

990

Return of Organization Exempt From Income Tax

OMB No. 1545-

0047 2020

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundation) Do not enter social security numbers on this form as it may be made public.

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

Form 990 Department of the Treasury Internal Revenue Service

A For the 2020 calendar year, or tax year beginning 01-01-2020, and ending 12-31-2020

- B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending

C Name of organization: Service Employees International Union Local 32BJ % LORI ORME Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite City or town, state or province, country, and ZIP or foreign postal code

D Employer identification number: 13-0535740 E Telephone number: (212) 388-2051 G Gross receipts \$ 122,214,434

F Name and address of principal officer: EMANUEL PASTREICH 25 WEST 18TH STREET NEW YORK, NY 10011

H(a) Is this a group return for subordinates? H(b) Are all subordinates included? H(c) Group exemption number 0647

I Tax-exempt status: 501(c)(3) 501(c)(5) 4947(a)(1) or 527

J Website: www.seiu32bj.org

K Form of organization: Corporation Trust Association Other

L Year of formation: 1936 M State of legal domicile: NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities: A LABOR UNION FOR WORKERS WHO ARE EMPLOYED IN THE PROPERTY SERVICES INDUSTRY IN ORDER TO SEEK IMPROVEMENTS IN WAGES, WORK CONDITIONS AND PROMOTE THEIR WELFARE.

Table with 2 columns: Description and Amount. Rows include: 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (104). 4 Number of independent voting members of the governing body (56). 5 Total number of individuals employed in calendar year 2020 (865). 6 Total number of volunteers (48,250). 7a Total unrelated business revenue from Part VIII, column (C), line 12 (0). 7b Net unrelated business taxable income from Form 990-T, line 39 (0).

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 8 Contributions and grants (0), 9 Program service revenue (114,141,132), 10 Investment income (720,871), 11 Other revenue (1,992,566), 12 Total revenue (116,854,569), 13 Grants and similar amounts paid (447,733), 14 Benefits paid to or for members (0), 15 Salaries, other compensation, employee benefits (69,009,988), 16a Professional fundraising fees (0), 16b Total fundraising expenses (0), 17 Other expenses (51,042,314), 18 Total expenses (120,500,035), 19 Revenue less expenses (3,645,466).

Table with 3 columns: Description, Beginning of Current Year, End of Year. Rows include: 20 Total assets (27,269,600), 21 Total liabilities (14,772,943), 22 Net assets or fund balances (12,496,657).

Part II Signature Block

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

Sign Here Signature of officer: EMANUEL PASTREICH SECRETARY-TREASURER Date: 2021-11-13

Paid Preparer Use Only Print/Type preparer's name: WITHUMSMITHBROWNPC Preparer's signature: Date: PTIN: P00234075 Firm's EIN: Firm's address: 4600 EAST WEST HWY 900 BETHESDA, MD 208143423 Phone no. (301) 272-6000

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

**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III  Yes  No

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

SEE SCHEDULE O

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

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

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

If "Yes," describe these changes on Schedule O.

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

**4a** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )  
ORGANIZED WORKERS FOR THE ECONOMIC AND SOCIAL ADVANCEMENT OF THE CONDITIONS AND STATUS OF THE OVERALL MEMBERSHIP.

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

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

**4d** Other program services (Describe in Schedule O.)  
(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Question text, and Yes/No response columns. Rows include questions 1 through 21 regarding organizational requirements and reporting.

**Part IV Checklist of Required Schedules (continued)**

		Yes	No
<b>22</b>	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .		No
<b>23</b>	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	Yes	
<b>24a</b>	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .		No
<b>24b</b>	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		
<b>24c</b>	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		
<b>24d</b>	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a</b>	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .		
<b>25b</b>	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		
<b>26</b>	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons?		No
<b>27</b>	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> . . . . .		No
<b>28</b>	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>28a</b>	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		No
<b>28b</b>	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	Yes	
<b>28c</b>	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		No
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .		No
<b>30</b>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions?		No
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
<b>32</b>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .		No
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?		No
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	Yes	
<b>35a</b>	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
<b>35b</b>	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	Yes	
<b>36</b>	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .		
<b>37</b>	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .		No
<b>38</b>	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O. . . . .	Yes	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Main form area containing questions 2a through 16, with sub-questions and corresponding answer boxes. Includes questions about employee reporting, federal employment tax returns, unrelated business gross income, foreign country accounts, prohibited tax shelter transactions, annual gross receipts, deductible contributions, sponsoring organizations, and charitable trusts.

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

Section A. Governing Body and Management

Table with 3 main columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 104; 1b Enter the number of voting members included in line 1a... 56; 2 Did any officer, director, trustee, or key employee have a family relationship...; 3 Did the organization delegate control over management duties...; 4 Did the organization make any significant changes to its governing documents...; 5 Did the organization become aware during the year of a significant diversion of the organization's assets...; 6 Did the organization have members or stockholders...; 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...; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body...; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 8a The governing body?; 8b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

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

Table with 3 main columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 2 main columns: Question, Answer. Rows include: 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-A 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: LORI ORME 25 WEST 18TH STREET NEW YORK, NY 10011 (212) 388-2051

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KYLE BRAGG PRESIDENT	40.0 0.0	X		X				218,172	0	70,780
(2) LARRY ENGELSTEIN SECRETARY TREASURER	40.0 0.0	X		X				193,086	0	61,261
(3) DAVID PROUTY GENERAL COUNSEL	40.0 0.0					X		188,584	0	59,687
(4) BRENT GARREN DEPUTY GENERAL COUNSEL	40.0 0.0					X		179,105	0	57,940
(5) ROBERT HILL VICE PRESIDENT	40.0 0.0	X		X				167,736	0	59,808
(6) ERNIE BENNETT DISTRICT LEADER	40.0 0.0	X		X				143,371	0	77,034
(7) JAMES WHITEHEAD ASSISTANT DISTRICT LEADER	40.0 0.0	X		X				140,214	0	76,717
(8) LENORE FRIEDLAENDER ASST TO THE PRESIDENT	40.0 0.0	X		X				155,224	0	57,989
(9) ELIZABETH BAKER DISTRICT LEADER	40.0 0.0	X		X				157,395	0	53,612
(10) ANDREW STROM SR ASSOC GENERAL COUNSEL	40.0 0.0					X		156,794	0	53,638
(11) KATCHEN LOCKE ASSOCIATE GENERAL COUNSEL	40.0 0.0					X		156,076	0	53,539
(12) JESSICA OCHS ASSOCIATE GENERAL COUNSEL	40.0 0.0					X		154,655	0	53,085
(13) JUAN HERNANDEZ VICE PRESIDENT	40.0 0.0	X		X				145,999	0	55,661
(14) KEVIN BROWN VICE PRESIDENT	40.0 0.0	X		X				145,867	0	55,549
(15) JOHN SANTOS VICE PRESIDENT	40.0 0.0	X		X				145,760	0	55,549
(16) SHIRLEY ALDEBOL VICE PRESIDENT	40.0 0.0	X		X				145,666	0	55,549
(17) DENIS JOHNSTON VICE PRESIDENT	40.0 0.0	X		X				143,214	0	55,549

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee			
(18) JAIME CONTRERAS VICE PRESIDENT	40.0	X	X			146,393	0	49,374	
(19) EMANUEL PASTREICH VICE PRESIDENT	40.0	X	X			146,523	0	49,186	
(20) GABRIEL MORGAN VICE PRESIDENT	40.0	X	X			146,384	0	47,946	
(21) ROXANA RIVERA VICE PRESIDENT	40.0	X	X			141,189	0	49,205	
(22) KEVIN STAVRIS DISTRICT LEADER	40.0	X	X			130,143	0	52,355	
(23) CANDIS TOLLIVER VICE PRESIDENT	40.0	X	X			133,151	0	47,885	
(24) MARIA NARANJO DISTRICT LEADER	40.0	X	X			131,935	0	46,406	
(25) MARGARITA ALONZO AT-LARGE BOARD MEMBER	40.0	X	X			125,271	0	51,003	
(26) WAYNE MACMANIMAN JR AT-LARGE BOARD MEMBER	40.0	X	X			133,340	0	42,685	
(27) GENE SZYMANSKI DISTRICT LEADER	40.0	X	X			120,333	0	50,126	
(28) TIMOTHY MCGRATH DISTRICT LEADER	40.0	X	X			115,350	0	48,951	
(29) ALBERTO BERNARDEZ DISTRICT LEADER	40.0	X	X			114,742	0	48,951	
(30) DANIEL NICOLAI DISTRICT LEADER	40.0	X	X			119,909	0	43,484	
(31) TODD JENNINGS ASSISTANT DISTRICT LEADER	40.0	X	X			113,845	0	49,018	
(32) JOHNNIE PATTERSON DISTRICT LEADER	40.0	X	X			113,505	0	48,950	
(33) WILSON MONTALVO ASSISTANT DISTRICT LEADER	40.0	X	X			113,507	0	48,143	
(34) GERARD MCENEANEY AT-LARGE BOARD MEMBER	40.0	X	X			110,908	0	48,951	
(35) SAMUEL WILLIAMSON DISTRICT LEADER	40.0	X	X			117,148	0	41,759	
(36) ANGELO PETITTO DISTRICT LEADER	40.0	X	X			109,592	0	47,943	
(37) OTONIEL FIGUEROA-DURAN ASSISTANT DISTRICT LEADER	40.0	X	X			113,844	0	42,674	
(38) DAISY CRUZ DISTRICT LEADER	40.0	X	X			115,584	0	39,467	
(39) DONOVAN COLE DISTRICT LEADER	40.0	X	X			105,909	0	48,431	
(40) LUZ GARATE DISTRICT LEADER	40.0	X	X			106,590	0	47,465	
(41) SUZANNE SHERMAN DISTRICT LEADER	40.0	X	X			103,372	0	47,943	
(42) ISRAEL MELENDEZ JR DISTRICT LEADER	40.0	X	X			108,572	0	41,768	
(43) TIMOTHY FINUCAN AT-LARGE BOARD MEMBER	40.0	X	X			112,043	0	38,272	
(44) PHOEBE SCHELL ASSISTANT DISTRICT LEADER	40.0	X	X			107,066	0	41,463	
(45) GLADYS SANCHEZ ASSISTANT DISTRICT LEADER	40.0	X	X			99,652	0	46,104	
(46) MAURICIO LOPEZ ASSISTANT DISTRICT LEADER	40.0	X	X			99,707	0	39,929	
(47) DIMAS DIAZ AT-LARGE BOARD MEMBER	40.0	X	X			99,649	0	39,929	
(48) GABRIEL ACOSTA AT-LARGE BOARD MEMBER	40.0	X	X			90,994	0	38,129	
(49) ROCHELLE PALACHE ASSISTANT DISTRICT LEADER	40.0	X	X			90,966	0	37,866	
(50) FERNANDO CRUZ DISTRICT BOARD MEMBER	3.0	X	X			20,831	0	5,390	
(51) LEMOYNE MILES DISTRICT BOARD MEMBER	3.0	X	X			14,250	0	0	
(52) DELROY DAWKINS DISTRICT BOARD MEMBER	3.0	X	X			10,043	0	2,226	
(53) CAONABO MERCADO DISTRICT BOARD MEMBER	3.0	X	X			9,565	0	1,443	
(54) JUDITH HOWELL DISTRICT BOARD MEMBER	3.0	X	X			9,978	0	172	
(55) VANCE NILES DISTRICT BOARD MEMBER	3.0	X	X			7,986	0	739	
(56) DONALD KILLINGS AT-LARGE BOARD MEMBER	3.0	X	X			7,032	0	1,547	
(57) COURTLAND GREEN DISTRICT BOARD MEMBER	3.0	X	X			6,058	0	415	
(58) MIGUEL NETO DISTRICT BOARD MEMBER	3.0	X	X			4,197	0	0	
(59) RICARDO BUCHANAN DISTRICT BOARD MEMBER	3.0	X	X			4,155	0	0	
(60) LUISA LAZO ASSISTANT DISTRICT LEADER	3.0	X	X			4,075	0	0	
(61) JANET BARAHONA DISTRICT BOARD MEMBER	3.0	X	X			3,787	0	0	
(62) NIGEL NILES DISTRICT BOARD MEMBER	3.0	X	X			3,587	0	0	
(63) NEIL CUNNINGHAM DISTRICT BOARD MEMBER	3.0	X	X			3,303	0	0	
(64) ITALA MARZULLO DISTRICT BOARD MEMBER	3.0	X	X			3,188	0	0	
(65) SUZANA GJONI AT-LARGE BOARD MEMBER	3.0	X	X			3,148	0	0	
(66) DONALD MCCAFFREY ASSISTANT DISTRICT LEADER	3.0	X	X			3,148	0	0	
(67) ABEL RODRIGUEZ ASSISTANT DISTRICT LEADER	3.0	X	X			3,148	0	0	
(68) CRAIG TSOURISTAKIS DISTRICT BOARD MEMBER	3.0	X	X			3,148	0	0	
(69) ERIC THOMPSON AT-LARGE BOARD MEMBER	3.0	X	X			3,088	0	0	
(70) ANNA LUCZAJ DISTRICT BOARD MEMBER	3.0	X	X			3,086	0	0	
(71) SOFIA JOYA ASSISTANT DISTRICT LEADER	3.0	X	X			2,958	0	0	
(72) SABRINA LADSON DISTRICT BOARD MEMBER	3.0	X	X			2,841	0	0	
(73) EDERLE VAUGHAN DISTRICT BOARD MEMBER	3.0	X	X			2,826	0	0	
(74) BETTINA MAYORGA DISTRICT BOARD MEMBER	3.0	X	X			2,785	0	0	
(75) DONNA PEREZ DISTRICT BOARD MEMBER	3.0	X	X			2,777	0	0	
(76) JULIA RODRIGUEZ DISTRICT BOARD MEMBER	3.0	X	X			2,748	0	0	
(77) JACQUELINE WESLEY DISTRICT BOARD MEMBER	3.0	X	X			2,581	0	0	
(78) AURELIA BROWN DISTRICT BOARD MEMBER	3.0	X	X			2,573	0	0	
(79) MARGARITA RESTREPO DISTRICT BOARD MEMBER	3.0	X	X			2,571	0	0	
(80) WALLACE JONES ASSISTANT DISTRICT LEADER	3.0	X	X			2,556	0	0	
(81) JOSE BARRAZA DISTRICT BOARD MEMBER	3.0	X	X			2,511	0	0	
(82) MARA MORALES DISTRICT BOARD MEMBER	3.0	X	X			2,448	0	0	
(83) JUANITA ACREE ASSISTANT DISTRICT LEADER	3.0	X	X			2,400	0	0	
(84) RICHARD BONNETTE DISTRICT BOARD MEMBER	3.0	X	X			2,400	0	0	
(85) MICHAEL BROWN DISTRICT BOARD MEMBER	3.0	X	X			2,400	0	0	
(86) JORGE CABRERA DISTRICT BOARD MEMBER	3.0	X	X			2,400	0	0	
(87) CELSA DEL POZO DISTRICT BOARD MEMBER	3.0	X	X			2,400	0	0	
(88) JOHN EGAN AT-LARGE BOARD MEMBER	3.0	X	X			2,400	0	0	
(89) DWAYNE FERNANDEZ DISTRICT BOARD MEMBER	3.0	X	X			2,400	0	0	
(90) ROSA GITTENS DISTRICT BOARD MEMBER	3.0	X	X			2,400	0	0	
(91) JUSTINO GOMEZ DISTRICT BOARD MEMBER	3.0	X	X			2,400	0	0	
(92) LUZ HURTADO DISTRICT BOARD MEMBER	3.0	X	X			2,400	0	0	
(93) DONNA KELLY DISTRICT BOARD MEMBER	3.0	X	X			2,400	0	0	
(94) TATJANA LAMBERT DISTRICT BOARD MEMBER	3.0	X	X			2,400	0	0	
(95) ELPIDIO MOLINA AT-LARGE BOARD MEMBER	3.0	X	X			2,400	0	0	
(96) JULIANA PETERS DISTRICT BOARD MEMBER	3.0	X	X			2,400	0	0	
(97) TROY ROBERTSON DISTRICT BOARD MEMBER	3.0	X	X			2,400	0	0	
(98) ALFREDA SIMPKINS DISTRICT BOARD MEMBER	3.0	X	X			2,400	0	0	
(99) JOSE VENTURA MACHADO DISTRICT BOARD MEMBER	3.0	X	X			2,400	0	0	
(100) ZORAIDA RODRIGUEZ ASSISTANT DISTRICT LEADER	3.0	X	X			2,200	0	0	
(101) LEROY WARRYTON DISTRICT BOARD MEMBER	3.0	X	X			2,200	0	0	
(102) LEROY ABRAMSON AT-LARGE BOARD MEMBER	3.0	X	X			2,000	0	0	
(103) MIRYAM DE RUIZ DISTRICT BOARD MEMBER	3.0	X	X			2,000	0	0	
(104) FRANCIS MARTINEZ DISTRICT BOARD MEMBER	3.0	X	X			1,400	0	0	
(105) JAMES BRENNAN DISTRICT BOARD MEMBER	3.0	X	X			600	0	0	
(106) STEVEN KELLEY DISTRICT BOARD MEMBER	3.0	X	X			434	0	44	
(107) DEAN DEVITA VICE PRESIDENT	3.0	X	X			0	0	0	
(108) TRACY JAMES DISTRICT BOARD MEMBER	3.0	X	X			0	0	0	
(109) JIM LARREAU DISTRICT BOARD MEMBER	3.0	X	X			0	0	0	
(110) LARRY MCNEIL NON-VOTING	3.0	X	X			0	0	0	
(111) PAMELA RALL-JOHNSTON ASSISTANT DISTRICT LEADER	3.0	X	X			0	0	0	
(112) ROBERT SMITH DISTRICT BOARD MEMBER	3.0	X	X			0	0	0	
(113) JOHN THACKER VICE PRESIDENT	3.0	X	X			0	0	0	
<b>1b Sub-Total</b>									
<b>c Total for continuation sheets to Part VII, Section A</b>									
<b>d Total (add lines 1b and 1c)</b>						3,837,907	0	1,406,307	
<b>2</b>	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization <b>▶ 1 1 2</b>								
<b>3</b>	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		<b>Yes</b>	<b>No</b>					
<b>4</b>	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>								
<b>5</b>	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>								

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
CRS LAKESIDE HILL LLC, 1 CORPORATE DRIVE NORTH HAVEN, CT 06473	CONSTRUCTION	868,313
WITHUMSMITHBROWN PC, 4600 EAST WEST HIGHWAY SUITE 900 BETHESDA, MD 20814	ACCOUNTING SERVICES	370,000
GLADSTEIN REIF MEGINNISS LLP, 817 BROADWAY FL 6 NEW YORK, NY 10003	LEGAL SERVICES	248,706
SPEAR WILDERMAN PC, 230 SOUTH BROAD STREET 1400 PHILADELPHIA, PA 19102	LEGAL SERVICES	209,995
HH GRAPHIC PRINTING COMMUNICATION, 400 GOTHAM PARKWAY CARLSTADT, NJ 07072	PRINTING SERVICES	157,799

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **▶ 1 1**

**Part VIII Statement of Revenue**

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . .	<b>1a</b>			
	<b>b</b> Membership dues . . .	<b>1b</b>			
	<b>c</b> Fundraising events . . .	<b>1c</b>			
	<b>d</b> Related organizations	<b>1d</b>			
	<b>e</b> Government grants (contributions)	<b>1e</b>			
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>			
<b>g</b> Noncash contributions included in lines 1a - 1f:\$	<b>1g</b>				
<b>h Total.</b> Add lines 1a-1f . . . . .			0		

<b>Program Service Revenue</b>			Business Code			
	<b>2a</b> MEMBERSHIP DUES		900099	97,608,113	97,608,113	
<b>b</b> 103A-ORG. SUBSIDIES		900099	11,368,994	11,368,994		
<b>c</b>						
<b>d</b>						
<b>e</b>						
<b>f</b> All other program service revenue.						
<b>g Total.</b> Add lines 2a-2f. . . . .			108,977,107			

<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		331,853			331,853	
	<b>4</b> Income from investment of tax-exempt bond proceeds		0				
	<b>5</b> Royalties . . . . .		0				
	<b>6a</b> Gross rents	(i) Real					
		(ii) Personal					
		<b>6b</b> Less: rental expenses					
		<b>6c</b> Rental income or (loss)	0	0			
	<b>d</b> Net rental income or (loss) . . . . .		0				
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	9,130,898				
		(ii) Other					
<b>7b</b> Less: cost or other basis and sales expenses		9,016,306					
<b>7c</b> Gain or (loss)		114,592					
<b>d</b> Net gain or (loss) . . . . .		114,592			114,592		
<b>8a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 . . . . .	<b>8a</b>	0					
	<b>8b</b> Less: direct expenses	0					
	<b>c</b> Net income or (loss) from fundraising events . . . . .		0				
<b>9a</b> Gross income from gaming activities. See Part IV, line 19 . . . . .	<b>9a</b>	0					
	<b>9b</b> Less: direct expenses	0					
	<b>c</b> Net income or (loss) from gaming activities . . . . .		0				
<b>10a</b> Gross sales of inventory, less							

returns and allowances . . .	<b>10a</b>	0			
<b>b</b> Less: cost of goods sold	<b>10b</b>	0			
<b>c</b> Net income or (loss) from sales of inventory . . .			0		
Miscellaneous Revenue	Business Code				
<b>11a</b> PER CAPITA REBATE	900099	2,470,679	2,470,679		
<b>b</b> REIMBURSEMENTS OF IN-KIND	900099	619,394	619,394		
<b>c</b> EXEMPT AFFILIATES RENT REIMBURSEMENTS	900099	415,780	415,780		
<b>d</b> All other revenue . . . . .		268,723			268,723
<b>e Total.</b> Add lines 11a-11d . . . . .		3,774,576			
<b>12 Total revenue.</b> See instructions . . . . .		113,198,128	112,482,960		715,168

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).  
 Check if Schedule O contains a response or note to any line in this Part IX

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	175,537			
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	0			
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0			
<b>4</b> Benefits paid to or for members	0			
<b>5</b> Compensation of current officers, directors, trustees, and key employees	7,820,849			
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
<b>7</b> Other salaries and wages	36,209,368			
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	7,025,331			
<b>9</b> Other employee benefits	9,311,296			
<b>10</b> Payroll taxes	3,401,779			
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management	0			
<b>b</b> Legal	755,688			
<b>c</b> Accounting	320,000			
<b>d</b> Lobbying	56,625			
<b>e</b> Professional fundraising services. See Part IV, line 17	0			
<b>f</b> Investment management fees	250,797			
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,049,468			
<b>12</b> Advertising and promotion	761,618			
<b>13</b> Office expenses	1,889,009			
<b>14</b> Information technology	20,883			
<b>15</b> Royalties	0			
<b>16</b> Occupancy	11,081,113			
<b>17</b> Travel	643,959			
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
<b>19</b> Conferences, conventions, and meetings	211,826			
<b>20</b> Interest	0			
<b>21</b> Payments to affiliates	21,592,615			
<b>22</b> Depreciation, depletion, and amortization	1,026,197			
<b>23</b> Insurance	320,492			
<b>24</b> 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.)				
<b>a</b> NON FEDERAL PAC FUNDING	1,293,000			
<b>b</b> SHOP STEWARD ALLOWANCES	867,880			
<b>c</b> ELECTORAL CAMPAIGNS	488,399			
<b>d</b> BARGAINING EXPENSES	377,333			
<b>e</b> All other expenses	134,486			
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e	107,085,548			
<b>26</b> <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

Table with columns (A) Beginning of year, (B) End of year, and rows for Assets (1-16), Liabilities (17-26), and Net Assets or Fund Balances (27-33).

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	113,198,128
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	107,085,548
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	6,112,580
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	12,496,657
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	903,648
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	-3,473,463
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (A))	<b>10</b>	16,039,422

**Part XII Financial Statements and Reporting**

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

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

**Additional Data**

**Return to Form**

**Software ID:**

**Software Version:**

**Form 990, Special Condition Description:**

**Special Condition Description**

**2020**

**Open to Public Inspection**

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

**Political Campaign and Lobbying Activities**

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

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Department of the Treasury  
Internal Revenue Service

**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-A.

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization  
Service Employees International Union Local  
32BJ

**Employer identification number**

13-0535740

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

- 1** Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")
- 2** Political campaign activity expenditures (see instructions) ..... ▶ \$ \_\_\_\_\_
- 3** Volunteer hours for political campaign activities (see instructions) ..... 97,936

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

- 1** Enter the amount of any excise tax incurred by the organization under section 4955 ..... \$ \_\_\_\_\_
- 2** Enter the amount of any excise tax incurred by organization managers under section 4955 ..... \$ \_\_\_\_\_
- 3** If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No
- 4a** Was a correction made? .....  Yes  No
- b** If "Yes," describe in Part IV.

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

- 1** Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... \$ \_\_\_\_\_
- 2** Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 3** Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b..... \$ \_\_\_\_\_
- 4** Did the filing organization file **Form 1120-POL** for this year? .....  Yes  No
- 5** Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1) 32BJ UNITED ADF	25 WEST 18TH STREET NEW YORK, NY 10011	55-0843735		1,193,000
(2) EMPIRE STATE 32BJ SEIU PAC	25 WEST 18TH STREET NEW YORK, NY 10011	26-3620161		75,000
(3) SEIU COMMITTEE ON POLITICAL EDUCATION	1800 MASSACHUSETTS AVE NW WASHINGTON, DC 20036	20-0859683		916,787
(4) SEIU LOCAL 32BJ CONNECTICUT PAC	885 WETHERSFIELD AVE HARTFORD, CT 06114	13-4195531		25,000
5				
6				

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

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

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) .....														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....														
<b>d</b> Other exempt purpose expenditures .....														
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....														
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:65%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....														
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....														
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....														
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No													

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

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

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

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

	(a)		(b)
	Yes	No	Amount
<b>1</b> 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:			
<b>a</b> Volunteers? .....			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .....			
<b>c</b> Media advertisements? .....			
<b>d</b> Mailings to members, legislators, or the public? .....			
<b>e</b> Publications, or published or broadcast statements? .....			
<b>f</b> Grants to other organizations for lobbying purposes? .....			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....			
<b>i</b> Other activities? .....			
<b>j</b> Total. Add lines 1c through 1i .....			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

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

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

<b>1</b> Dues, assessments and similar amounts from members .....	<b>1</b>	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures ( <b>do not include amounts of political expenses for which the section 527(f) tax was paid</b> ).		
<b>a</b> Current year .....	<b>2a</b>	
<b>b</b> Carryover from last year .....	<b>2b</b>	
<b>c</b> Total .....	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	<b>3</b>	
<b>4</b> 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? .....	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions) .....	<b>5</b>	

**Part IV Supplemental Information**

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

Return Reference	Explanation
PART I-A, LINE 2 - DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES:	TO IMPROVE MEMBER WAGES, BENEFITS AND WORKING CONDITIONS THROUGH POLITICAL LOBBYING EFFORTS.

**Additional Data**

**Return to Form**

**Software ID:**

**Software Version:**

Supplemental Financial Statements

2020

Open to Public Inspection

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.

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

Department of the Treasury Internal Revenue Service

Name of the organization Service Employees International Union Local 32BJ

Employer identification number 13-0535740

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor advisement.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form for Part II Conservation Easements. Includes questions about purpose of easements, number of easements, acreage, and monitoring expenses. Includes a table for 'Held at the End of the Year' with rows 2a, 2b, 2c, 2d.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting requirements and amounts for art and historical treasures.

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange programs
  - e**  Other .....
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . .  **Yes**  **No**

**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . . .  **Yes**  **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- |  | Amount    |
|--|-----------|
| <b>c</b> Beginning balance . . . . .             | <b>1c</b> |
| <b>d</b> Additions during the year . . . . .     | <b>1d</b> |
| <b>e</b> Distributions during the year . . . . . | <b>1e</b> |
| <b>f</b> Ending balance . . . . .                | <b>1f</b> |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  **Yes**  **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII . . . .

**Part V Endowment Funds.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance . . . . .					
<b>b</b> Contributions . . . . .					
<b>c</b> Net investment earnings, gains, and losses					
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .					
<b>f</b> Administrative expenses . . . . .					
<b>g</b> End of year balance . . . . .					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ .....
  - b** Permanent endowment ▶ .....
  - c** Term endowment ▶ .....
- The percentages on lines 2a, 2b, and 2c should equal 100%.

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** Unrelated organizations . . . . .
- (ii)** Related organizations . . . . .

	Yes	No
<b>3a(i)</b>		
<b>3a(ii)</b>		
<b>3b</b>		

- b** If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . .
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .		190,480		190,480
<b>b</b> Buildings . . . . .		1,311,213	8,405	1,302,808
<b>c</b> Leasehold improvements		1,789,782	615,758	1,174,024
<b>d</b> Equipment . . . . .		9,099,496	8,263,291	836,205
<b>e</b> Other . . . . .		3,131,682	2,529,441	602,241
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				4,105,758

**Part VII Investments—Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

**Part VIII Investments—Program Related.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

**Part IX Other Assets.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

**Part X Other Liabilities.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 25.)	3,299,832

**2.** Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

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

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

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

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

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

**Part XIII Supplemental Information**

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

Return Reference	Explanation
PART X, LINE 2 - FIN 48 FOOTNOTE:	U.S. GAAP requires management to evaluate income tax positions taken and accrue an income tax liability if the Local has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. Management has evaluated the income tax positions taken and concluded that as of December 31, 2020, there are no uncertain positions taken or expected to be taken that would require recognition of a liability in the consolidated financial statements. The Local is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. In addition, there have been no tax related interest or penalties for the period presented in these financial statements. Should such penalties and interest be incurred, the Local's policy is to recognize them as operating expenses.

## **Additional Data**

[\*\*Return to Form\*\*](#)

**Software ID:**

**Software Version:**

**Schedule I  
(Form 990)**

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

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Department of the  
Treasury  
Internal Revenue Service

Name of the organization  
Service Employees International Union Local  
32BJ

**Employer identification number**  
13-0535740

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) OUTREACH PROJECT 117-11 MYRTLE AVE RICHMOND HILL, NY 11418	11-2621537	501(C)(3)	7,500				GENERAL SUPPORT
(2) REAL ESTATE BOARD OF NY INC 570 LEXINGTON AVENUE NEW YORK, NY 10022	13-1201480	501(C)(6)	14,900				GENERAL SUPPORT
(3) THE PEGGY BROWNING FUND 1528 WALNUT STREET PHILADELPHIA, PA 19102	23-2887086	501(C)(3)	10,000				GENERAL SUPPORT
(4) SERVICE EMPLOYEES INTERNATIONAL UNION 1800 MASS AVE NW WASHINGTON, DC 20036	36-0852885	501(C)(5)	10,000				DISASTER RELIEF
(5) NEW DIRECTION NJ 60 COLUMBIA RD B 230 MORRISTOWN, NJ 07960	82-3902128	501(C)(4)	50,000				GENERAL SUPPORT
(6) THE NEW SCHOOL 66 W 12TH ST NEW YORK, NY 10001	13-3297197	501(c)(3)	15,000				GENERAL SUPPORT
(7) CELEBRATE NEW JERSEY NOW 494 BROAD STREET NEWARK, NJ 07102	81-1594868	501(C)(4)	10,000				GENERAL SUPPORT
(8) NATIONAL CONSUMERS LEAGUE 1701 K STREET NW STE 1200 WASHINGTON, DC 20006	53-0242038	501(C)(3)	10,000				GENERAL SUPPORT
(9) NEIGHBORHOOD HOUSING SERVICES 89-70 162 STREET JAMAICA, NY 11432	23-7398279	501(C)(3)	5,350				GENERAL SUPPORT

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 5
- 3** Enter total number of other organizations listed in the line 1 table 4

**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

**Part IV Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS:	THE UNION MAKES GRANTS TO ALLIED ORGANIZATIONS WITH PROGRAMS THAT ARE CONSISTENT WITH 32BJ'S MISSION AND GOALS. THE UNION DOES TAKE ACCOUNT OF EACH ORGANIZATION'S PROGRAM; HOWEVER, THE FUNDS GRANTED TO OTHER ORGANIZATIONS ARE NOT MONITORED.

**Additional Data**

[Return to Form](#)

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

**Schedule J**  
**(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**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.**
- ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

**2020**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
Service Employees International Union Local  
32BJ

Employer identification number  
13-0535740

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |   |  |
|---|--|
| <input type="checkbox"/> First-class or charter travel            | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                    | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax idemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account           | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

**b** If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |  |   |
|--|---|
| <input type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study                               |
| <input type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
  - b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
  - c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
  - b** Any related organization?
- If "Yes," on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
  - b** Any related organization?
- If "Yes," on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a		No
4b		No
4c		No
5a		
5b		
6a		
6b		
7		
8		
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 instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

**Note.** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 KYLE BRAGG PRESIDENT	(i)	209,288		8,884	49,915	22,507	290,594	0
	(ii)	0			0	0	0	0
2 LARRY ENGELSTEIN SECRETARY TREASURER	(i)	192,974		112	40,396	20,865	254,347	0
	(ii)	0			0	0	0	0
3 DAVID PROUTY GENERAL COUNSEL	(i)	185,385		3,199	38,822	22,422	249,828	0
	(ii)	0			0	0	0	0
4 BRENT GARREN DEPUTY GENERAL COUNSEL	(i)	176,896		2,209	37,075	22,387	238,567	0
	(ii)	0			0	0	0	0
5 ROBERT HILL VICE PRESIDENT	(i)	155,965		11,771	38,943	22,302	228,981	0
	(ii)	0			0	0	0	0
6 ERNIE BENNETT DISTRICT LEADER	(i)	132,971		10,400	34,999	42,035	220,405	0
	(ii)	0			0	0	0	0
7 JAMES WHITEHEAD ASSISTANT DISTRICT LEADER	(i)	129,814		10,400	34,643	42,074	216,931	0
	(ii)	0			0	0	0	0
8 LENORE FRIEDLAENDER ASST TO THE PRESIDENT	(i)	147,125		8,099	37,124	22,205	214,553	0
	(ii)	0			0	0	0	0
9 ELIZABETH BAKER DISTRICT LEADER	(i)	155,864		1,531	32,747	22,276	212,418	0
	(ii)	0			0	0	0	0
10 ANDREW STROM SR ASSOC GENERAL COUNSEL	(i)	155,992		802	32,773	22,293	211,860	0
	(ii)	0			0	0	0	0
11 KATCHEN LOCKE ASSOCIATE GENERAL COUNSEL	(i)	155,509		567	32,674	22,313	211,063	0
	(ii)	0			0	0	0	0
12 JESSICA OCHS ASSOCIATE GENERAL COUNSEL	(i)	153,302		1,353	32,220	22,260	209,135	0
	(ii)	0			0	0	0	0
13 JUAN HERNANDEZ VICE PRESIDENT	(i)	135,175		10,824	34,796	22,083	202,878	0
	(ii)	0			0	0	0	0
14 KEVIN BROWN VICE PRESIDENT	(i)	135,266		10,601	34,684	22,111	202,662	0
	(ii)	0			0	0	0	0
15 JOHN SANTOS VICE PRESIDENT	(i)	135,266		10,494	34,684	22,130	202,574	0
	(ii)	0			0	0	0	0
16 SHIRLEY ALDEBOL VICE PRESIDENT	(i)	135,266		10,400	34,684	22,151	202,501	0
	(ii)	0			0	0	0	0
17 DENIS JOHNSTON VICE PRESIDENT	(i)	135,266		7,948	34,684	22,147	200,045	0
	(ii)	0			0	0	0	0
18 JAIME CONTRERAS VICE PRESIDENT	(i)	135,266		11,127	28,509	22,151	197,053	0
	(ii)	0			0	0	0	0
19 EMANUEL PASTREICH VICE PRESIDENT	(i)	134,355		12,168	28,321	22,117	196,961	0
	(ii)	0			0	0	0	0
20 GABRIEL MORGAN VICE PRESIDENT	(i)	135,266		11,118	28,509	20,723	195,616	0
	(ii)	0			0	0	0	0
21 ROXANA RIVERA VICE PRESIDENT	(i)	135,266		5,923	28,509	21,968	191,666	0
	(ii)	0			0	0	0	0
22 KEVIN STAVRIS DISTRICT LEADER	(i)	119,743		10,400	31,490	22,016	183,649	0
	(ii)	0			0	0	0	0
23 CANDIS TOLLIVER VICE PRESIDENT	(i)	128,178		4,973	27,020	22,107	182,278	0
	(ii)	0			0	0	0	0
24 MARIA NARANJO DISTRICT LEADER	(i)	120,840		11,095	25,541	22,007	179,483	0
	(ii)	0			0	0	0	0
25 MARGARITA ALONZO AT-LARGE BOARD MEMBER	(i)	113,173		12,098	30,138	21,929	177,338	0
	(ii)	0			0	0	0	0
26 WAYNE MACMANIMAN JR AT-LARGE BOARD MEMBER	(i)	120,840		12,500	25,540	18,288	177,168	0
	(ii)	0			0	0	0	0
27 GENE SZYMANSKI DISTRICT LEADER	(i)	108,913		11,420	29,261	21,910	171,504	0
	(ii)	0			0	0	0	0
28 TIMOTHY MCGRATH DISTRICT LEADER	(i)	103,107		12,243	28,086	21,804	165,240	0
	(ii)	0			0	0	0	0
29 ALBERTO BERNARDEZ DISTRICT LEADER	(i)	103,107		11,635	28,086	21,827	164,655	0
	(ii)	0			0	0	0	0
30 DANIEL NICOLAI DISTRICT LEADER	(i)	107,464		12,445	22,788	21,725	164,422	0
	(ii)	0			0	0	0	0
31 TODD JENNINGS ASSISTANT DISTRICT LEADER	(i)	103,445		10,400	28,153	21,878	163,876	0
	(ii)	0			0	0	0	0
32 JOHNNIE PATTERSON DISTRICT LEADER	(i)	103,105		10,400	28,085	21,826	163,416	0
	(ii)	0			0	0	0	0
33 WILSON MONTALVO ASSISTANT DISTRICT LEADER	(i)	103,107		10,400	27,278	21,805	162,590	0
	(ii)	0			0	0	0	0
34 GERARD MCNEANEY AT-LARGE BOARD MEMBER	(i)	103,108		7,800	28,086	21,827	160,821	0
	(ii)	0			0	0	0	0
35 SAMUEL WILLIAMSON DISTRICT LEADER	(i)	105,174		11,974	22,322	20,453	159,923	0
	(ii)	0			0	0	0	0
36 ANGELO PETITTO DISTRICT LEADER	(i)	98,172		11,420	27,078	21,803	158,473	0
	(ii)	0			0	0	0	0
37 OTONIEL FIGUEROA-DURAN ASSISTANT DISTRICT LEADER	(i)	103,444		10,400	21,978	21,712	157,534	0
	(ii)	0			0	0	0	0
38 DAISY CRUZ DISTRICT LEADER	(i)	105,174		10,410	22,322	18,215	156,121	0
	(ii)	0			0	0	0	0
39 DONOVAN COLE DISTRICT LEADER	(i)	100,539		5,370	27,566	21,768	155,243	0
	(ii)	0			0	0	0	0
40 LUZ GARATE DISTRICT LEADER	(i)	95,854		10,736	26,600	21,781	154,971	0
	(ii)	0			0	0	0	0
41 SUZANNE SHERMAN DISTRICT LEADER	(i)	98,172		5,200	27,078	21,816	152,266	0
	(ii)	0			0	0	0	0
42 ISRAEL MELENDEZ JR DISTRICT LEADER	(i)	98,172		10,400	20,903	21,839	151,314	0
	(ii)	0			0	0	0	0
43 TIMOTHY FINUCAN AT-LARGE BOARD MEMBER	(i)	99,259		12,784	21,127	18,106	151,276	0
	(ii)	0			0	0	0	0

**Part III Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
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## **Additional Data**

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**Software ID:**

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**Schedule L**  
(Form 990 or 990-EZ)

**Transactions with Interested Persons**

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**  
▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
Service Employees International Union Local  
32BJ

**Employer identification number**  
13-0535740

**Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).  
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

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

**Part II Loans to and/or From Interested Persons.**

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

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

**Total** . . . . . ▶ \$ \_\_\_\_\_

**Part III Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

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

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) MAKEBA TSOURISTAKIS	SPOUSE OF OFFICER, CRAIG TSOURISTAKIS	13,166	WAGES		No
(2) VIRDIANA DE GUADALUPE	SPOUSE OF OFFICER, DIMAS DIAZ	82,185	WAGES		No
(3) AUTUMN WEINTRAUB	SPOUSE OF OFFICER, ROBERT HILL	115,600	WAGES		No
(4) CHANTEL MELENDEZ	DAUGHTER OF OFFICER, ISRAEL MELENDEZ, JR.	45,795	WAGES		No

**Part V Supplemental Information**

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

Return Reference	Explanation
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## **Additional Data**

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**Software ID:**

**Software Version:**

**SCHEDULE O**  
**(Form 990 or 990-**  
**EZ)**

**Supplemental Information to Form 990 or 990-EZ**

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

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](http://www.irs.gov/Form990) for the latest information.

Department of the Treasury

Name of the organization

Service Employees International Union Local  
32BJ

Employer identification number

13-0535740

Return Reference	Explanation
PART III, LINE 1	ORGANIZATION'S MISSION: OUR MISSION IS TO BUILD AND GROW A DIVERSE, EFFECTIVE, POLITICALLY INDEPENDENT AND DEMOCRATIC ORGANIZATION OF WORKERS TO CHANGE OUR LIVES FOR THE BETTER, IMPROVE OUR COMMUNITIES, AND BUILD A MORE JUST SOCIETY FOR PRESENT AND FUTURE GENERATIONS. WE RECOGNIZE OUR SUCCESSES AND LEARN FROM OUR SETBACKS. WE STRIVE TO BE STRATEGIC, ORGANIZED, INCLUSIVE, HONEST, RESPECTFUL, OPTIMISTIC AND CONFIDENT.
PART VI, SECTION A, LINE 6	MEMBERS OF THE ORGANIZATION: THE FOLLOWING ARE ELIGIBLE FOR MEMBERSHIP: 1. PERSONS ENGAGED IN EMPLOYMENT OVER WHICH THE LOCAL UNION HAS JURISDICTION; 2. PERSONS CURRENTLY HOLDING ELECTIVE OFFICE WITHIN THE LOCAL UNION; 3. RETIRED MEMBERS RECEIVING A PENSION FROM ANY RELATED PENSION FUND; 4. MEMBERS WHO HAVE BEEN UNEMPLOYED FOR LESS THAN SIX (6) MONTHS; 5. PERSONS WHO HAVE BEEN A MEMBER OF THIS LOCAL UNION FOR AT LEAST TWENTY-FIVE (25) YEARS, AND 6. EMPLOYEES OF THE LOCAL UNION NOT COVERED BY THE COLLECTIVE BARGAINING AGREEMENTS BETWEEN THE LOCAL UNION AND ANOTHER UNION.
PART VI, SECTION A, LINE 7A	ELECTION OF GOVERNING BODY MEMBERS: THE MEMBERS OF THE LOCAL UNION ELECT THE OFFICERS AND OTHER OFFICIALS EVERY THREE YEARS. DURING THOSE YEARS IN WHICH NO GENERAL ELECTION IS SCHEDULED, IF THE OFFICE OF THE PRESIDENT IS VACANT, THEN THE EXECUTIVE VICE PRESIDENT SHALL ASSUME THE DUTIES OF THE OFFICE UNTIL A SUCCESSOR HAS BEEN NAMED. THE JOINT EXECUTIVE BOARD BY MAJORITY VOTE SHALL ELECT AND FILL THE OFFICE OF THE PRESIDENT DURING SUCH NON-MEMBERSHIP ELECTION YEARS. ALL OTHER OFFICER POSITIONS THAT ARE VACANT PRIOR TO THE GENERAL MEMBERSHIP ELECTION SHALL BE FILLED BY APPOINTMENT BY THE PRESIDENT SUBJECT TO THE APPROVAL OF A MAJORITY VOTE OF THE JOINT EXECUTIVE BOARD. ALTERNATIVELY, THE JOINT EXECUTIVE BOARD MAY IN SUCH A CIRCUMSTANCE ABOLISH THE OFFICE OR, IN THE EVENT OF AN EXECUTIVE POSITION, COMBINE ITS DUTIES WITH THAT OF ANOTHER EXECUTIVE OFFICE.
PART VI, SECTION A, LINE 7B	DECISIONS SUBJECT TO APPROVAL OF MEMBERS: MEMBERS OF THE LOCAL UNION SHALL VOTE ON ANY MOTION BEFORE THE GENERAL MEMBERSHIP AT THE GENERAL MEMBERSHIP MEETING FOR THEIR DISTRICT OR AREA. MEMBERS MAY ALSO ATTEND THOSE GENERAL MEMBERSHIP MEETINGS OUTSIDE THEIR DISTRICT IN ACCORDANCE WITH THE RULES ESTABLISHED BY THE JOINT EXECUTIVE BOARD. ANY PROPOSED MEMBER INITIATED AMENDMENTS TO THE BY-LAWS MUST BE SUPPORTED BY A PETITION SIGNED BY MEMBERS IN GOOD STANDING CONSISTING OF AT LEAST 10% OF THE LOCAL UNION'S MEMBERSHIP AND THEN SUBMITTED TO THE MEMBERSHIP FOR RATIFICATION.
PART VI, SECTION B, LINE 11B	FORM 990 REVIEW PROCESS: THE FORM 990 IS PROVIDED TO AND REVIEWED BY THE JOINT EXECUTIVE BOARD BEFORE IT IS FILED.
PART VI, SECTION C, LINE 12C	CONFLICT OF INTEREST POLICY COMPLIANCE: PRESENTED TO THE JOINT EXECUTIVE BOARD AND WE HAVE AN ETHICS LIASON WHO IS CHARGED WITH REVIEWING QUESTIONS AND CLAIMS REGARDING CONFLICTS OF INTEREST.
PART VI, SECTION C, LINE 19	AVAILABILITY OF GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS: THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC UPON REQUEST. REQUEST MAY BE MADE IN PERSON OR BY MAIL ADDRESSED TO THE CHIEF OF OPERATIONS AT THE ORGANIZATION'S PRINCIPAL OFFICE LOCATION.
PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS	\$ (3,473,463) BEGINNING OF YEAR NET ASSETS WITHOUT DONOR RESTRICTIONS RESTATED DUE TO CUMULATIVE EFFECT OF CHANGE IN ACCOUNTING PRINCIPLE - ADOPTION OF ASC 606.
PART XII, LINE 2C	COMMITTEE WITH OVERSIGHT ON FINANCIAL STATEMENT AUDIT: THE BOARD OF AUDITORS IS RESPONSIBLE FOR REVIEWING THE AUDITED FINANCIAL STATEMENTS AS PREPARED BY THE LOCAL UNION'S CERTIFIED PUBLIC ACCOUNTANTS.

## **Additional Data**

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**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
- ▶ Attach to Form 990.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization  
Service Employees International Union Local  
32BJ

**Employer identification number**

13-0535740

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

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

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
<b>(1)</b> ISLIP CORP 25 WEST 18TH STREET  NEW YORK, NY 10011 13-3592746	TITLE HLDG CO	NY	501(C)(2)		SEIU LU 32BJ	Yes	
<b>(2)</b> LOCAL 32BJ SEIU AMERICAN DREAM FUND 25 WEST 18TH STREET  NEW YORK, NY 10011 13-0535740	POLITICAL ORG	NY	527		SEIU LU 32BJ	Yes	
<b>(3)</b> 32BJ UNITED ADF 25 WEST 18TH STREET  NEW YORK, NY 10011 55-0843735	POLITICAL ORG	NY	527		SEIU LU 32BJ	Yes	
<b>(4)</b> SEIU LOCAL 32BJ CONNECTICUT PAC 885 WETHERSFIELD AVENUE  HARTFORD, CT 06114 13-4195531	POLITICAL ORG	CT	527		SEIU LU 32BJ	Yes	
<b>(5)</b> LOCAL 32BJ PA AMERICAN DREAM FUND 25 WEST 18TH STREET  NEW YORK, NY 10011 20-3276533	POLITICAL ORG	PA	527		SEIU LU 32BJ	Yes	
<b>(6)</b> EMPIRE STATE 32BJ SEIU PAC 25 WEST 18TH STREET  NEW YORK, NY 10011 26-3620161	POLITICAL ORG	NY	527		SEIU LU 32BJ	Yes	
<b>(7)</b> LOCAL 1201 SCHOOL EMPLOYEES PAC 455 N 5TH STREET  PHILADELPHIA, PA 19123 90-0046858	POLITICAL ORG	PA	527		SEIU LU 32BJ	Yes	

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)BJ TRANSPORTATION INC 25 WEST 18TH STREET NEW YORK, NY 10011 13-3798227	TRANSPORTATIO	NY	SEIU LOCAL 32BJ	C CORP			100.000 %	Yes	

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

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

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

- a** Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity . . . . .
- b** Gift, grant, or capital contribution to related organization(s) . . . . .
- c** Gift, grant, or capital contribution from related organization(s) . . . . .
- d** Loans or loan guarantees to or for related organization(s) . . . . .
- e** Loans or loan guarantees by related organization(s) . . . . .
- f** Dividends from related organization(s) . . . . .
- g** Sale of assets to related organization(s) . . . . .
- h** Purchase of assets from related organization(s) . . . . .
- i** Exchange of assets with related organization(s) . . . . .
- j** Lease of facilities, equipment, or other assets to related organization(s) . . . . .
- k** Lease of facilities, equipment, or other assets from related organization(s) . . . . .
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s) . . . . .
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .
- o** Sharing of paid employees with related organization(s) . . . . .
- p** Reimbursement paid to related organization(s) for expenses . . . . .
- q** Reimbursement paid by related organization(s) for expenses . . . . .
- r** Other transfer of cash or property to related organization(s) . . . . .
- s** Other transfer of cash or property from related organization(s) . . . . .

	Yes	No
<b>1a</b>		No
<b>1b</b>		No
<b>1c</b>		No
<b>1d</b>		No
<b>1e</b>		No
<b>1f</b>		No
<b>1g</b>		No
<b>1h</b>		No
<b>1i</b>		No
<b>1j</b>		No
<b>1k</b>		No
<b>1l</b>		No
<b>1m</b>		No
<b>1n</b>	Yes	
<b>1o</b>	Yes	
<b>1p</b>		No
<b>1q</b>	Yes	
<b>1r</b>	Yes	
<b>1s</b>	Yes	

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
<b>(1)</b> LOCAL 32BJ PA AMERICAN DREAM FUND	Q	268,321	COST
<b>(2)</b> 32BJ UNITED AMERICAN DREAM FUND	Q	343,663	COST
<b>(3)</b> 32BJ UNITED AMERICAN DREAM FUND	R	1,193,000	COST
<b>(4)</b> EMPIRE STATE 32BJ SEIU PAC	R	75,000	COST
<b>(5)</b> LOCAL 32BJ SEIU AMERICAN DREAM FUND	S	3,300,000	COST



**Part VII Supplemental Information**

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

Return Reference

Explanation

Schedule R (Form 990) 2020

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