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Form 990

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Α	For the	2015 calend	dar year, or tax year beginning , 2015, and endin	g			,	
В	Check if a	applicable.	C		D Employ	yer ident	ification number	
	Address change International Longshoremen's Assoc 3000						687	
	Nam	ne change	P.O. Box 52766	t	E Telephone number			
	$\boldsymbol{\vdash}$	al return	New Orleans, LA 70152		(50	4) 8	97-6203	
	\vdash	return/terminated	·	<u>}</u>	(30	1) 0	51 0205	
	\vdash	ended return			G Gross r	occupte	\$ 690,415.	
	\vdash	lication pending	F Name and address of principal officer	H(a) Is this a				
		ilcation pending	, ,	• •	-		<u> </u>	
	Tay av	empt status	Same As C Above 501(c)(3) X 501(c) (5) 1 (Insert no.) 4947(a)(1) or 527	H(b) Are all s	ittach a list	(see ins	structions)	
÷							0212	
K		site: ► N/		H(c) Group e				
				on. 1980	101 8	State of I	egal domicile LA	
P	1 1 B	Summar	ne the organization's mission or most significant activities. The		<u> </u>	. 1		
0	' \	roaroati	be the organization's mission or most significant activities. To promote an and give a programs in the interest	re uegi	rru- w	erra	re, pension,	
. ★ ★ ∠UID Governance	-		on and civic programs in the interest of its manage in any business pursuit that will redown					
, t ETTa) -		tion, and to promote the best interests of the			EULL.	-01-cne	
, ye	2 0		x If the organization discontinued its operations or disposed of mo			net as	sets	
ق ر	3 N		ting members of the governing body (Part VI, line 1a)	,		1 3 1	9	
ൃ∞		lumber of ind	dependent voting members of the governing body (Part VI, line 1b).			4	0	
	5 T		of individuals employed in calendar year 2015 (Part V, line 2a)			5	5	
} .≧	6 T		of volunteers (estimate if necessary)			6	0	
źĕ			d business revenue from Part VIII, column (C), line 12			7a	0.	
<u>z_</u>	b N	let unrelated	business taxable income from Form 990-T, line 34			7b	0.	
Revenue Activil				Pr	ior Year		Current Year	
സ്ട്	1		and grants (Part VIII, line 1h)	ļ				
e F	1	_	ce revenue (Part VIII, line 2g)	ļ	440,0		539,076.	
ě			come (Part VIII, column (A), lines 3, 4, and 7d)	ļ		356.	5,598.	
ш.	1		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		128,5		145,741.	
			milar amounts paid (Part IX, column (A), lines 1-3)		575,3	94.	690,415.	
	J		to or for members (Part IX, column (A), line 4)	 				
		-			070 0	246 022		
S	15 S		r compensation, employee benefits (Part IX, column (A), lines 5-10)	273,042.		42.	346,233.	
Expenses	16a P		undraising fees (Part IX, column (A), line 11e)					
×	ь То	otal fundrais	ng expenses (Part IX, column (D), line 25) ▶	',				
ш) 17 0	-	es (Part IX, column (A), lines 11a-11d, 11f-24e)	L	261,9	62.	308,992.	
	18 To	otal expense	s. Add lines 13-17 (must equal Part IX, column (A), line 25)		535,0	04.	655,225.	
_		evenue less	expenses Subtract line 18 from line 12.		40,3	90.	35,190.	
õĝ			RECEIVED	Beginning	of Curren	t Year	End of Year	
Not Assets Fund Baland	20 To	otal assets (i	Part X, line 16)		193,7		2,073,046.	
A A	21 To	otal liabilities	(Part X, line 26)		837,7	60.	681,895.	
žĮ	22 N	et assets or	fund balances Subtract line 21 from the 20 NOV 22 2016	1.	355,9	61.	1,391,151.	
Pa		Signature				<u> </u>		
Unde	r penalties	s of perjury, I dec	lare that I have examined this return, including accompanying schedules and statements, and to ter (other than officer) is based on all information of princh preparer has any knowledge	the best of my	knowledge	and beli	ef, it is true, correct, and	
com	plete Decla	aration of prepar	er (other than officer) is based on all information of which preparer has any knowledge					
			Farsto Hannel		Ti In	0 IL)	
Sig	ุก	Signatur	e of officer	Date				
Here CHRISTOPHER HAMMOND Secretary/Treasure							sure	
			orint name and title					
		Print/Type pr	eparer's name Fletter 19 Date		Check	if I	PTIN	
Pai	id	HUGH J	POSNER, CPA HUGH J, POSNER, CPA	16 15	elf employe		P00037476	
	parer	Firm's name	The Posner Accounting Firm, L.L.C.	-				
	e Only			_F	ırm's EIN ▶	72-	1288247	
	•		Metairie, LA 70002	Phone no (504) 837-2200				
May	the IRS	S discuss the	s return with the preparer shown above? (see instructions) .			1001	X Yes No	
=			The state of the s	<u> </u>			Court 000 (2015)	

	90 (2015) International Long		72-0	885687	Page 2
Part I		•			
		ponse or note to any line in this Part III	 _	 	X
	riefly describe the organization's mission	:			
<u>S</u>	<u>ee_Schedule_O</u>				
_					
-					
2 D	id the organization undertake any significant	program services during the year which were not listed on t	he prior		
	orm 990 or 990-EZ?	· -	ine prior	Yes	X No
	'Yes,' describe these new services on So	•		U	<u>ri</u>
	-	make significant changes in how it conducts, any progra	am services?	. Yes	X No
ì f	'Yes,' describe these changes on Schedu	ule O.		ليا	
S	escribe the organization's program servic ection 501(c)(3) and 501(c)(4) organization nd revenue, if any, for each program serv	e accomplishments for each of its three largest progran ons are required to report the amount of grants and allo rice reported.	n services, as n cations to other	neasured by ors, the total e	expenses. xpenses,
4a (0	Code:) (Expenses \$	including grants of \$) (Payanya	è	
	SEE ANSWER TO PART III - 1		_) (Revenue	Ÿ 	
5	EE ANSWER TO FART TIT	I ABOVE			
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4 b (C	Code:) (Expenses \$	including grants of \$	_) (Revenue	\$)
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4 1 01	has program on the Color	lulo O X			
	her program services (Describe in Sched	iule O) cluding grants of \$)(Revenue			`
	xpenses \$ inc	0.	- Y		/
BAA	tar program service expenses	TEEA0102L 10/12/15		Form	990 (2015)

			Yes	МО
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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3	_	Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
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		Х
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		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
	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.	11 b		Х
	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		X
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X.	11 f		X
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		X
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E .	13		<u>X</u>
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV.	15		_X_
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		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		_X_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X

Part IV Checklist of Required Schedules (continued) Yes No Χ 20a Did the organization operate one or more hospital facilities? If 'Yes', complete Schedule H 20a b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 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. Χ 21 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 Х 22 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 . . Х 23 Χ 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I... 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part 1.. 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes', complete Schedule L, Part II. 26 X Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If 'Yes,' complete Schedule L, Part III*. Χ 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions). Χ a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV. 28a **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Χ Schedule L, Part IV . 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV. Х 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes.' complete Schedule M. X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M X 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Χ Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 33 Х Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line $1 \ldots \ldots \ldots$ Х 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 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 Х 37

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Form 990 (2015)

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Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197

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

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V. Yes No 1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1 a 8 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? Х 1 c 2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2 b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? Х 3 a b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O 3 b 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)?. 4 a b If 'Yes,' enter the name of the foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts, (FBAR) Х 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . 5 a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5 c 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? Х 6 a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? ... 6 b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 a b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7 c d If 'Yes,' indicate the number of Forms 8282 filed during the year . . . e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . 7 f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?. 7 q h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966?. 9 a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Ь 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10 a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them). 11 b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a b if 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? 13aNote. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13 c c Enter the amount of reserves on hand Χ 14a Did the organization receive any payments for indoor tanning services during the tax year? 14 a b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule Q. 14 h

Section A. Governing Body and Management

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

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

bif Yes,' did the organization have local chapters, branches, or affiliates?				Yes	No
2 Did any officer, director, trustees, or key employee have a family relationship or a business relationship with any other officer, director, furstees, or key employees. 3 Did the organization delegate control over management dues customarily parformed by or under the direct supervision of officers, directors, or throates, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filled? 5 Did the organization have members or stockholders? 6 Did the organization have members or stockholders? 7 Did by the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 8 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 9 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 9 To be a fine priority of the process of the organization reserved to for subject to approval by) members, stockholders, or persons other than the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization have local chaptors, branches, or affiliates? 9 Is the eraphorical organization have local chaptors, branches, or affiliates? 10a Did the organization have local chaptors, branches, or affiliates? 10b Did by the organization have local chaptors, branches, or affiliates? 10a Did the organization have local chaptors, branches, or affiliates? 10b Did by the organization have a written office or interest policy? If No. go	1 :	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad		·	
officer, director, trustee, or key employee? 2	ı	b Enter the number of voting members included in line 1a, above, who are independent 1b			1
of officers, directors, or trustees, or key employees to a management company or other person? 3	2		2	-	Х
since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 5 A and the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 5 A and the organization contemporaneously document the meetings held or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 Did the organization thereoff the organization of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII. Section A, who cannot be reached at the organization's mainting address? If Yes, 'provide the names and addresses in Schedule O 6 Section B, Policies (This Section B requests information about policies not required by the Internal Revenue C Yes 10 Did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 A biff yes, 'did the organization have a written conflict of interest policy? If No,' go to line 13 11 A list the organization have a written conflict of interest policy? If No,' go to line 13 12 Did the organization have a written whistleblower policy? 13 Did the organization have a written whistleblower policy? 14 Did the process for determining compensation of the following persons include a review and appro	3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		х
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 5 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8 Did the organization authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's manling address? If "Yes," provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue C Yes 10 a Did the organization have written policies and procedures governing the activates of such chapters, affiliates, and branches to ensure their operations are consistent with the organization are organization and the organization are a written conflict of interest policy? If "No; to to fine 13 b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 12a bit the organization have a written on this consistent with the organization have a written on this of the stop of the process of determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 12b Did the organization have a written on the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15b A the organization have a written object of the organization of the delib	4		4		Х
6 Dit the organization have members or stockholders? 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 5 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8 Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailting address? If Yes, provide the names and addresses in Schedule O 8 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue C 10 a Did the organization have local chapters, branches, or affiliates? 11 a Bis the organization have written policies and procedures operaning the activities of such chapters, alfiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11 a Is als the organization have written policies and procedures operaning the activities of such chapters, alfiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11 a Is als the organization provided a complete copy of this Form 950 to all members of its governing body before filing the form? 12 b Exercise in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 12 a Did the organization have a written conflict of interest policy? If Yo, 'go to line 13 13 b Were officers, directors, or fusiless, and key employees required to disclose annually interests that could give rise to conflicts? 14 Did the organization have a written officer of the following persons include a review and approval by independent persons, comparability data, an	5	·			X
7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	_				X
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

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

		(C)								
(A) Name and Title	(B) Average hours per	thar	n one s both	box, an c ector	unles officer trusti		son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) RAPHAEL CASSIMERE	2.3									
Recording Sec	0			Х				3,648.	0.	0.
(2) KENNETH CRIER	40					Ι.				
President	0			X				3,794.	0.	0.
(3) LEONARD HARVEY	2.9								_	_
GRAND MARSHALL	0	-		X				4,970.	0.	0.
(4) DAVID MAGEE	40									
President (7) CUPTOTOPHER HANGEN	0	 	\vdash	X				94,848.	0.	26,422.
(5) CHRISTOPHER HAMMOND	8	1		,,		} }		10.000		1 005
FIN SEC/TREA	0			Х				18,988.	0.	1,887.
(6) GLENN DAVIS	_ 40			v))		70 244		06 400
Vice President (7) BRENSTON TRUDEAU	2.3	\vdash		X			-	79,344.	0.	26,422.
FINANCE COMMITT	0			v				2 720	۱ ،	0
(8) ROBERT BAUMAN	40			X		 - 		3,739.	0.	0.
Vice President	- 40 -			х				2 474	,	0
(9) AUNDRE JORDAN	3.2			쉬	-			3,474.	0.	0.
CHAPLAIN	0			$_{\rm X}$		[[ł	2,936.	0.	0.
(10) VERNON HEBERT	2.9	-	-	^				2,930.	<u>-</u>	
FINANCE COMMITT			. {	X			- {	2,736.	0.	0.
(11) HARRY SIMS JR	2.9	-	_	^			-	2,130.	<u>_</u>	
FINANCE COMMITT	0			х		1	ľ	3,648.	0.	0.
(12)			7	•				3,010.		<u></u>
(13)			1	1						
(14)			1							
										

Tart VII Section A. Officers, Directors, Tre	131663,	Ney	ᆜ	ihi	uye	es,	all	u nignest con	ipensated Emp	loyees	> (conti	nuea)
(A) Name and title	Average hours per	box	, unle	(C) Position check more than one less person is both a and a director/trustee			ih an stee)	Reportable	(E) Reportable compensation from	amo	(F) stimated unt of otl	her
	week (list any hours for related organiza - tions below dolled line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099 MISC)	related organizations (W-2/1099-MISC)	org an	npensation the ganization d related anization	n d
·	} """		Ō		1	6	1			ł		
(15)										•		
(16)			-								- <u>-</u> -	
(17)												
(18)					-		-					
(19)					-		-					
(20)							-		 			
(21)					-							
(22)							-					
(23)			1		_					-		
(24)												
(25)			1									
1 b Sub-total		اا	1	- 1	<u> </u>		•	222,125.	0.	 	54,7	31.
c Total from continuation sheets to Part VII, Section	on A .						•	0.	0.			0.
	<u> </u>					• • • _	>	222,125.	0.		54,7	31.
2 Total number of individuals (including but not limited from the organization ► 0	to those Ii	sted a	abov	/e) w	vho i	ecei	ved	more than \$100,00	0 of reportable comp	ensation	1	
from the organization 0											Yes	No
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for such	or, or trus	stee, a/	key	em	ploy	ee, o		ighest compensat	ed employee	3	103	X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate	reportabl	e cor	npei	nsat If 'Y	tion 'es'	and comp	oth	er compensation t	rom			
such individual 5 Did any person listed on line 1a receive or accrue	 e compen	satıor	n fro	om a	anv	unrel	late	 d organization or	ındıvıdual	4		<u>X</u>
for services rendered to the organization? If 'Yes	,' complet	e Sc	hedi	ule .	J foi	suc	h p	erson	·····	5		<u> X</u>
Section B. Independent Contractors 1 Complete this table for your five highest compens	sated inde	penc	lent	cor	ntrac	tors	tha	t received more th	an \$100,000 of			
compensation from the organization. Report compens	ation for t	he ca	lend	lar y	ear	endır	ng w	uth or within the org	janization's tax year			
(A) Name and business addr	ess							(B) Description o	f services	Compe	s) nsatioi	n
2 Total number of independent contractors (including bi		ed to	thos	se li:	sted	abov	/e) v	who received more	than			
\$100,000 of compensation from the organization	<u>`</u>		00:	10						C	000 4	2015
BAA	7	EEA01	USL	10/12	2/15					Form !	୭ ∀U (2	∠ ∪15)

	Check if Schedule O contains a response or note to an	y line in this Part \	/111		
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns 1 a b Membership dues. 1 b c Fundraising events. 1 c d Related organizations. 1 d e Government grants (contributions) 1 e				
Contribution and Other					
Program Service Revenue	Business Code 2a Membership Dues & Assessments b c	539,076.	539,076.		
Program Se	f All other program service revenue . g Total. Add lines 2a-2f	539,076.			
	 Investment income (including dividends, interest and other similar amounts)	5,598.			5,598.
	(i) Real (ii) Personal 6 a Gross rents . 145,741				
	d Net rental income or (loss)	145,741.	145,741.		
	and sales expenses c Gain or (loss) d Net gain or (loss)		-		
Other Revenue	8 a Gross income from fundraising events (not including \$				
0	9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b			-	
	c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances				
	c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b				
	d All other revenue . e Total. Add lines 11a-11d				
	12 Total revenue. See instructions	690,415.	684,817.	0.	5,598.

	TIA / Statement of Functional Expen				
Sec	tion 501(c)(3) and 501(c)(4) organizations must con	mplete all columns All of	her organizations must co	omplete column (A).	
	Check if Schedule O contains a			·	
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 5	Benefits paid to or for members. Compensation of current officers, directors, trustees, and key employees	200,148.	200,148.	12,357.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.1	0.1	0.	0.
7	Other salaries and wages	32,160.	32,160.		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	95,077.	95,077.		
9	Other employee benefits .				· · · · · · · · · · · · · · · · · · ·
10	Payroll taxes	18,848.	18,848.		
11	Fees for services (non-employees):	10,040.	10,040.		
	Management			}	
	Legal	57,279.	57,279.		
	: Accounting	31,213.	31,213.		
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other (If line 11g amount exceeds 10% of line 25, column		··		
9	(A) amount, list line 11g expenses on Schedule ()				
12	Advertising and promotion	7,150.	7,150.		
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	15,591.	15,591.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings .				
20	Interest	48,532.	48,532.		· · · · · · · · · · · · · · · · · · ·
	Payments to affiliates				
22 23	Depreciation, depletion, and amortization . Insurance	23,534.	23,534.		
	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.).				
	insurance	44,615.	44,615.		
þ	committee fees	29,870.	29,870.		
	office expense	23,147.	23,147.		
	utilities	17,511.	17,511.		
	All other expenses .	41,763.	41,763.		
	Total functional expenses. Add lines 1 through 24e	655,225.	655,225.	12,357.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) End of year (A) Beginning of year Cash - non-interest-bearing . 111.438 1 19,714. Savings and temporary cash investments 273,682 2 330,763. 3 Pledges and grants receivable, net 3 Δ Accounts receivable, net 45,391 4 9,415. 4 3 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net . . 7 8 Inventories for sale or use. . 8 9 Prepaid expenses and deferred charges 9 58,667 29,161. 10a ,780,509 10b **b** Less: accumulated depreciation. . . 103,596 1,700,477 10 c 676,913. 11 Investments - publicly traded securities. 11 12 Investments - other securities. See Part IV, line 11... 12 13 Investments - program-related, See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 4,066 15 7,080. 16 Total assets, Add lines 1 through 15 (must equal line 34) 2,193,721 16 2,073,046. 17 Accounts payable and accrued expenses 82,028 17 90,778. Grants payable 18 18 Deferred revenue.. 19 19 20 Tax-exempt bond liabilities . 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 755,732 591.117. Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 25 26 Total liabilities. Add lines 17 through 25 26 837,760 681,895. Organizations that follow SFAS 117 (ASC 958), check here > X and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets ... 355,961 27 391,151. Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances . 33 1,355,961 1,391,151. 34 Total liabilities and net assets/fund balances . . . 2,193,721 34 2,073,046. BAA Form 990 (2015)

TEEA0111L 10/12/15

LOIL	1990 (2015) International Longshoremen S Assoc 3000	/Z-U	885687			age 12
Pa	t:XI.: Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI.					
1	Total revenue (must equal Part VIII, column (A), line 12)		1	6	90,	415.
2	Total expenses (must equal Part IX, column (A), line 25)	ſ	2	6	55,	225.
3	Revenue less expenses Subtract line 2 from line 1	. [3			190.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	Ţ	4			961.
5	Net unrealized gains (losses) on investments	Γ	5			
6	Donated services and use of facilities	Γ	6			
7	Investment expenses	. [7			
8	Prior period adjustments.		8			
9	Other changes in net assets or fund balances (explain in Schedule O)		9			<u>0</u> .
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	ſ				
<u> </u>	column (B)).		10	1,3	91,	<u> 151.</u>
Pai	t'XII' Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain]]		
	in Schedule O.			} {		
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or rev	iewec	l on a	[]		ļ
	separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis					ļ
_					.,	
t	Were the organization's financial statements audited by an independent accountant?	•		2 b	X	ļ
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a se basis, consolidated basis, or both:	parat	9			
	X Separate basis Consolidated basis Both consolidated and separate basis]
,	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a	udit		1 1		
`	review, or compilation of its financial statements and selection of an independent accountant?	iuuit,		2 c		Х
	If the organization changed either its oversight process or selection process during the tax year, explain			-		
_	In Schedule O			L		l
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing Audit Act and OMB Circular A-133?	jle		3 a		Х
Ł	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required	audıt				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3 Ь		<u></u>
BAA				Form	990	(2015)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(6)

► 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.

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. Section 527 organizations: Complete Part I-A only 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 Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete If the organization answered 'Yes,' on Form 990, Part IV, line 5 (Proxy Tax) (see instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see instructions), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III Name of organization Employer identification number International Longshoremen's Assoc 3000 72-0885687 Part I-As Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political expenditures 3 Volunteer hours Rant I-B | Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No 4a Was a correction made? b If 'Yes,' describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities, Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-(b) Address (d) Amount paid from filing organization's funds If none, enter-0-(a) Name (c) EIN (1)(2)(3)(4)(5)

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

Schedule C (Form 990 or 990-EZ) 2015

Schedule C (Fòrm 990 or 990-EZ) 20	⁰¹⁵ Internation	al Longshoremen'	s Assoc 3000	72-088	35687 Page 2			
Part II-A Complete it section 501	f the organizatio	n is exempt under se	ction 501(c)(3) a	nd filed Form 5768 (election under			
A Check ► ☐ if the file	ing organization belon	gs to an affiliated group (and	l list in Part IV each af	filiated group member's nar	me,			
address	s, EIN, expenses, an	d share of excess lobbying	expenditures)					
B Check ► I if the file	ling organization che	cked box A and 'limited co	entrol' provisions appl	ly				
(The term	Limits on Lobby m 'expenditures' me	ving Expenditures ans amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals			
. 1 a Total lobbying expendi	itures to influence pu	iblic opinion (grass roots lo	obbying)					
		legislative body (direct lobl						
c Total lobbyıng expendi	itures (add lines 1a a	ind 1b)						
d Other exempt purpose	expenditures .	• •						
e Total exempt purpose	expenditures (add lii	nes 1c and 1d)						
f Lobbying nontaxable a both columns	mount. Enter the an	nount from the following ta	ble ın					
If the amount on line 1e, co	olumn (a) or (b) is:	The lobbying nontaxable	amount is:	,	,			
Not over \$500,000			-					
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.	1, - ,				
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								
g Grassroots nontaxable amount (enter 25% of line 1f)								
h Subtract line 1g from li	ine 1a If zero or les	s, enter -0-						
i Subtract line 1f from lii	ne 1c If zero or less	, enter -0						
j If there is an amount oth section 4911 tax for thi	ner than zero on either is year?	line 1h or line 1i, did the org	ganization file Form 47:	20 reporting	. Yes No			
(Son	ne organizations tha	4-Year Averaging Period I t made a section 501(h) el s below. See the instructi	ection do not have to	o complete all of the five				
	Lobb	ying Expenditures During	4-Year Averaging Pe	eriod				
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total			
2 a Lobbying nontaxable amount .								
b Lobbying ceiling amount (150% of line 2a, column (e))								
c Total lobbying expenditures .								
d Grassroots nontaxable amount.								
e Grassroots ceiling amount (150% of line 2d, column (e))			, <u>.</u>	,				
f Grassroots lobbying expenditures								
BAA				Schedule C (For	m 990 or 990-EZ) 2015			

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

	(a	3)	(b)		
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Amount		
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			15		
c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?.			-		
j Total. Add lines 1c through 1i		-			
2 a 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?		- 1	,		
Rart III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	. or			
section 501(c)(6).	(-)(-)	,			
•			Yes No		
1 Were substantially all (90% or more) dues received nondeductible by members?			1 X		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? .			2 X		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			3 X		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	or s	ection 501(c)		
(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) answered 'Yes.'	Part I	ΊΙ-Α,	line 3, is		
1 Dues, assessments and similar amounts from members		1	539,076.		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		- '			
a Current year		2 a			
b Carryover from last year		2b			
c Total		2 c			
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	0.		
5 Taxable amount of lobbying and political expenditures (see instructions)	. 1	5	0.		
Part IV: Supplemental Information					
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou	p list).	Part i	II-A. lines 1 and		

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

SCHEDULE D (Form 990)

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.

Solution School and its instructions is at www.irs.

OMB No. 1545 0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

International Longshoremen's Assoc 3000 72-0885687 Part 12 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements ... 2 a **b** Total acreage restricted by conservation easements . . . 2 b c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8. 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 ▶\$ b Assets included in Form 990, Part X

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Part III Organizations Mainta	ining Colle	ections	of Art, Hist	orica	Treasures, o	or Oth	er Similar Asse	ets (conti	inued)
 Using the organization's acquisition items (check all that apply): a Public exhibition 	n, accession, a	and other			he following that hange programs		gnificant use of its o	ollection	
b Scholarly research			e Othe		3 7 7 3				
c Preservation for future gener	rations				·· ··· <u> </u>				-
4 Provide a description of the organia Part XIII.		tions and	explain how the	y furthe	er the organization	n's exem	ipt purpose in		
5 During the year, did the organiza to be sold to raise funds rather t	ation solicit oi han to be ma	r receive iintained	donations of a as part of the	rt, hist organiz	orical treasures, zation's collectio	or othe	r sımılar assets	Yes	∏ No.
Part IV Escrow and Custodia line 9, or reported an	I Arrange r amount or	nents. Form	Complete if 990, Part X	the o , line	rganization a 21.	nswer	ed 'Yes' on For	m 990, F	Part IV,
1 a is the organization an agent, true on Form 990, Part X?	stee, custodia	an or oth	er intermediary	for co	ntributions or ot	ther ass	ets not included	Yes	No
b If 'Yes,' explain the arrangement	t in Part XIII a	and com	plete the follow	ing tat	ole.		· ·	_	لحبحا
							,	Amount	
c Beginning balance			•		•		1 c		
d Additions during the year							1 d		· · · · · ·
e Distributions during the year	•						1 e		
f Ending balance						<u> </u>	1 f		
2 a Did the organization include an a	amount on Fo	rm 990,	Part X, line 21	, for es	crow or custodia	al accou	nt liability?	Yes	No
b If 'Yes,' explain the arrangement	t in Part XIII	Check h	ere if the expla	nation	has been provid	ded on F	Part XIII		П
-					·				
Part V Endowment Funds. C	omplete if	the or	ganization a	nswer	ed 'Yes' on F	orm 9	90, Part IV, Im	e 10.	
	(a) Current		(b) Prior yea		(c) Two years ba		d) Three years back		ears back
1 a Beginning of year balance									
b Contributions					·······	i			
c Net investment earnings, gains, and losses								-	
d Grants or scholarships		-							
e Other expenditures for facilities and programs									
f Administrative expenses .				Ī					
g End of year balance.									
2 Provide the estimated percentag	e of the curre	nt year	end balance (li	ne 1g,	column (a)) held	d as			
a Board designated or quasi-endowm	ient ►	·	ક						
b Permanent endowment ►									
c Temporarily restricted endowmer	nt ►		%						
The percentages on lines 2a, 2b, at		qual 100							
3 a Are there endowment funds not in t organization by:	he possession	of the o	ganization that	are held	d and administere	ed for the)	Yes	s No
(3)alakad awaansadaana							,	3a(i)	
(ii) related organizations								3a(ii)	
b If 'Yes' on line 3a(ii), are the rela	ated organiza	tions list	ed as required	on Sch	edule R?			3b	
4 Describe in Part XIII the intended							ı	<u> </u>	
Part VI Land, Buildings, and									
Complete if the organi			'Yes' on For	m 990) Part IV lin	e 11a	See Form 990) Part X	line 10
Description of property		(a) Cost	or other basis	(b)	Cost or other	(c)	Accumulated epreciation	(d) Book	
1 a Land		,			191,328.	† 	, , , , , , , , , , , , , , , , , , , ,	10	01,328.
b Buildings		<u> </u>		-	1,314,957.	 	62,984.		51,973.
c Leasehold improvements		 			<u> </u>	1	02, 504.		-1010.
d Equipment		 				 			
e Other	-				274 224	 	40 612	27	2 612
Total. Add lines 1a through 1e (Column	in (d) must s	ausl For	m 990 Part V	colum-	274,224.		40,612.		3,612.
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Part VIII Investments – Other Securities.	W1 - 000	N/A		
Complete if the organization answered				: 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat	ion: Cost or end-of-year market value	
(1) Financial derivatives				
(7) (1)				
(A)				
(B)		 		
(C)				
(D)				
(E)				
(F) (G)				
(H)				
(I)				
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)				
Part VIII Investments — Program Polated		,		
Part VIIII Investments — Program Related. Complete if the organization answered	'Yes' on Form 990), Part IV, line 11c.	See Form 990. Part X. line	13
(a) Description of investment	(b) Book value	(c) Method of valuation	n: Cost or end-of-year market value	ue
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)		A Property of		
Part IX Other Assets.	N/A	Dort IV June 11d C	Con Form OOO Dort V line	1 =
Complete if the organization answered	cription	, Part IV, line 110.3	(b) Book value	15
(1)	оприон		(b) Book value	
(2)				
(3)				_
(4)				
(5)				
(6)		 		
(7)				
(8)				
(9) (10)				
Total. (Column (b) must equal Form 990, Part X, column (B)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		-	
) line 15) .	_ 	<u>-</u>	
Part X Other Liabilities. Complete if the organization answered 'Yes' on Fo	rm 990 Part IV line 11	e or 11f See Form 990 F	Part X line 25	
(a) Description of liability	(b) Book value	1	, , , , , , , , , , , , , , , , , , ,	
(1) Federal income taxes		- · · · · ·	· · · · · ·	
(2)		-		
(3)		□		
(4)				
(5)				
(6)		- (· · · ·	• •	
(7)		- 1		
(8)				
(9)	 -	- 	•	
(10)		- - ·		
(11)		 		
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)			and a state of the	
2. Liability for uncertain tax positions. In Part XIII, provide the text of the fool tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has	-	ancial statements that reports t	ne organization s liability for uncertain	\Box
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Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return. N/A	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	11	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	 	
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities	-1	
c Recoveries of prior year grants	- 	
d Other (Describe in Part XIII.)	-];	
e Add lines 2a through 2d		
3 Subtract line 2e from line 1.	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b.	1 1	
b Other (Describe in Part XIII.)	7 1	
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	. 5	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	er Return. N/A	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	11	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	- 	
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d		
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	\ -	
a Investment expenses not included on Form 990, Part VIII, line 7b . 4a] -	
b Other (Describe in Part XIII.)	\lnot,	
c Add lines 4a and 4b	4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Part XIII Supplemental Information.		

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

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Schedule D (Form 990) 2015

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

<u>International Longshoremen's Assoc 3000</u>

Employer identification number

72-0885687

Form 990, Part III, Line 1 - Organization Mission

To promote health, welfare, pension, recreation and civic programs in the interest of its members and their families, and to engage in any business pursuit that will redound to the credit of the organization, and to promote the best interests of the I.L.A.

Form 990, Part VI, Line 11b - Form 990 Review Process

form 990 is reviewed by secretary / treasurer before return is filed

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

FOR OFFICERS - SET BY LOCAL 3000 CONSTITUTION, FOR OTHER KEY EMPLOYEES - SET BY **OFFICERS**

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No other documents available to the public.