Short Form Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2019

Department of the Treasury Internal Revenue Service

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

► Go to www.irs.gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

_						
A		e 2019 calendar year, or tax year beginning and ending				
B	Check if applicable C Name of organization			D Employer identification number		
	_	ress change NEVADA & UTAH LABORERS	1			
	Nan	e change DISTRICT COUNCIL	51-0224090			
Ĺ	_		E Telepho	one number		
一	Fina	return/ 570 REACTOR WAY	775-856-0169			
Ē	$\overline{}$		Group	Exemption		
Ē	\neg	RENO, NV 89502-4109		Number ▶ 0121		
G				X if the organization is		
ĭ		ite: N/A		uired to attach Schedule B		
Ġ		xempt status (check only one) $ 501(c)(3)$ \times $501(c) (5)$ $(sin sert no.)$ $4947(a)(1)$ or 527		(Form 990, 990-EZ, or 990-PF).		
-		of organization: Corporation Trust X Association Other	(1 01111 .	330, 330 £2, 01 330 11).		
		nes 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II,				
L				\$ 39,000.		
ГБ		n (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instruc	tions for			
	art I		,110113 101	X		
_	1.	Check if the organization used Schedule O to respond to any question in this Part I				
	1	Contributions, gifts, grants, and similar amounts received		1		
	2	Program service revenue including government fees and contracts		20.000		
	3	Membership dues and assessments		39,000.		
_	4	Investment income	<u> </u>	1		
7 2 7	5a	Gross amount from sale of assets other than inventory 5a				
í	b	Less: cost or other basis and sales expenses	_	_		
4	C	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)	5	C		
4	6	Gaming and fundraising events:				
<u>.</u>	a	Gross income from gaming (attach Schedule G if greater than				
- E	İ	\$15,000) 6a				
Revenue	Ь	Gross income from fundraising events (not including \$ of contributions				
E		from fundraising events reported on line 1) (attach Schedule G if the sum of such				
		gross income and contributions exceeds \$15,000) 6b				
	C	Less, direct expenses from gaming and fundraising events 6c				
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6	d		
	7a	Gross sales of inventory, less returns and allowances 7a		 		
	Ь	Less cost of goods sold 7b				
	1 6	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)	7			
	8		E	3		
	9	Total revenue Add lines 1 2 3 4 5c 6d 7c and 8		39,000.		
_	10	Grants and similar amounts naid (list in Schedule O) 1 SEE SENERULE U	1	= = = = =		
	11	Benefits paid to or for members	 			
w	12	Benefits paid to or for members Salaries, other compensation, and employee benefits	 i			
Expenses	13	Professional fees and other payments to independent contractors	1	_		
per	14	Professional fees and other payments to independent conflactors Occupancy, rent, utilities, and maintenance Printing, publications, postage, and shipping	 			
Ä	15	Printing, publications, postage, and shipping	 			
	16	Other expenses (describe in Schedule 0) SEE SCHEDULE O	 			
	17	Total expenses. Add lines 10 through 16				
_	18	Excess or (deficit) for the year (subtract line 17 from line 9)	1			
şţ			⊢'	3,002.		
386	19	Net assets or fund balances at beginning of year (from line 27, column (A))		17 300		
Net Assets		(must agree with end-of-year figure reported on prior year's return)	1 2			
	20	Other changes in net assets or fund balances (explain in Schedule 0)	2	0 0 0 0		
_	21	Net assets or fund balances at end of year. Combine lines 18 through 20	> 2			
ΙH	A FO	r Paperwork Reduction Act Notice, see the separate instructions.		Form 990-EZ (2019)		

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Forn	m 990-EZ (2019) DISTRICT COUNCIL				51-	02240	90 Page	2
	art II Balance Sheets (see the instructions for Part II)							
	Check if the organization used Schedule O to res	nond to any ques	stion in	this Part II				7
	Oncon in the organization acca concodule of to rec	pona to any quot		Beginning of year		(B) E	nd of year	_
22	Cash, savings, and investments			47,399	. 22		43,717	-
23			_	,	23			Ť
24					24	 		_
25	·			47,399		 	43,717	_
26				0	. 26		0	÷
27	· · · · · · · · · · · · · · · · · · ·			47,399	1 -	 	43,717	÷
	art III Statement of Program Service Accomplishme	nts (see the instr	uction		•	F,	xpenses	÷
Г.	Check if the organization used Schedule O to res	•			X		for section	
A/ba	at is the organization's primary exempt purpose? SEE SCHEDULE C		SUOTI	i uns rait in	لقفا	501(c)(3)	and 501(c)(4)	
						organizatii others.)	ons; optional for	
	ribe the organization's program service accomplishments for each of its three largest program ner, describe the services provided, the number of persons benefited, and other relevant inform			a clear and concise		0.1.1010,		
	ORGANIZE AND UNIFY AFFILIATED NEVAL			AT. IINITON	<u> </u>	 		_
28	ORGANIZE AND UNIFI AFFILIATED NEVAL	A AND UIAN	пос.	AL UNION	<u> </u>			
						_		
	(Grants \$) If this amount includes foreign (grants, check here	***			28a	_	_
29								
	(Grants \$) If this amount includes foreign (grants, check here		<u> </u>	Щ	29a		_
30								
	(Grants \$) If this amount includes foreign g	grants, check here		•		30a		
31	Other program services (describe in Schedule O)							
	(Grants \$) If this amount includes foreign of	grants, check here		•		31a		
22						32		
JE	Total program service expenses (add lines 28a through 31a)] 32		
	Total program service expenses (add lines 28a through 31a) art IV List of Officers, Directors, Trustees, and Key E	mployees (list each	one even	f not compensated -	see the		for Part IV)	_
	art IV List of Officers, Directors, Trustees, and Key E	· -			see the		for Part IV)	–]
		pond to any ques	stion in	this Part IV				<u> </u>
	Check if the organization used Schedule O to res	· -	stion in	(c) Reportable	(d) He contr	alth benefits,	(e) Estimated	
	art IV List of Officers, Directors, Trustees, and Key E	pond to any ques (b) Average hours	stion in	this Part IV	(d) He contr emplo plans,	instructions f	(e) Estimated	r
Pa	Check if the organization used Schedule O to res (a) Name and title	pond to any ques (b) Average hours per week devoted	stion in	(c) Reportable Impensation (Forms W-2/1099-MISC)	(d) He contr emplo plans,	alth benefits, butions to byee benefit and deferred	(e) Estimated amount of othe	r
Pa TO	Check if the organization used Schedule O to res (a) Name and title OMMY WHITE	(b) Average hours per week devoted to position	stion in	this Part IV (c) Reportable impensation (Forms W-2/1099-MISC) not paid, enter -0-)	(d) He contr emplo plans,	alth benefits, butions to byee benefit and deferred pensation	(e) Estimated amount of othe compensation	r —
Pa FO PR	Check if the organization used Schedule O to res (a) Name and title OMMY WHITE ESIDENT	pond to any ques (b) Average hours per week devoted	stion in	(c) Reportable Impensation (Forms W-2/1099-MISC)	(d) He contr emplo plans,	alth benefits, butions to byee benefit and deferred	(e) Estimated amount of othe	r —
Pa TO PR	Check if the organization used Schedule O to res (a) Name and title MMY WHITE ESIDENT M DAVIDSON	(b) Average hours per week devoted to position	stion in	this Part IV (c) Reportable impensation (Forms W-2/1099-MISC) not paid, enter -0-)	(d) He contr emplo plans,	alth benefits, but one of the control of the contro	(e) Estimated amount of othe compensation	r - •
Pa FO PR VI	Check if the organization used Schedule O to res (a) Name and title OMMY WHITE ESIDENT OM DAVIDSON CE PRESIDENT	(b) Average hours per week devoted to position	stion in	this Part IV (c) Reportable impensation (Forms W-2/1099-MISC) not paid, enter -0-)	(d) He contr emplo plans,	alth benefits, ibutions to byee benefit and deferred ipensation	(e) Estimated amount of othe compensation	r - •
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NEVADA & UTAH LABORERS

DISTRICT COUNCIL

51-0224090

Page 3

Forn	n 990-EZ (2019)	_		Page 3		
Pa	ort V Other Information (Note the Schedule A and personal benefit contract statement requirements			X		
	instructions for Part V.) Check if the organization used Sch. O to respond to any question in this Part V					
			Yes	No		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each	l		٠		
	activity in Schedule 0	33		Х		
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended			.		
05-	documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34		X		
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported	35a		x		
	on lines 2, 6a, and 7a, among others)? If "You" to line 35a, bee the expansion filed a Form 900 T for the year? If "No " provide an explanation in Schedule 0.	35b	N/	A		
	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule 0 Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax	330	14/	-		
·	requirements during the year? If "Yes," complete Schedule C, Part III	35c	x			
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes,"			\vdash		
•	complete applicable parts of Schedule N	36		x		
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions					
	Did the organization file Form 1120-POL for this year?	37b		X		
	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made					
	in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X		
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved 38b N/A					
39	Section 501(c)(7) organizations. Enter:					
a	Initiation fees and capital contributions included on line 9 39a N/A]				
b	Gross receipts, included on line 9, for public use of club facilities 39b N/A	1				
40 a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			i ,		
	section 4911 \blacktriangleright N/A , section 4912 \blacktriangleright N/A ; section 4955 \blacktriangleright N/A		İ			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit			ļi		
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any		. .,	,		
	of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40Ь	N/	A		
C	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958					
a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization					
	by the organization All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter					
6	transaction? If "Yes," complete Form 8886-T	40e		<u> </u>		
41	NOVE	100	<u> </u>			
	The organization's books are in care of ► RICHARD DALY Telephone no. ► 775-85	6-0	169			
	Located at ▶ 570 REACTOR WAY, RENO, NV ZIP+4 ▶ 8	950	2-4	109		
Ь	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		Yes	No		
	account)?	42b		X		
	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
C	At any time during the calendar year, did the organization maintain an office outside the United States?	42c		Х		
	If "Yes," enter the name of the foreign country					
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		>	Ш		
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/A				
				•		
			Yes	NO		
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of					
	Form 990-EZ	44a		Α.		
D	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead	445		<u></u>		
_	of Form 990-EZ	44b		X		
	Did the organization receive any payments for indoor tanning services during the year? If "Yes" to line 44c, has the organization filed a Form 720 to report these nayments? If "No " provide an explanation	44c		A.		
u	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule 0	44d				
45 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X		
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section	100				
Ü	512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions	45b				
		Form 9	00-E7	(2010)		

NEVADA & UTAH LABORERS

Form 990-EZ (2019) DISTRICT COUNCIL 51-0224090 Page 4 Yes No Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C. Part I 46 X Section 501(c)(3) Organizations Only All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51. Check if the organization used Schedule O to respond to any question in this Part VI Yes Nο 47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Sch. C, Part II 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 49a 49a Did the organization make any transfers to an exempt non-charitable related organization? 49b b If "Yes," was the related organization a section 527 organization? Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None." (e) Estimated (d) Health benefits (a) Name and title of each employee (b) Average hours (C) Reportable per week devoted to mpensation (Form W-2/1099-MISC) amount of other employee benefit plans, and deferred compensation position N/A compensation f Total number of other employees paid over \$100,000 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the N/A organization. If there is none, enter "None." (a) Name and business address of each independent contractor (b) Type of service (c) Compensation d Total number of other independent contractors each receiving over \$100,000 52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a _ Yes completed Schedule A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here RICHARD DALY, BUSINESS MANAGER Type or print name and titl Check | ____ if Date PTIN Print/Type preparer's name Preparer's signature self- employed LAUREN SANKOVICH, LAUREN SANKOVICH, Paid P00497754 CPACPA 07/01/20 **Preparer** Firm's EIN ► 45-0250958 Firm's name FIDE BAILLY LLP **Use Only** Firm's address ▶ 5441 KIETZKE LN, STE 150 775-689-9100 Phone no. RENO, NV 89511-2094

May the IRS discuss this return with the preparer shown above? See instructions

► X Yes

Form 990-EZ (2019)

SCHEDULE C

(Form 990) or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

➤ Go to www.irs.gov/Form990 for instructions and the latest information.

2019
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If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

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

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

•	Section 501(c)(4), (5), or (6) organiza	itions Complete Part III			
Nar	ne of organization NEVADA	& UTAH LABORERS		Empl	oyer identification number
		T COUNCIL			51-0224090
Pá	art I-A Complete if the or	ganization is exempt und	er section 501(c	or is a section 527 o	rganization.
2	Provide a description of the organi Political campaign activity expendi Volunteer hours for political campa	tures	al campaign activities		10,000.
Pá	art I-B Complete if the or	ganization is exempt und	er section 501(c)(3).	
1	Enter the amount of any excise tax			▶ \$	
	Enter the amount of any excise tax	•		. .	
	If the organization incurred a section				Yes No
	Was a correction made?	·	•		Yes No
t	o If "Yes," describe in Part IV				
Pa	art I-C Complete if the or	ganization is exempt und	er section 501(c	, except section 501(c)(3).
1	Enter the amount directly expende	d by the filing organization for sec	ction 527 exempt fund	ction activities > \$	
2	Enter the amount of the filing organ	nization's funds contributed to ot	her organizations for s	section 527	
	exempt function activities			▶\$	
3	Total exempt function expenditure	s Add lines 1 and 2 Enter here a	nd on Form 1120-POL	- 1	
	line 17b			▶\$	
4	Did the filing organization file Form	1120-POL for this year?			└─ Yes └─ No
5	Enter the names, addresses and en	mployer identification number (Ell	N) of all section 527 p	olitical organizations to whic	h the filing organization
	made payments. For each organiza	ation listed, enter the amount paid	d from the filing organ	ızatıon's funds Also enter th	e amount of political
	contributions received that were pi	• •	, ,		te segregated fund or a
	political action committee (PAC). If	additional space is needed, prov	ide information in Par	t IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
					
				 	

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

Schedule C (Form 990 or 990-EZ) 2019

NEVADA & UTAH LABORERS

Schedule C (Form 990 or 990-EZ) 2019	DISTRICT CO	OUNCIL		51-	0224090 Page 2
Part II-A Complete if the organization 501(h)).			n 501(c)(3) and fil		
expenses, and sha	are of excess lobbying	•	Part IV each affiliated	group member's na	me, address, EIN,
Lim	its on Lobbying Expe	-		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to inf	luence public opinion	(grassroots lobbying)			
b Total lobbying expenditures to inf	luence a legislative bo	dy (dırect lobbyıng)			
c Total lobbying expenditures (add	lines 1a and 1b)				
d Other exempt purpose expenditure	res				-
e Total exempt purpose expenditure	es (add lines 1c and 1	d)			
f Lobbying nontaxable amount Ent					
If the amount on line 1e, column (a)		bying nontaxable am	ount is:		
Not over \$500,000		the amount on line 1e	-		
Over \$500,000 but not over \$1,00		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17	1 1	00 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,000	,000			
g Grassroots nontaxable amount (e	nter 25% of line 1f)				
h Subtract line 1g from line 1a. If ze	ro or less, enter -0-				
i Subtract line 1f from line 1c If zer	o or less, enter -0-				
j if there is an amount other than ze	ero on either line 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this	year?				Yes No
(Some organizations t	hat made a section 5	eraging Period Under 501(h) election do not ate instructions for li	have to complete all	of the five columns	below.
	Lobbying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount			_	-	
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					

Schedule C (Form 990 or 990-EZ) 2019

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990 EZ) 2019 DISTRICT COUNCIL 51-022409

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

For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(t	b)
	e lobbying activity	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
	local legislation, including any attempt to influence public opinion on a legislative matter		1		
	or referendum, through the use of			ŀ	
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			ļ	
i	Other activities?			<u> </u>	
j	Total Add lines 1c through 1i		ļ		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			ļ	
ь	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
<u>d</u>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			<u> </u>	
Par	t III-A Complete if the organization is exempt under section 501(c)(4), secti	on 501(c)(5), or se	ection	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from to till-B Complete if the organization is exempt under section 501(c)(4), section 50	he prior yea	ar? 3		X
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members		1 (b) Pan	: III-A, IIN	e 3, is
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	cal	<u> </u>		
•	expenses for which the section 527(f) tax was paid).	-			
а	Current year		2a		
	Carryover from last year		2b		
	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex-	cess	-		
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and j				
	expenditure next year?	JOIILIOU!	4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par					
nstru	de the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group actions), and Part II-B, line 1. Also, complete this part for any additional information $\mathbf{RT} \mathbf{I} - \mathbf{A}$, $\mathbf{LINE} 1$:	o list), Part l	II-A, lines 1	and 2 (see	
POI	LITICAL DONATION TO RICHARD DALY FOR ASSEMBLY 31.			. <u> </u>	
		-			

SCHEDULE 0

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

NEVADA & UTAH LABORERS

Emplo

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

932211 09-06-19

Name of the organization

DISTRICT COUNCIL

Employer identification number 51-0224090

DISTRICT COUNCIL	51-0224090
FORM 990-EZ, PART I, LINE 10, GRANTS AND SIMILAR AMOUNTS	PAID:
ACTIVITY CLASSIFICATION:	
GRANTEE NAME: NORTHWEST DELEGATE FUND	
AMOUNT GIVEN:	3,000.
ACTIVITY CLASSIFICATION:	
GRANTEE NAME: V REED SCHOLARSHIP FUND	
AMOUNT GIVEN:	2,500.
TOTAL INCLUDED ON FORM 990-EZ, LINE 10	5,500.
FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES:	
DESCRIPTION OF OTHER EXPENSES:	AMOUNT:
REGISTRATION FEES	200.
BANK FEES	82.
POLITICAL CONTRIBUTION	10,000.
PROMOTIONAL ITEMS	26,800.
PER CAPITA FEES	100.
TOTAL TO FORM 990-EZ, LINE 16	37,182.
FORM 990-EZ, PART III, PRIMARY EXEMPT PURPOSE - TO UNIFY	ALL OF THE
ECONOMIC AND OTHER FORCES OF THE AFFILIATED LOCAL UNIONS	IN THE
ORGANIZATIONS AREA.	
FORM 990-EZ, PART V, INFORMATION REGARDING PERSONAL BENEF	FIT CONTRACTS:
THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FULLHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.	INDS , DIRECTLY , dule O (Form 990 or 990-EZ) (2019)

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Schedule O (Form 990 or 990 EZ) (2019) Name of the organization NEVADA & UTAH LABORERS DISTRICT COUNCIL	Page 2 Employer identification number 51-0224090
OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONT	
THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMI	•
OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.	
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