	1	Yes	No		
Part TV Identification of Polated Organizations Tayable a	<u> </u>			<u> </u>									

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(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	<b>(h)</b> Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

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

No

Yes

1a

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

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?

<b>b</b> Gift, grant, or capital contribution to related organization(s)				1D	No
<b>c</b> Gift, grant, or capital contribution from related organization(s)				<b>1</b> c	No
<b>d</b> Loans or loan guarantees to or for related organization(s)				1d	No
e Loans or loan guarantees by related organization(s)				1e	No
f Dividends from related organization(s)				1f	No
g Sale of assets to related organization(s)				1g	No
h Purchase of assets from related organization(s)				1h	No
i Exchange of assets with related organization(s)				1i	No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j	No
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)				1k	No
Performance of services or membership or fundraising solicitations for related organization(s)				11	No
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s) .				1m	No
$oldsymbol{n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n Ye	is .
o Sharing of paid employees with related organization(s)				1o Ye	!s
p Reimbursement paid to related organization(s) for expenses				1p Ye	es
<b>q</b> Reimbursement paid by related organization(s) for expenses				1q	No
r Other transfer of cash or property to related organization(s)				1r	No
$oldsymbol{s}$ Other transfer of cash or property from related organization(s)				<b>1</b> s	No
2 If the answer to any of the above is "Yes," see the instructions for information on who must comp	olete this line, including o	overed relationships	and transaction threshold	ıs	
(a) Name of related organization	( <b>b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining	amount invol	ved
1)UNITED FOOD AND COMMERCIAL WORKERS BUILDING CORPORATION	N	96,213			
2)RWDSU DISTRICT COUNCIL OF THE UFCW	0	14,554,720			
3)INTERNATIONAL CHEMICAL WORKERS UNION COUNCIL OF THE UFCW (ICWUC)	Р	1,542,456			
	i i	1			

#### 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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
<b>(a)</b> Name, address, and EIN of entity	( <b>b)</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) (g) Share of Share of	end-of-year	(h) Dispropitionate allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1 I	
													<u> </u>



Software ID: **Software Version:** 

**EIN:** 53-0220586

Name: UNITED FOOD AND COMMERCIAL WORKERS INTERNATIONAL UNION

Form 990, Schedule R, Part II - Identification of Rela	ted Tax-Exempt Organ	izations					
<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
UNITED FOOD AND COMMERCIAL WORKERS PENSION PLAN FOR EMPLOYEES 1775 K STREET NW WASHINGTON, DC 20006 81-2741678	PENSION PLAN	DC	401(A)		N/A	Yes	No No
UFCW PENSION PLAN FOR CANADIAN EMPLOYEES 300-61 INTERNATIONAL BLVD REXDALE,ONTARIO M9W 6K4 CA	CANADIAN PENSION PLAN	CA			N/A		No
UFCW BUILDING CORPORATION 1775 K STREET NW WASHINGTON, DC 20006 34-1023202	BUILDING CORP	DC	501(C)(2)		N/A		No
PATRICK E GORMAN SCHOLARSHIP FUND 1775 K STREET NW WASHINGTON, DC 20006 52-1289741	SCHOLARSHIP FUND	DC	501(C)(3)		N/A		No
UFCW SAVINGS AND RETIREMENT PLAN FOR US OFFICERS & EMPLOYEES 1775 K STREET NW WASHINGTON, DC 20006 52-1384948	401K PLAN	DC	401(K)		N/A		No
UFCW SAVINGS AND RETIREMENT PLAN CHARTERED LOCAL BODIES 1775 K STREET NW WASHINGTON, DC 20006 53-0220586	401K PLAN	DC	401(K)		N/A		No
UFCW ACTIVE BALLOT CLUB-GENERAL FUND 1775 K STREET NW WASHINGTON, DC 20006 52-1064551	SEPARATE SEGREGATED FUND	DC	527		N/A		No
UFCW WORKING FAMILIES ADVOCACY PROJECT 1775 K STREET NW WASHINGTON, DC 20006 27-2711274	SEPARATE SEGREGATED FUND	DC	527		N/A		No
UFCW ACTIVE BALLOT CLUB-EDUCATIONPOLITICAL FUND 1775 K STREET NW WASHINGTON, DC 20006 52-1066961	SEPARATE SEGREGATED FUND	DC	527		N/A		No
UFCW PHCBTD SICK BENEFIT PLAN 1775 K STREET NW WASHINGTON, DC 20006 52-1246412	BENEFIT PLAN	DC	501(C)(9)		N/A		No
UFCW MEMBER VOLUNTARY BENEFIT FUND 1775 K STREET NW WASHINGTON, DC 20006 45-2293755	VOLUNTARY BENEFIT PLAN	DC	501(C)(9)		N/A		No
INT'L CHEMICAL WORKERS UNION COUNCIL OF THE UFCW (ICWUC) 1655 W MARKET ST 6TH FL AKRON, OH 44313 34-0644259	LABOR UNION	ОН	501(C)(5)		N/A		No
RWDSU DISTRICT COUNCIL OF THE UFCW 370 SEVENTH AVENUE SUITE 501 NEW YORK, NY 10001 13-1426674	LABOR UNION	NY	501(C)(5)		N/A		No
UFCW LOCAL UNION 1208 14400 HIGHWAY 87 WEST TAR HEEL, NC 28392 80-0356571	LABOR UNION	NC	501(C)(5)		N/A		No