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Department of the Treasury

DLN: 93493334001057

2016

OMB No 1545-0047

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

		enue Service				Inspection
Fo	or th	e 2016 ca	lendar year, or tax year beginning 07-01-2016 , and ending 06-30-2017			
		applicable	C Name of organization BUILDING AND CONSTRUCTION TRADES	D Employer ı	dentıfı	cation number
		change	DEPARTMENT AFL-CIO	53-002575	55	
	me ch tıal ret	_	Doing business as	_		
Fin	al					
	-	minated	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Telephone n	umber	
		d return on pending	815 16TH STREET NW NO 600	(202) 347-	-1461	
— Арі	piicacii	on penang	City or town, state or province, country, and ZIP or foreign postal code			
			WASHINGTON, DC 20006	G Gross receip	ots \$ 14	,400,836
			F Name and address of principal officer H(a) Is t	his a group returi	n for	
			BRENT BOOKER	ordinates?		□Yes ☑No
			WASHINGTON, DC 20006 H(b) Are	all subordinates		☐ Yes ☐No
Тах	k-exer	mpt status		uded? No," attach a list	(500)	
14/4	aheit	to. > \\/\\		up exemption nu		•
•••	CDSIL	te. P WW	W NABIO ONG	эр энэн разан на		
Form	n of o	raanization	☐ Corporation ☐ Trust ☐ Association ☑ Other ▶ LABOR ORGANIZATION	mation 1908 M	State o	of legal domicile DC
. 1 0111	11 01 01	rgamzadon	Corporation in Trust in Association in Other P DABOR ORGANIZATION			
Pai	rt I	Sumi	nary	<u>'</u>		
			cribe the organization's mission or most significant activities			
			NIZATION'S PRIMARY EXEMPT PURPOSE INCLUDES COORDINATING AND HARMONIZ! ROMOTING THE DEVELOPMENT OF ALL BUILDING AND CONSTRUCTION TRADES UNI			
			TION OF BUILDING AND CONSTRUCTION TRADESPERSONS AND THE TRAINING OF R			
			ENT OF THE HEALTH AND SAFETY OF THE BUILDING AND CONSTRUCTION TRADESPI			
ų			AND JURISDICTION OF THE DEPARTMENT, SECURING THE ADJUSTMENT OF TRADE AND CONSTRUCTION TRADES INDUSTRY, ENCOURAGING LOCAL BUILDING AND CON			
=			IG INDUSTRIAL PEACE, AIDING ALL AFFILIATED UNIONS IN SECURING IMPROVED WA			
1			NS THROUGH THE PROCESS OF COLLECTIVE BARGAINING, ENGAGING IN LEGISLATI' IG AND PROTECTING THE INTEREST OF BUILDING AND CONSTRUCTION TRADES UNI			
GOVERNANCE	-	PROMOTIN	IS AND PROTECTING THE INTEREST OF BUILDING AND CONSTRUCTION TRADES ON	JNS AND THEIR I	VICIVIDE	:K5
	-					
activities &	-		П			
			s box ▶ □ if the organization discontinued its operations or disposed of more than 2. f voting members of the governing body (Part VI, line 1a)	5% of its net asse	ets 3	15
(i)	l		f independent voting members of the governing body (Part VI, line 1b)	•	4	14
₹	l		ber of individuals employed in calendar year 2016 (Part V, line 2a)	•	5	32
	l		, , , , , , , , , , , , , , , , , , , ,	•	\vdash	
	l		ber of volunteers (estimate if necessary)		6	0
	l		elated business revenue from Part VIII, column (C), line 12	•	7a	0
	ь	Net unrel	ated business taxable income from Form 990-T, line 34		7b	0
	_			Prior Year	+	Current Year
햨	l		ons and grants (Part VIII, line 1h)	0		0
등	9	Program :				
Š	۱. ـ		service revenue (Part VIII, line 2g)	12,336,080	1	13,414,326
Ravenue	l		nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817	,	101,338
Rev	11	Other rev	nt income (Part VIII, column (A), lines 3, 4, and 7d) enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	74,817 959,434	,	101,338 800,626
Rev	11	Other rev	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817	,	101,338 800,626
Rev	11 12	Other rev	nt income (Part VIII, column (A), lines 3, 4, and 7d) enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	74,817 959,434	,	101,338 800,626
Rev	11 12 13	Other rev Total reve Grants an	enue (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331		101,338 800,626 14,316,290
	11 12 13 14	Other rev Total reve Grants an Benefits p	ent income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780		101,338 800,626 14,316,290 317,576
	11 12 13 14 15	Other rev Total reve Grants an Benefits p Salaries,	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780		101,338 800,626 14,316,290 317,576
	11 12 13 14 15 16a	Other rev Total reve Grants an Benefits p Salaries, Professio	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852		101,338 800,626 14,316,290 317,576 0 6,993,303
Expenses Rave	11 12 13 14 15 16a b	Other rev Total reve Grants an Benefits p Salaries, a Professio Total fundr	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852	2	101,338 800,626 14,316,290 317,576 0 6,993,303
	11 12 13 14 15 16a b	Other rev Total reve Grants an Benefits p Salaries, a Professio Total fundr Other exp	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852	7	101,338 800,626 14,316,290 317,576 0 6,993,303 0
	11 12 13 14 15 16a b 17	Other rev Total reve Grants an Benefits p Salaries, Professio Total fundr Other exp	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852 0	7	101,338 800,626 14,316,290 317,576 0 6,993,303 0
Expenses	11 12 13 14 15 16a b 17	Other rev Total reve Grants an Benefits p Salaries, Professio Total fundr Other exp	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852 0 6,001,667 13,276,299		101,338 800,626 14,316,290 317,576 0 6,993,303 0 6,427,768 13,738,647
Expenses	11 12 13 14 15 16a b 17 18 19	Other rev Total reve Grants an Benefits p Salaries, a Professio Total fundr Other exp Total exper	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852 0 6,001,667 13,276,299 94,032		101,338 800,626 14,316,290 317,576 0 6,993,303 0 6,427,768 13,738,647 577,643
Expenses	11 12 13 14 15 16a b 17 18 19	Other rev Total reve Grants an Benefits p Salaries, a Professio Total fundr Other exp Total exper	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852 0 6,001,667 13,276,299 94,032		101,338 800,626 14,316,290 317,576 0 6,993,303 0 6,427,768 13,738,647 577,643
Expenses	11 12 13 14 15 16a b 17 18 19	Other rev Total reve Grants an Benefits p Salaries, a Professio Total fundr Other exp Total expr Revenue	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852 0 6,001,667 13,276,299 94,032 ng of Current Year	7	101,338 800,626 14,316,290 317,576 0 6,993,303 0 6,427,768 13,738,647 577,643 End of Year
ruei Assels of Expenses Fund Balances	11 12 13 14 15 16a b 17 18 19	Other rev Total reve Grants an Benefits p Salaries, a Professio Total fundr Other exp Total expinered Revenue Total asset Total liabi	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852 0 6,001,667 13,276,299 94,032 ng of Current Year	77	101,338 800,626 14,316,290 317,576 0 6,993,303 0 6,427,768 13,738,647 577,643 End of Year
Net Assets of Expenses Fund Balances	11 12 13 14 15 16a b 17 18 19	Other rev Total reve Grants an Benefits p Salaries, Professio Total fundr Other exp Total exper Revenue Total asset Total liable Net asset	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852 0 6,001,667 13,276,299 94,032 ng of Current Year 9,971,023 416,696 9,554,327		101,338 800,626 14,316,290 317,576 0 6,993,303 0 6,427,768 13,738,647 577,643 End of Year 11,082,202 623,112 10,459,090
Net Assets of Expenses	11 12 13 14 15 16a b 17 18 19	Other rev Total reve Grants an Benefits p Salaries, Professio Total fundr Other exp Total exper Revenue Total asset Total liabor Net asset Signa alties of pe	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852 0 6,001,667 13,276,299 94,032 ng of Current Year 9,971,023 416,696 9,554,327	and to	101,338 800,626 14,316,290 317,576 0 6,993,303 0 6,427,768 13,738,647 577,643 End of Year 11,082,202 623,112 10,459,090 the best of my
wei Assets of Expenses	11 12 13 14 15 16a b 17 18 19	Other rev Total reve Grants an Benefits p Salaries, a Professio Total fundr Other exp Total expr Revenue Total asse Total liable Net asset Signa alties of pe	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852 0 6,001,667 13,276,299 94,032 ng of Current Year 9,971,023 416,696 9,554,327	and to	101,338 800,626 14,316,290 317,576 0 6,993,303 0 6,427,768 13,738,647 577,643 End of Year 11,082,202 623,112 10,459,090 the best of my
wei Assets of Expenses	11 12 13 14 15 16a b 17 18 19	Other rev Total reve Grants an Benefits p Salaries, a Professio Total fundr Other exp Total expr Revenue Total asse Total liable Net asset Signa alties of pe	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852 0 6,001,667 13,276,299 94,032 ng of Current Year 9,971,023 416,696 9,554,327 and statements, and on all information	and to	101,338 800,626 14,316,290 317,576 0 6,993,303 0 6,427,768 13,738,647 577,643 End of Year 11,082,202 623,112 10,459,090 the best of my
Koopy Expenses Fund Balances	11 12 13 14 15 16a b 17 18 19 20 21 22 t III	Other rev Total reve Grants an Benefits p Salaries, Professio Total fundr Other exp Total expe Revenue Total asse Total liabi Net asset Signa alties of pereceded as and belief edge	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852 0 6,001,667 13,276,299 94,032 ng of Current Year 9,971,023 416,696 9,554,327	and to	101,338 800,626 14,316,290 317,576 0 6,993,303 0 6,427,768 13,738,647 577,643 End of Year 11,082,202 623,112 10,459,090 the best of my
use of the Balances of Expenses of the Balances of the Balance	11 12 13 14 15 16a b 17 18 19 20 21 22 till penaedge nowled	Other rev Total reve Grants an Benefits p Salaries, a Professio Total fundr Other exp Total exper Revenue Total asset Signa alties of pe and belief edge	Int income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852 0 6,001,667 13,276,299 94,032 ng of Current Year 9,971,023 416,696 9,554,327 and statements, a d on all information	and to	101,338 800,626 14,316,290 317,576 0 6,993,303 0 6,427,768 13,738,647 577,643 End of Year 11,082,202 623,112 10,459,090 the best of my
use of the Balances of Expenses of the Balances of the Balance	11 12 13 14 15 16a b 17 18 19 20 21 22 till penaedge nowled	Other rev Total reve Grants an Benefits p Salaries, a Professio Total fundr Other exp Total expr Revenue Total asse Total liable Net asset Signa alties of pe and belief edge BRENT	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852 0 6,001,667 13,276,299 94,032 ng of Current Year 9,971,023 416,696 9,554,327 and statements, a d on all information	and to	101,338 800,626 14,316,290 317,576 0 6,993,303 0 6,427,768 13,738,647 577,643 End of Year 11,082,202 623,112 10,459,090 the best of my
use of the Balances of Expenses of the Balances of the Balance	11 12 13 14 15 16a b 17 18 19 20 21 22 till penaedge nowled	Other rev Total reve Grants an Benefits p Salaries, a Professio Total fundr Other exp Total exper Revenue Total asset Signa alties of pe and belief edge BRENT Type or	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852 0 6,001,667 13,276,299 94,032 and of Current Year 9,971,023 416,696 9,554,327 and statements, a d on all information	and to	101,338 800,626 14,316,290 317,576 0 6,993,303 0 6,427,768 13,738,647 577,643 End of Year 11,082,202 623,112 10,459,090 the best of my
net Assets of Expenses Fund Balances Balances	11 12 13 14 15 16a b 17 18 19 20 21 22 t III penage nowle	Other rev Total reve Grants an Benefits p Salaries, a Professio Total fundr Other exp Total expr Revenue Total asse Total liable Net asset Signa alties of pe and belief edge BRENT Type or	Int income (Part VIII, column (A), lines 3, 4, and 7d) enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) d similar amounts paid (Part IX, column (A), lines 1–3). paid to or for members (Part IX, column (A), line 4). pother compensation, employee benefits (Part IX, column (A), lines 5–10) nal fundraising fees (Part IX, column (A), line 11e). enising expenses (Part IX, column (D), line 25) penses (Part IX, column (A), lines 11a–11d, 11f–24e). enises Add lines 13–17 (must equal Part IX, column (A), line 25) less expenses Subtract line 18 from line 12. Beginni ets (Part X, line 16). ets (Part X, line 16). grupy, I declare that I have examined this return, including accompanying schedules of it is true, correct, and complete Declaration of preparer (other than officer) is based for the service of officer BOOKER SECRETARY-TREASURER Trint name and title Timit/Type preparer's name Preparer's signature SCOTT E HALLBERG CPA Date	74,817 959,434 13,370,331 421,780 0 6,852,852 0 6,001,667 13,276,299 94,032 ng of Current Year 9,971,023 416,696 9,554,327 and statements, a d on all information	and to	101,338 800,626 14,316,290 317,576 0 6,993,303 0 6,427,768 13,738,647 577,643 End of Year 11,082,202 623,112 10,459,090 the best of my
Par Fund Balances Expenses and Market Services Expenses	11 12 13 14 15 16a b 17 18 19 20 21 22 t III 22 edgenowle	Other rev Total reve Grants an Benefits p Salaries, Professio Total fundr Other exp Total exp Revenue Total asset Total liable Net asset Signa alties of pe and belief edge Professio P	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852 0 6,001,667 13,276,299 94,032 and of Current Year 9,971,023 416,696 9,554,327 and statements, a d on all information	nnd to wood of	101,338 800,626 14,316,290 317,576 0 6,993,303 0 6,427,768 13,738,647 577,643 End of Year 11,082,202 623,112 10,459,090 the best of my
na parameter of the par	11 12 13 14 15 16a b 17 18 19 20 21 22 111 22 100 100 100 100 100 100	Other rev Total reve Grants an Benefits p Salaries, Total fundr Other exp Total expr Revenue Total asset Total liable Net asset Signa alties of pe and beliefe edge BRENT Type or Pi Signatu	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852 0 6,001,667 13,276,299 94,032 ng of Current Year 9,971,023 416,696 9,554,327 and statements, a d on all information cate Check	Nos1188	101,338 800,626 14,316,290 317,576 0 6,993,303 0 6,427,768 13,738,647 577,643 End of Year 11,082,202 623,112 10,459,090 the best of my
na parameter of the par	11 12 13 14 15 16a b 17 18 19 20 21 22 t III 22 edgenowle	Other rev Total reve Grants an Benefits p Salaries, Total fundr Other exp Total expr Revenue Total asset Total liable Net asset Signa alties of pe and beliefe edge BRENT Type or Pi Signatu	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852 0 6,001,667 13,276,299 94,032 ng of Current Year 9,971,023 416,696 9,554,327 and statements, a d on all information check ☐ if elf-employed Polir	Nos1188	101,338 800,626 14,316,290 317,576 0 6,993,303 0 6,427,768 13,738,647 577,643 End of Year 11,082,202 623,112 10,459,090 the best of my
Par Parances Expenses of the parances of the parance of the	11 12 13 14 15 16a b 17 18 19 20 21 22 till penge enowle	Other rev Total reve Grants an Benefits p Salaries, o Professio Total fundr Other exp Revenue Total asset Signa alties of pere e and belief edge BRENT Type or Filly	nt income (Part VIII, column (A), lines 3, 4, and 7d)	74,817 959,434 13,370,331 421,780 0 6,852,852 0 6,001,667 13,276,299 94,032 ng of Current Year 9,971,023 416,696 9,554,327 and statements, a d on all information check ☐ if elf-employed Polir	Non of w	101,338 800,626 14,316,290 317,576 0 6,993,303 0 6,427,768 13,738,647 577,643 End of Year 11,082,202 623,112 10,459,090 the best of my

Cat No 11282Y

Form **990** (2016)

Form	990 (2016)				Page 2						
Par	t IIII Statemen	it of Program Service Acc	complishments								
	Check if Sch	nedule O contains a response oi	note to any line in this Part III		🗆						
1	Briefly describe the	organization's mission									
SEE	SCHEDULE O FOR DE	TAILS									
2	-		gram services during the year which v	vere not listed on							
	the prior Form 990	or 990-EZ?			☐ Yes ☑ No						
	•	hese new services on Schedule									
3	Did the organizatio	Did the organization cease conducting, or make significant changes in how it conducts, any program									
					🗌 Yes 🗹 No						
	If "Yes," describe the	hese changes on Schedule O									
4	Section 501(c)(3) a		nplishments for each of its three large required to report the amount of grai service reported								
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)						
	See Additional Data										
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)						
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)						
70	(Code) (Expenses \$	including grants or \$) (Nevenue \$,						
4d	· =	vices (Describe in Schedule O)									
	(Expenses \$	ıncludıng	grants of \$	(Revenue \$)						
4e	Total program se	rvice expenses >									

Yes

or X as applicable

Section 501(c)(3) organizations.

Checklist of Required Schedules Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . .

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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 🛸 🔒 Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥦

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

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 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

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

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

3 4

1

2

Νo

Page 3

No

Νo

Νo

No

Nο

Nο

Nο

Nο

Nο

Nο

No

No

Nο

Νo

Nο

No

Nο

Form **990** (2016)

9

10

11a

11b

11c

11d

11e

11f

12a

13

14a

14b

15

16

17

18

19

Yes

Yes

Yes

Yes

Yes

Yes

Yes

29

Page 4 Part IV Checklist of Required Schedules (continued) Yes 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . 20a No b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic Yes 21 government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX. 22 Nο column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's Yes 23 current and former officers, directors, trustees, key employees, and highest compensated employees? If "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 Νo 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

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

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

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 🔧

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

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

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)?

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

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 year, and

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?

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

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, Part

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

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

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

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

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

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

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

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

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

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

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

instructions for applicable filing thresholds, conditions, and exceptions)

24c

Nο

24d

25a

25b

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28a

28b

28c

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35a

35h

36

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Yes

Yes

Form 990 (2016)

orm '	990 (2016)			Page 5
Par	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
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 65			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
	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	2b	Yes	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	165	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
	If "Yes," enter the name of the foreign country ►CA See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	30		
Ü	In res, to fine 3a of 5b, tild the organization life FUTII 0000-17	5c		
	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?	6a	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		No
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
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?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
		_		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes " onter the amount of tax, exempt interest received or assisted during the year.	12a		
D	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.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
L4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			orm 00	0 (2016

	990 (2010)			Page (
Par	Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No	" respo	nse to li	nes						
	8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions			~						
50	Check if Schedule O contains a response or note to any line in this Part VI		• •							
36	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 15		103							
	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 14									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No						
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		No						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No						
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5									
6	Did the organization have members or stockholders?	6	Yes							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following									
а	The governing body?	8a	Yes							
b	Each committee with authority to act on behalf of the governing body?	8b	Yes							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No						
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	<u>e Code</u>								
			Yes	No						
	Did the organization have local chapters, branches, or affiliates?	10a	Yes							
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes							
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No						
	Describe in Schedule O the process, if any, used by the organization to review this Form 990									
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes							
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes							
13	Did the organization have a written whistleblower policy?	13	Yes							
14	Did the organization have a written document retention and destruction policy?	14	Yes							
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
	The organization's CEO, Executive Director, or top management official	15a	Yes							
b	Other officers or key employees of the organization	15b	Yes							
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)									
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No						
Ь	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								
	ction C. Disclosure									
17	List the States with which a copy of this Form 990 is required to be filed									
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply									
	Own website Another's website Upon request Other (explain in Schedule O)									
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year									
20	State the name, address, and telephone number of the person who possesses the organization's books and records ▶BRENT BOOKER SECRETARY-TREASURER 815 16TH STREET SUITE 600 WASHINGTON, DC 20006 (202) 347-1461									

VICE PRESIDENT

(13) JOSEPH SELLERS JR VICE PRESIDENT

(14) LONNIE STEPHENSON

VICE PRESIDENT

(15) ERIC DEAN

VICE PRESIDENT

VICE PRESIDENT

(16) MARK MCMANUS

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

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

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

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

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

 List all of the organization's former directo organization, more than \$10,000 of reportable of List persons in the following order individual trust compensated employees, and former such perso 	ompensation fro stees or directo	m the	organ	ıızatı	ion a	and a	ny re	elated organization:	S	
Check this box if neither the organization no (A) Name and Title	r any related or (B) Average	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					ore	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any hours for related						er)	compensation from the organization (W- 2/1099-	compensation from related organizations (W- 2/1099-	amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
(1) SEAN MCGARVEY PRESIDENT	40 00	×		×				433,115	0	98,113
(2) BRENT D BOOKER SECRETARY/TREASURER	40 00	×		×				341,448	0	101,599
(3) FRANK CHRISTENSEN VICE PRESIDENT	1 00	x		x				2,660	0	0
(4) KENNETH RIGMAIDEN VICE PRESIDENT	1 00	х		х				2,160	0	0
(5) NEWTON JONES VICE PRESIDENT	1 00	x		×				1,160	0	0
(6) WILLIAM P HITE VICE PRESIDENT	1 00	x		x				2,160	0	0
(7) KINSEY ROBINSON VICE PRESIDENT	1 00	х		х				2,660	0	0
(8) DANIEL E STEPANO VICE PRESIDENT	1 00	x		х				1,660	0	0
(9) JAMES P HOFFA VICE PRESIDENT	1 00	×		x				660	0	0
(10) TERRY O'SULLIVAN VICE PRESIDENT	1 00	×		×				2,660	0	0
(11) JAMES BOLAND VICE PRESIDENT	1 00	×		x				2,160	0	0
(12) JAMES T CALLAHAN	1 00	V		Ţ				2 660	0	0

1 00 (17) JAMES MCCOURT Х 0 Х 2.660 0 VICE PRESIDENT Form 990 (2016)

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TIMOTHY HELM

310 TAYLOR STREET NE WASHINGTON, DC 20017

compensation from the organization ▶ 4

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

(A) (B) (C) (D) (E) (F)

Page 8

(A) Name and Title	(B) Average hours per week (list any hours Average hours per than one box, unless person is both an officer and a director/trustee)					ss pers	son	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	Estim amount comper from	ated of other esation the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organiza rela organiz	ted
(18) ROBERT BLAKELY	40 00					×		184,069	0		44,312
DIRECTOR OF CANADIAN AFFAI				-							
(19) MICHAEL A MONROE	40 00					×		225,475	0		81,618
(20) WILLIAM D KACZODOWSKI	1				<u> </u>						
	40 00	<u></u>				×		174,079	0		77,775
(21) SONIA RAMIREZ											
	40 00	<u> </u>				×		181,197	0		58,726
(22) MARK COLES											
	40 00	.				×		155,242	0		74,045
DIRECTOR OF C H O I C E											
1b Sub-Total					j	•					
c Total from continuation sheets to Part	•					-					
d Total (add lines 1b and 1c)						<u> </u>		1,721,205	0		536,188
2 Total number of individuals (including but of reportable compensation from the org		those li	sted a	abov	/e) v	who re	ceiv	ed more than \$100	,000		
	anizacion P /										
									_	Yes	No
3 Did the organization list any former offi	•					•	-	•	nployee on		
line 1a? If "Yes," complete Schedule J fo	r such individuai	•	•	•	•		•		3		No
4 For any individual listed on line 1a, is the									he		
organization and related organizations g										.,	
									<u> </u>	Yes	
5 Did any person listed on line 1a received services rendered to the organization? If								ganization or individ			l
		Schede	,,,,,,	0, 5	uci,	регоот			5		No
Section B. Independent Contractor											
1 Complete this table for your five highest from the organization Report compensa										nsation	
-	(A)	,							(B)	(0	
	business address							Descript	tion of services	Compe	
SHERMAN DUNN COHEN LEIFER & YELLIG								LEGAL SERVIC	E3	'	,140,570
900 7TH STREET NW WASHINGTON, DC 20001											
BGR GROUP								CONSULTING			300,478
601 THIRTEENTH STREET NW											
WASHINGTON, DC 20005									. F		242.555
GROSS HEINZ LLC								GOVERNMENT CONSULTING	AFFAIKS		240,000
714 HOPMEADOW STREET SUITE 3 SIMSBURRY, CT 06070											
TIMOTHY HELM								CONCULTING		t	122.040

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

132,040

CONSULTING

orm 9		Statement of									Page 9
		Check If Schedu	le O contains	a respo	onse or note to any l	line in this Pari (A) Total revenue		(B) Related or exempt function		(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a	Federated campaig	ns	1a				revenue			512-514
nts Ints	Ŀ	• Membership dues		1b	<u> </u>						
Gra not		: Fundraising events		1c							
. ₹		Related organization	ons	1d							
<u>ā</u> 23		• Government grants (c	ontributions)	1e							
ns, Sim	f	All other contributions	, gıfts, grants,								
atio er		and similar amounts r above	iot included	1 f							
Contributions, Gifts, Grants and Other Similar Amounts	٥	Noncash contributi	ons included								
Contributions, Gifts, Grants and Other Similar Amounts		ın lınes 1a-1f \$									
	<u>_ h</u>	Total.Add lines 1a-:	lf			Code		1		I	T
표	22	MEMBERSHIP DUES				900099	11,84	5 128	11,845,128		
3		CONFERENCE REVENUE	:			900099		5,425	1,005,425		
Program Service Revenue		DOL CONTRACT				900099		3,773	563,773		
Ę	d										
S E	e			_							
gra	f	All other program se	ervice revenue	:							
Ĕ.	g.	Total.Add lines 2a-2	f		▶ 13,4	14,326					
		nvestment income (i			interest, and other] ,	36,473				86,473
		imilar amounts). income from investm			ond proceeds		30, 173				00,173
		Royalties									
			(ı) Rea		(II) Personal						
	6a	Gross rents									
	ь	Less rental expenses									
	С	Rental income or (loss)									
	d	Net rental income of	or (loss)			1					
			(ı) Securit	ties	(II) Other						
	7a	Gross amount from sales of			47,500						
		assets other than inventory									
	ь	Less cost or									
		other basis and sales expenses			32,635						
		Gain or (loss)			14,865	Į					14.065
		Net gain or (loss) . Gross income from f			•		14,865				14,865
<u>a</u>		(not including \$		of							
듄		contributions reporte See Part IV, line 18			}						
Se	b	Less direct expense									
er	c	Net income or (loss)	from fundrais	sing ev	ents •	J 					
Other Revenue	9a	Gross income from G See Part IV, line 19		ies							
		See Fare IV, mile IS		a	1						
	b	Less direct expense	es	b							
		Net income or (loss)		activit	ies >						
	10a	Gross sales of inven- returns and allowand									
				а	29,048						
	b	Less cost of goods	sold	b	51,911						
	С	Net income or (loss)		invent		-2	22,863	-	22,863		
-	11	Miscellaneous ADMINSITRATIVE S			Business Code 900099	66	52,824	6	52,824		
		REIMBURSEM	LKVCIL				·				
	b	OTHER REVENUE			900099	12	22,727	1	22,727		
	_	OTTLK KEVENUE									
	c	ATTORNEYS CONFE	RENCE		900099	1	19,041		19,041		
	d	All other revenue .				1	18,897		18,897		
	е	Total. Add lines 11a	ı–11d		· •	0.7	23,489				
	12	Total revenue. See	Instructions						14.655		
						14,31	16,290	14,2	14,952		0 101,338

e All other expenses

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

Form 990 (2016)				Page 10
Part IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all c	_			
Check if Schedule O contains a response or note to an	/ line in this Part IX			<u> </u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	317,576			
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, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	912,925			
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	3,752,200			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	914,631			
9 Other employee benefits	1,133,893			
10 Payroll taxes	279,654			
11 Fees for services (non-employees)				
a Management				
b Legal	1,117,054			
c Accounting	62,729			
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	837,467			
12 Advertising and promotion	186,290			
13 Office expenses	324,919			
14 Information technology	105,841			
15 Royalties				
16 Occupancy	474,983			
17 Travel	808,693			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	1,151,293			
20 Interest				
21 Payments to affiliates	42,271			
22 Depreciation, depletion, and amortization	188,494			
23 Insurance	128,792			
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a DOL CONTRACT	415,269			
b CONTRIBUTIONS TO POLITI	294,200			
c EVENT JOURNALS	169,910			
d REMUNERATION	59,528			

60,035

Form **990** (2016)

13,738,647

	2	Savings and temporary cash investments	4,229,126	2	4,636,172
	3	Pledges and grants receivable, net		3	137,228
	4	Accounts receivable, net	288,401	4	362,739
	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	
sts	6 7	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 Notes and loans receivable, net		6	
SS	R	Inventories for sale or use	30.051	R	29 655

		II of Schedule L					
	6	Loans and other receivables from other disquali section 4958(f)(1)), persons described in section contributing employers and sponsoring organiza- voluntary employees' beneficiary organizations Part II of Schedule L		6			
ets	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use	30,051	8	29,655		
⋖	9	Prepaid expenses and deferred charges	154,258	9	170,831		
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	2,192,931			
	b	Less accumulated depreciation	10 b	1,492,866	761,693	10c	700,065
	11	Investments—publicly traded securities .				11	
	12	Investments—other securities See Part IV, line		3,929,326	12	4,839,475	
	13	Investments—program-related See Part IV, lin			13		

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10,459,090

11.082.202 Form **990** (2016)

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9,971,023

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Assets or Fund Balances

Net

Intangible assets

Grants payable . . .

Unrestricted net assets

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Deferred revenue

Other assets See Part IV, line 11 . . .

Tax-exempt bond liabilities

Total liabilities. Add lines 17 through 25 . .

complete lines 27 through 29, and lines 33 and 34.

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

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Accounts payable and accrued expenses

Total assets.Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability Complete Part IV of Schedule D

Organizations that follow SFAS 117 (ASC 958), check here > \square and

Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u> </u>		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	4,318	25	4,383

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

Audit Act and OMB Circular A-133?

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

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

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

2c

3a

3b

Yes

No

Form 990 (2016)

Additional Data

Software ID:

Software Version:

EIN: 53-0025755

Name: BUILDING AND CONSTRUCTION TRADES DEPARTMENT AFL-CIO

Form 990 (2016)

Form 990, Part III, Line 4a:

THE ORGANIZATION'S PROGRAM SERVICE ACTIVITIES ARE REPRESENTATIONAL ACTIVITIES, LEGISLATIVE AND POLITICAL EDUCATION, AND ASSISTANCE TO ORGANIZATIONS THAT PROMOTE AND PROTECT THE INTEREST OF BUILDING AND CONSTRUCTION TRADES UNIONS AND THEIR MEMBERS

Political Campaign and Lobbying Activities

Employer identification number

☐ Yes

☐ Yes

(e) Amount of political

contributions received

and promptly and

directly delivered to a separate political organization If none, enter -0-

294,200

53-0025755

OMB No 1545-0047

DLN: 93493334001057

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Proxy Tax) (see separate instructions), then

Name of the organization

DEPARTMENT AFL-CIO

Part I-A

Part I-B

3

1 2

1

2

3

(1)

NON-FEDERAL

BUILDING AND CONSTRUCTION TRADES

Political expenditures

Was a correction made?

function activities

If "Yes," describe in Part IV

(a) Name

POLITICAL EDUCATION FUND OF THE BCTD

Volunteer hours

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

Did the filing organization fileForm 1120-POL for this year?

EZ)

SCHEDULE C (Form 990 or 990-

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.

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

- 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 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

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

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

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

(c) EIN

91-2063810

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 directly expended by the filing organization for section 527 exempt function activities

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

815 16TH STREET

WASHINGTON, DC 20006

(b) Address

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt

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 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

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

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

(d) Amount paid from

filing organization's

funds If none, enter

-0-

Schedule C (Form 990 or 990-EZ) 2016

Total lobbying expenditures

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots nontaxable amount

Grassroots lobbying expenditures

activity

Volunteers?

1

b

(b)

Amount

(a)

Yes

No

Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? 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)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) Part III-A (6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 Yes 1 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? No Did the organization agree to carry over lobbying and political expenditures from the prior year? No Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 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). 2a Current year 2b Carryover from last year c Total 2c 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 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) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

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

Return Reference

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

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

As Filed Data -

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. OMB No 1545-0047 **2016**

DLN: 93493334001057

Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

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

Open to Public

BUI	me of the organization LDING AND CONSTRUCTION TRADES			Em	ployer ident	tification	numb	er
	ARTMENT AFL-CIO			1	0025755			
Pa	rt I Organizations Maintaining Donor Complete if the organization answere			ds or Ac	counts.			
	1	(a) Donor advised f	· · · · · · · · · · · · · · · · · · ·	(b)Funds and c	ther acco	unts	
L	Total number at end of year			Ι ,				
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year)							
1	Aggregate value at end of year							
5	Did the organization inform all donors and donor funds are the organization's property, subject to t			or advised			Yes	□ No
5	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?				ourpose		Yes	□ No
Pai	rt II Conservation Easements. Complet	e if the organization an	swered "Yes" on	Form 99	0, Part IV, I	ine 7.		
Ĺ	Purpose(s) of conservation easements held by the	e organization (check all th	at apply)					
	\square Preservation of land for public use (e g , rec	reation or education)	Preservation	of an histo	rically import	ant land a	area	
	Protection of natural habitat		☐ Preservation	of a certifi	ed historic str	ructure		
	☐ Preservation of open space							
2	Complete lines 2a through 2d if the organization leasement on the last day of the tax year	held a qualified conservation	on contribution in th	ne form of		on the End o	f the \	/ear
а	Total number of conservation easements			2a	Tield at t	ile Lila o	i tile	Cai
b	Total acreage restricted by conservation easemen	ts		2b				
С	Number of conservation easements on a certified		ın (a)	2c				
d	Number of conservation easements included in (c) structure listed in the National Register) acquired after 8/17/06, a	nd not on a historic	2d				
3	Number of conservation easements modified, trantax year ▶	nsferred, released, extingu	ished, or terminate	d by the o	rganization d	uring the		
1	Number of states where property subject to conse	ervation easement is locate	ed ▶					
5	Does the organization have a written policy regar		-	— Iling of vio	lations,			
	and enforcement of the conservation easements i	t holds?		-	. [Yes		lo
5	Staff and volunteer hours devoted to monitoring, •	inspecting, handling of vio	lations, and enforci	ing conser	vation easem	ents durın	ig the y	/ear
7	Amount of expenses incurred in monitoring, inspectors \$	ecting, handling of violation	ns, and enforcing co	onservation	n easements (during the	year	
3	Does each conservation easement reported on lin	e 2(d) above satisfy the re	quirements of sect	on 170(h)	(4)(B)(ı)			
	and section 170(h)(4)(B)(ii)?					Yes		lo
•	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation eas	of the footnote to the orga						
ar	Complete if the organization answere	tions of Art, Historica		Other S	imilar Asse	ets.		
La	If the organization elected, as permitted under SF art, historical treasures, or other similar assets he provide, in Part XIII, the text of the footnote to it	eld for public exhibition, ed	ucation, or researc	h ın furthe				f
b	If the organization elected, as permitted under SF historical treasures, or other similar assets held for following amounts relating to these items	FAS 116 (ASC 958), to repo	ort in its revenue st	tatement a				
(i) Revenue included on Form 990, Part VIII, line 1				▶ \$			
(i	i)Assets included in Form 990, Part X				▶ \$			
2	If the organization received or held works of art, following amounts required to be reported under	•		r financial		the		
а	Revenue included on Form 990, Part VIII, line 1	, , , ====	-		▶ \$			
b	Assets included in Form 990, Part X				▶ \$			
	1							

Par	t IIII	Organizations Ma	aintaining Coll	lections of a	Art, Histo	rical T	reasu	res, or	Other:	<u>Similar A</u>	ssets (continued	')
3		g the organization's acqu s (check all that apply)	uisition, accessior	n, and other re	ecords, chec	k any of	the foll	lowing th	at are a	sıgnıfıcant	use of it	s collectio	n
а		Public exhibition			d		Loan	or exchai	nge prog	rams			
b		Scholarly research			e		Other						
c		Preservation for future	e generations										
4	Provi Part :	de a description of the o	organızatıon's coll	lections and ex	xplaın how t	hey furtl	ner the	organiza	ation's ex	empt purpo	ose in		
5		ng the year, did the orga ts to be sold to raise fur								ılar	□ Y €	es 🗌	No
Pa	rt IV												
		Complete if the org X, line 21.	ganization answ	ered "Yes" o	on Form 99	0, Part	IV, lin	ne 9, or	reporte	d an amoi	unt on I	Form 990	0, Part
1a		e organization an agent ded on Form 990, Part)		an or other int	ermediary f	or contri	butions	s or other	assets r	not	☐ Y6	es 🗆	No
ь	If "Y€	es," explain the arrange	ement in Part XIII	and complete	the followin	g table		Γ		-	Amount		
С	Begir	nning balance		·		-			1c				
d	Addıt	ions during the year							1d				
е	Distri	ibutions during the year	r						1e				
f	Endır	ng balance							1f				
2a	Did tl	he organization include	an amount on Fo	rm 990, Part >	K, line 21, fo	r escrov	or cus	stodial ac	count lia	bility?		-	 No
b	If "Y∈	es," explain the arrange	ement in Part XIII	Check here if	the explana	ation has	s been p	provided	ın Part >	(III		_]
Pa	irt V	Endowment Fund	ds. Complete ıf	the organiza	ation answ	ered "Y	es" on	Form 9	90, Par	t IV, line :	10.		
				(a)Current y	ear (b	Prior yea	r ((c) Two yea	ars back	(d)Three ye	ars back	(e)Four y	ears back
	-	ning of year balance .											
		butions											
		vestment earnings, gain											
d	Grants	s or scholarships	•										
	and pr	expenditures for facilitie ograms	es										
f	Admın	istrative expenses .											
g	End of	year balance											
2		de the estimated percer	-	ent year end b	alance (line	1g, colu	mn (a))) held as					
а	Board	d designated or quasi-ei	ndowment 🟲										
b	Perm	anent endowment 🟲											
С	Temp	porarily restricted endov	wment 🟲										
		percentages on lines 2a,		•									
3a	orgar	here endowment funds nization by		sion of the org	janization th	at are h	eld and	d adminis	tered for	the		Yes	s No
		nrelated organizations						• •				a(i) a(ii)	
ь		elated organizations . es" on 3a(ii), are the rel		s listed as red	ured on Sch	· · nedule R	, .	• •				3b	
4		ribe in Part XIII the inte	-				•				· L		
	rt VI												
		Complete of the org			n Form 99	O, Part	IV, line	e 11a. S	See Forr	n 990, Pa	rt X, lın	e 10.	
	Descr	iption of property	(a) Cost or oth (Investme		b) Cost or othe	er basis (d	other)	(c)Accur	mulated d	epreciation		(d) Book va	lue
1 a	Land												
b	Buildin	ngs											
c	Leaseh	nold improvements											
		ment				2,19	92,931			1,492,866			700,065
	Other	ŀ				-	+			·			
		lines 1a through 1e (Co	ı olumn (d) must ed	gual Form 990	, Part X, col	umn (B)	, line 1	O(c)).	. 1	>			700,065

Part VII	Investments—Other Securities. Complete if	the org	ganization ans	wered 'Yes' on	Form 990, Pa	rt IV, line 11b.
	See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(I	b) Book value	Cos	(c)Method of v	
(1)Financial				Cos	c or end-or-year	market value
(2)Closely-h (3)Other	neld equity interests					
(A) ULLICO	STOCKS	-	4,839,475		F	
(B)		-				
(C)						
(D)		-				
(E)						
(F)		-				
(F)		-				
(G)		-				
	(1) (5 000 0 1) (7 (7) (10)	_				
Part VIII	in (b) must equal Form 990, Part X, col (B) line 12) Investments—Program Related. Complete I	▶ f the o	4,839,475 rganization an		n Form 990, P	art IV, line 11c.
	See Form 990, Part X, line 13. (a) Description of investment		(b) Book value		(c) Method of	valuation
(1)	(-)				t or end-of-year	
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9) 						
Total. (Colum Part IX	on (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization answere	ed 'Yes'	on Form 990 P	art IV line 11d	See Form 990 I	Part X line 15
	(a) Descripti					(b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colu	omn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization	answe	red 'Yes' on Fo			- 11f
	See Form 990, Part X, line 25. (a) Description of liability	answe			I I I I I I I I I I I I I I I I I I I	111.
(1) Federal :	Income taxes		(0)	Book value		
ESCROW AC	COUNTS			4,383		
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col (B) line 25)		•	4,383		
	or uncertain tax positions In Part XIII, provide the text 's liability for uncertain tax positions under FIN 48 (ASC					
	,	/				

Part XI

2

а

b

3

4

5

1

2

а b

d

е 3

а

b

c

Part XIII

5

4

b

Part XII

Schedule D (Form 990) 2016

Page 4

379,031

14,316,290

14,316,290

13,790,558

51,911

13.738.647

13,738,647

Add lines 4a and 4b . . .

Donated services and use of facilities .

Prior year adjustments . . .

Other (Describe in Part XIII) .

Add lines 2a through 2d .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Subtract line 2e from line 1 .

Other losses .

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments . . . Donated services and use of facilities . Recoveries of prior year grants . . .

Total expenses and losses per audited financial statements .

Amounts included on line 1 but not on Form 990, Part IX, line 25

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)

Supplemental Information

Subtract line 2e from line 1 . Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b.

Other (Describe in Part XIII)

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

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

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

4a 4b

2a

2b

2c

2d

4b

Explanation

2a

2b

2c

2d

327,120

51,911

51.911

4c

2e

3

4c

5

2e

3

Schedule D (Form 990) 2015

Page 5	Schedule D (Form 990) 2015
inued)	Part XIII Supplemental Information (co
Explanation	Return Reference

Schedule D (Form 990) 2016

Additional Data

Software ID: Software Version:

> EIN: 53-0025755

BUILDING AND CONSTRUCTION TRADES Name: DEPARTMENT AFL-CIO

Supplemental Information Return Reference

PART X. LINE 2

Explanation

OUS STATES AND LOCAL JURISDICTIONS IN WHICH THE DEPARTMENT FILES RETURNS

AVE AN EFFECT ON ITS TAX-EXEMPT STATUS AS OF JUNE 30, 2017, THE STATUTE OF LIMITATIONS FO R TAX YEARS 2013 THROUGH 2015 REMAINS OPEN WITH THE U.S. FEDERAL JURISDICTION AND THE VARI

OUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND PRESCRIBE A THRESHOLD OF "MORE LIKELY THAN NOT" FOR RECOGNITION AND DERECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE DEPARTMENT PERFORMED AN EVALU ATION OF UNCERTAIN TAX POSITIONS FOR THE YEAR ENDED JUNE 30, 2017 AND DETERMINED THAT THER E WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY H

THE DEPARTMENT ACCOUNTS FOR INCOME TAXES IN ACCORDANCE WITH THE ACCOUNTING STANDARDS CODIF ICATION (ASC) TOPIC INCOME TAXES THESE PROVISIONS PROVIDE CONSISTENT GUIDANCE FOR THE ACC

Supplemental Information		
Return Reference	Explanation	
PART XI, LINE 2D - OTHER ADJUSTMENTS	INVENTORY COST ON FORM 990, PART VIII, LINE 10B 51,911	

S

upplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	INVENTORY COSTS ON FORM 990, PART VIII, LINE 10B 51,911

S

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493334001057 OMB No 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2016 ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions. Open to Public Department of the Treasury Inspection ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service **Employer identification number** Name of the organization BUILDING AND CONSTRUCTION TRADES DEPARTMENT AFL-CIO 53-0025755 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, agents, region (by type) (e q, program service, describe for and investments region and independent fundraising, program specific type of in region contractors in services, investments, grants service(s) in region region to recipients located in the region) NORTH AMERICA - CANADA AND 0 PROGRAM SERVICES THE ORGANIZATION'S 1,026,750 1 MEXICO, BUT NOT THE UNITED PROGRAM SERVICE STATES ACTIVITIES ARE REPRESENTATIONAL ACTIVITIES, LEGISLATIVE AND POLITICAL EDUCATION, AND ASSISTANCE TO ORGANIZATIONS THAT PROMOTE AND PROTECT THE INTEREST OF BUILDING AND CONSTRUCTION TRADE UNIONS AND THEIR MEMBERS IN CANADA 1,026,750 3a Sub-total b Total from continuation sheets to c Totals (add lines 3a and 3b) 1,026,750

Schedule F (Form 990) 2016							Page 3
Part III Grants and Ot	ther Assistance t	o Individuals	Outside the Unite	ed States. Complete if	the organization an	nswered "Yes" to Form 99	90, Part IV, line 16.
Part III can be	duplicated if addition	<u>ional space is n</u>	ieeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
	1		ļ	1	1	1	1
	1					1	1
+		+					
		1		1			+
	1						
	1						
	1						
	1						
	1						
	1						
	1						1

Schedule F (Form 990) 2016

Sche	dule F (Form 990) 2016		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		
		☐ Yes	✓ No
organiz	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)		
	Corporations (see Instructions for Form 5471)	☐ Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	☑ No
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
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713)	□Yes	☑ No

Schedule F ((Form t	990) 2016 Page 5
Part V	Prov amo	plemental Information (Ide the Information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; bunts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting hod); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide
	any	additional information (see instructions).
Retur Referen	n ,	additional information (see instructions). Explanation

efile GRAPHIC prin	t - DO NOT PROCESS	As Filed Data -					DLN: 93493334001057	
Schedule I (Form 990) Department of the Treasury Internal Revenue Service	Co	Governments omplete if the organiza	and Individuals ation answered "Yes," o Attach to Form	ther Assistance to Organizations, and Individuals in the United States ion answered "Yes," on Form 990, Part IV, line 21 or 22. Attach to Form 990. I (Form 990) and its instructions is at <u>www.irs.gov/form990</u> .				
Name of the organization	107701177177					Employer ide	entification number	
BUILDING AND CONSTRU DEPARTMENT AFL-CIO	JCTION TRADES					53-0025755	;	
Part I General :	Information on Grants	and Assistance				·		
the selection criter	tion maintain records to sub ria used to award the grants the organization's procedu	or assistance?				e, and	☑ Yes ☐ No	
Part III Grants and	Other Assistance to Doned more than \$5,000 Part I	nestic Organizations a	nd Domestic Governme		ganization answered "Yes"	on Form 990, Part IV	, line 21, for any recipient	
(a) Name and addre organization or government	ss of (b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description non-cash assistar		
	r of section 501(c)(3) and g r of other organizations liste	=						
For Paperwork Reduction	Act Notice, see the Instruction	ons for Form 990.		Cat No 50055	iP		Schedule I (Form 990) 2016	

Schedule I (Form 990) 2016	i					Page 2		
		Domestic Individuational space is needed	als. Complete if the org	ganization answered "Yes'	on Form 990, Part IV, line 22			
(a) Type of grant or	•	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance		
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
Part IV Suppleme	ental Informati	on. Provide the inf	ormation required in	Part I, line 2, Part III	, column (b), and any other ad	ditional information.		
Return Reference	Explanati	on						
PART I, LINE 2	THE ORGANIZATION MONITORS SUBSIDIES TO OTHER ORGANIZATIONS ON A CASE BY CASE BASIS RECORDS ARE MAINTAINED TO SUBSTANTIATE THE AMOUNT, ELIGIBILITY AND USE							

Additional Data

NATIONAL ALLIANCE FOR FAIR

CONTRACTING 905 16TH STREET NW WASHINGTON, DC 20006

Software ID: Software Version: **EIN:** 53-0025755 Name: BUILDING AND CONSTRUCTION TRADES DEPARTMENT AFL-CIO Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance

or government		-	assistance	other)	
					т

53-0186128 501(C)(5) 35,000

PLAN FOR THE SETTLEMENT OF JURISDICTIONAL

501(C)(5)

37-1370206

ANNUAL ASSISTANCE TO THE ORGANIZATION

DISPUTES 815 16TH STREET NW WASHINGTON, DC 20006

150,000

OPERATIONAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (b) EIN (c) IRC section organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 501(C)(5) 125.000 FOUNDATION FOR FAIR 47-2251275 ASSISTANCE TO THE CONTRACTING CHOICE ORGANIZATION

5829 ALLENTOWN ROAD CAMP SPRINGS, MD 20746

Schedule J

(Form 990)

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.

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

ine 23. **201**

2015

OMB No 1545-0047

DLN: 93493334001057

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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ternal Revenue

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Name of the organization
BUILDING AND CONSTRUCTION TRADES
DEPARTMENT AFL-CIO

Employer identification number
53-0025755

DEF	PARTMENT AFL-CIO		53-0025755			
Pa	rt I Questions Regarding Compensation	n	·			
					Yes	No
1 a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	Г	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses do	_	. ,	1b	Yes	
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Execution of		· · · · · · · · · · · · · · · · · · ·	2	Yes	
3	Indicate which, if any, of the following the filing orga organization's CEO/Executive Director Check all th used by a related organization to establish compens	nat appl				
	□ Compensation committee	Г	Written employment contract			
	Independent compensation consultant	Г	Compensation survey or study			
	Form 990 of other organizations	Ľ	Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, or a related organization	Part V1	II, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymer	nt?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ntal nor	nqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-b	ased co	ompensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	he applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiza	tions m	ust complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A compensation contingent on the revenues of	, line 1	a, did the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," on line 5a or 5b, describe in Part III					
6	For persons listed on Form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1	a, did the organization pay or accrue any			
а	The organization?			6 a		
b	Any related organization?			6b		
	If "Yes," on line 6a or 6b, describe in Part III					
7	For persons listed on Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of			7		
8	Were any amounts reported on Form 990, Part VII, subject to the initial contract exception described in Part III			8		
9	If "Yes" on line 8, did the organization also follow th section 53 4958-6(c)?	e rebuti	table presumption procedure described in Regulations	9		

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		Base (ı) compensation	(iı) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
1 SEAN MCGARVEY PRESIDENT	(i)	373,056	0	60,059	64,400	33,713	531,228	0
	(ii)	0	0	0	0	0	0	0
2 BRENT D BOOKER SECRETARY/TREASURER	(i)	279,792	0	61,656	64,400	37,199	443,047	0
,	(ii)	0	0	0	0	0	0	0
3 ROBERT BLAKELY DIRECTOR OF CANADIAN	(i)	177,636	374	6,059	32,909	11,403	228,381	0
AFFAI	(ii)	0	0	0	0	0	0	0
4 MICHAEL A MONROE CHIEF OF STAFF	(i)	215,000	512	9,963	53,600	28,018	307,093	0
	(ii)	0	0	0	0	0	0	0
5 WILLIAM P KACZOROWSKI DIRECTOR OF FIELD	(i)	165,743	507	7,829	41,778	35,997	251,854	0
SERVICES	(ii)	0	0	0	0	0	0	0
6 SONIA RAMIREZ GOVERNMENT AFFAIRS	(i)	177,459	507	3,231	42,590	16,136	239,923	0
DIRECTO	(ii)	0	0	0	0	0	0	0
7 MARK COLES DIRECTOR OF C H O I C E	(i)	152,250	507	2,485	38,190	35,855	229,287	0
	(ii)	0	0	0	0	0	0	0

Schedule J (Form 990) 2015	Page 3						
Part IIII Supplemental Infor	mation						
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						
Recuiri Reference	Experiation						

efile GRAPH	IIC print	- DO NOT PROCESS As Filed Data -	DLI	N: 93493334001057
SCHEDUL	FΩ	Supplemental Information to Form 99	90 or 990-F7	OMB No 1545-0047
(Form 990 or EZ)	I .	Complete to provide information for responses to speci. Form 990 or 990-EZ or to provide any additional in Attach to Form 990 or 990-EZ.	ific questions on	2016
Department of the T		Information about Schedule 0 (Form 990 or 990-EZ) and www.irs.gov/form990.	its instructions is at	Open to Public Inspection
Internal Revenue Se Name of the org BUILDING AND CO DEPARTMENT AFL- 990 Schedul e	NSTRUCTION -CIO	N TRADES plemental Information	Employer ider 53-0025755	ntification number
Return Reference		Explanation		
FORM 990, PART VI, SECTION A, LINE 6	THE MEN	MBERSHIP OF THE ORGANIZATION IS MADE UP OF THE PRESIDE	ENTS OF THE 14 AFFILIA	TED UNIONS

Return Explanation
Reference

FORM 990,	THE ORGANIZATION HAS DELEGATES FROM EACH OF THE 14 AFFILIATED UNIONS WHO ARE ENTITLED TO V
PART VI,	OTE DURING THE ELECTIONS OF THE PRESIDENT AND THE SECRETARY TREASURER AT THE REGULAR CONVE
SECTION A,	NTIONS THE PRESIDENT OF EACH OF THE AFFILIATED UNIONS IS A VICE PRESIDENT OF THE ORGANIZA
LINE 7A	TION AND IS A MEMBER OF THE GOVERNING BODY

Return Explanation
Reference

FORM 990, THE FORM 990 IS REVIEWED IN DETAIL BY THE CONTROLLER AND THE INDEPENDENT PUBLIC ACCOUNTANT SPRIOR TO FILING AFTER THE FORM HAS BEEN FILED IT IS MADE AVAILABLE TO THE FULL BOARD SECTION B, LINE 11B

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY IS POSTED AND INCLUDED IN THE EMPLOYEE HANDBOOK AND PROVID ED TO THE FULL BOARD ANY POTENTIAL CONFLICTS ARE FIRST REPORTED TO THE DIRECTOR OF OPERAT IONS IF A CONFLICT IS FOUND TO EXIST IT IS REPORTED TO THE PRESIDENT AND IF DEEMED NECESS ARY IT IS REVIEWED BY THE FULL BOARD CONFLICTS INVOLVING AN OFFICER OR BOARD MEMBER ARE E VALUATED BY THE FULL BOARD AND APPROPRIATE ACTION IS TAKEN

Return Explanation
Reference

FORM 990, PART VI, SECTION B, LINE 15

990 Schedule O, Supplemental Information Return Explanation Reference FORM 990. I ITEMS ARE AVAILABLE UPON REQUEST PART VI, SECTION C.

LINE 18

Return Explanation
Reference
FORM 990. THESE DOCUMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC UNLESS REQUIRED BY LAW

FORM 990, THESE DOCUMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC UNLESS REQUIRED BY LAW
PART VI,
SECTION C,
LINE 19

Return Explanation
Reference

FORM 990, PART IX, LINE 11G

990 Schedule O, Supplemental Information Explanation Return Reference

FORM 990, PART XII, LINE 2C SCHEDULE R
(Form 990)

Related

Related Organizations and Unrelated Partnerships

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

1 20

Employer identification number

2016

DLN: 93493334001057 OMB No 1545-0047

> Open to Public Inspection

Schedule R (Form 990) 2016

► Attach to Form 990.

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

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

Internal Revenue Service

Name of the organization
BUILDING AND CONSTRUCTION TRADES
DEPARTMENT AFL-CIO

Department of the Treasury

53-0025755 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (e) Legal domicile (state End-of-year assets Direct controlling Name, address, and EIN (if applicable) of disregarded entity Primary activity Total income or foreign country) entity Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (b) (d) (f) (c) (e) (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 (1)POLITICAL EDUCATION FUND OF THE BCTD SEPARATE SEGREGATED 527 DC No 815 16TH STREET NW SUITE 600 WASHINGTON, DC 20006 52-1142207 (2)CTR FOR MILITARY RECRUIT ASSESSMENT AND VETERANS EMPLOYMENT TO PROMOTE CAREERS IN DC 501(C)(3) 170(B)(1) (A)(VI) No 815 16TH STREET NW SUITE 600 THE CONSTRUCTION INDUSTRY WASHINGTON, DC 20006 43-1972568 527 (3) POLITICAL EDUCATIONAL FUND OF THE BCTD NON-FEDERAL SEPARATE SEGREGATED DC No 815 16TH STREET NW SUITE 600 FUND WASHINGTON, DC 20006 91-2063810 (4)AFL-CIO FEDERATION OF LABOR DC 501(C)(5) No 815 16TH STREET NW SUITE 600 UNIONS WASHINGTON, DC 20006 53-0228172

Cat No 50135Y

		(b)	1 4 5 1		1 45	1 40	1 .			1 ()	1 4		
(a) Name, address, and EIN of related organization			(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predominant income(related unrelated, excluded from tax under sections 512-	Share of total income		(h) Disproprtionat allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	partner?		(k) Percenta ownersh
					514)			Yes	No		Yes	No	
											1	1 1	
Identification of Related Organiza because it had one or more related or						zation ansv	vered "Yes	" on Fo	orm 9!	90, Part IV,	line	34	
		a corporation	(c) egal micile or foreign	st during th	(d) controlling entity Typ	(e)	vered "Yes (f) Share of total income	Share	(g) of end- year assets	(1	ı) ntage	Se (1	(I) ection 512 3) control entity?
because it had one or more related or (a) Name, address, and EIN of	rganizations treated as	a corporation	on or trus (c) egal micile	st during th	(d) controlling entity Typ	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	ı) ntage	Se (1	control
because it had one or more related or (a) Name, address, and EIN of	rganizations treated as	a corporation	(c) egal micile or foreign	st during th	(d) controlling entity Typ	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	ı) ntage	Se (1	3) control entity?
because it had one or more related or (a) Name, address, and EIN of	rganizations treated as	a corporation	(c) egal micile or foreign	st during th	(d) controlling entity Typ	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	ı) ntage	Se (1	3) control entity?
because it had one or more related or (a) Name, address, and EIN of	rganizations treated as	a corporation	(c) egal micile or foreign	st during th	(d) controlling entity Typ	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	ı) ntage	Se (1	3) control entity?
because it had one or more related or (a) Name, address, and EIN of	rganizations treated as	a corporation	(c) egal micile or foreign	st during th	(d) controlling entity Typ	(e) e of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	ı) ntage	Se (1	3) control entity?

Schedule R (Form 990) 2016

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii)annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b		No
c Gift, grant, or capital contribution from related organization(s)	1c		No
d 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
j Lease of facilities, equipment, or other assets to related organization(s)	1j	Yes	
k Lease of facilities, equipment, or other assets from related organization(s)	1k	Yes	_
l Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	

9	1 -	1	í
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	Yes	
	41.	Yes	<u> </u>
k Lease of facilities, equipment, or other assets from related organization(s)	IK	res	
l Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	10	Yes	
			<u> </u>
p Reimbursement paid to related organization(s) for expenses	1р		
q Reimbursement paid by related organization(s) for expenses	1q	Yes	l

k	Lease of facilities, equipment, or other assets from related organization(s)	1k	Yes								
- 1	Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes								
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No							
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes								
О	Sharing of paid employees with related organization(s)	10	Yes								
р	Reimbursement paid to related organization(s) for expenses	1р	Yes								
q	Reimbursement paid by related organization(s) for expenses	1 q	Yes								
r	Other transfer of cash or property to related organization(s)	1r		No							
s	Other transfer of cash or property from related organization(s)	1s		No							
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds										
	(a) Name of related organization (b) (c) (d) Transaction Amount involved Method of determining amou type (a-s)										

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)	Ar or	(e) e all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ite	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General c managin partner?	or g	(k) Percentage ownership
İ		514)	Yes	No	ļ ,		Yes	No		Yes	No	
									Schedul	e R (Form	1 990	0) 2016

