

990

Return of Organization Exempt From Income Tax

OMB No. 1545-

0047 2021

Open to Public Inspection

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

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

Form 990 Department of the Treasury Internal Revenue Service

For the 2021 calendar year, or tax year beginning 01-01-2021, and ending 12-31-2021

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

C Name of organization: 1199SEIU UNITED HEALTHCARE WORKERS EAST. Doing business as. Number and street (or P.O. box if mail is not delivered to street address) Room/suite: 498 Seventh Avenue 24th Floor. City or town, state or province, country, and ZIP or foreign postal code: New York, NY 10018

D Employer identification number: 13-1510821. E Telephone number: (212) 857-4277. G Gross receipts \$ 190,953,370

F Name and address of principal officer: Lucy Chen, 498 Seventh Avenue 24th Floor, New York, NY 10018

H(a) Is this a group return for subordinates? No. H(b) Are all subordinates included? No. H(c) Group exemption number

I Tax-exempt status: 501(c)(3) 501(c) ( 5 ) (insert no.) 4947(a)(1) or 527

J Website: www.1199seiu.org

K Form of organization: Corporation Trust Association Other

L Year of formation: 1932 M State of legal domicile: NY

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1 Mission, 2-7a Governance, 8-12 Revenue, 13-19 Expenses, 20-22 Net Assets or Fund Balances.

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.

Sign Here: Signature of officer Lucy Chen CFO, Date 2022-10-20

Paid Preparer Use Only: Print/Type preparer's name, Preparer's signature, Date, Firm's name NCHENG LLP CERTIFIED PUBLIC ACCOUNTANTS, Firm's EIN 81-0926770

**Part III Statement of Program Service Accomplishments**

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

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

1199Seiu - To organize and unite employees in the health care industry.

**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 \$ )

1199Seiu - To organize and unite employees in the health care industry.

**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 the 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> . . . . .		No
<b>28c</b>	A 35% controlled entity of one or more individuals and/or organizations described in line 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?	Yes	
<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)?		No
<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> . . . . .		
<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 on 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 on 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)

<p><b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . .</p>	<p><b>2a</b></p>	<p>993</p>			
<p><b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.</p>	<p><b>2b</b></p>	<p>Yes</p>			
<p><b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .</p>	<p><b>3a</b></p>		<p>No</p>		
<p><b>b</b> If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O . . . . .</i></p>	<p><b>3b</b></p>				
<p><b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</p>	<p><b>4a</b></p>		<p>No</p>		
<p><b>b</b> Enter the name of the foreign country: _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).</p>					
<p><b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .</p>	<p><b>5a</b></p>		<p>No</p>		
<p><b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</p>	<p><b>5b</b></p>		<p>No</p>		
<p><b>c</b> If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .</p>	<p><b>5c</b></p>				
<p><b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . . . .</p>	<p><b>6a</b></p>		<p>No</p>		
<p><b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .</p>	<p><b>6b</b></p>				
<p><b>7 Organizations that may receive deductible contributions under section 170(c).</b></p>					
<p><b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .</p>	<p><b>7a</b></p>				
<p><b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .</p>	<p><b>7b</b></p>				
<p><b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .</p>	<p><b>7c</b></p>				
<p><b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year . . . . .</p>	<p><b>7d</b></p>				
<p><b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p>	<p><b>7e</b></p>				
<p><b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</p>	<p><b>7f</b></p>				
<p><b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .</p>	<p><b>7g</b></p>				
<p><b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .</p>	<p><b>7h</b></p>				
<p><b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?</p>	<p><b>8</b></p>				
<p><b>9 Sponsoring organizations maintaining donor advised funds.</b></p>					
<p><b>a</b> Did the sponsoring organization make any taxable distributions under section 4966?</p>	<p><b>9a</b></p>				
<p><b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . . .</p>	<p><b>9b</b></p>				
<p><b>10 Section 501(c)(7) organizations.</b> Enter:</p>					
<p><b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 . . . . .</p>	<p><b>10a</b></p>				
<p><b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .</p>	<p><b>10b</b></p>				
<p><b>11 Section 501(c)(12) organizations.</b> Enter:</p>					
<p><b>a</b> Gross income from members or shareholders . . . . .</p>	<p><b>11a</b></p>				
<p><b>b</b> Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .</p>	<p><b>11b</b></p>				
<p><b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?</p>					
<p><b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year.</p>	<p><b>12b</b></p>				
<p><b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b></p>					
<p><b>a</b> Is the organization licensed to issue qualified health plans in more than one state? . . . . .</p>	<p><b>13a</b></p>		<p>No</p>		
<p><b>Note.</b> See the instructions for additional information the organization must report on Schedule O.</p>					
<p><b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . .</p>	<p><b>13b</b></p>				
<p><b>c</b> Enter the amount of reserves on hand . . . . .</p>	<p><b>13c</b></p>				
<p><b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? . . . . .</p>	<p><b>14a</b></p>		<p>No</p>		
<p><b>b</b> If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O . . . . .</i></p>	<p><b>14b</b></p>				
<p><b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? . . . . .</p>	<p><b>15</b></p>		<p>No</p>		
<p><b>16</b> If the organization is a trust, did it file Form 720, Schedule E, to report the section 4968 excise tax on net investment income? . . . . .</p>	<p><b>16</b></p>		<p>No</p>		
<p><i>If "Yes," complete Form 4720, Schedule O.</i></p>					
<p><b>17 Section 501(c)(21) organizations.</b> Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? . . . . .</p>	<p><b>17</b></p>				
<p><i>If "Yes," complete Form 6069.</i></p>					

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 columns: Question, Yes, No. Rows include: 1a (145), 1b (61), 2, 3, 4, 5, 6, 7a, 7b, 8, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a, 10b, 11a, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed: NY
18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
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: Lucy Chen 498 Seventh Avenue 24th Floor New York, NY 10018 (212) 261-2301

**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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) George Gresham ..... President	35.00 ..... 5.00	X		X				264,895	0	107,222
(2) Lucy Chen ..... CFO	35.00 ..... 5.00			X				242,755	0	115,393
(3) Gabrielle Seay ..... Political Director	35.00 ..... 0.00							224,195	0	101,403
(4) Debra Pucci ..... Chief of Staff	35.00 ..... 0.00							221,411	0	103,707
(5) Maria Castaneda ..... Secretary/treas	35.00 ..... 5.00	X		X				197,248	0	86,735
(6) James Tynan ..... Director	35.00 ..... 0.00							211,200	0	67,665
(7) Helen Schaub ..... Vice President	35.00 ..... 0.00	X		X				184,359	0	82,646
(8) Yvonne Armstrong ..... Sr.Exec VP	35.00 ..... 5.00	X		X				182,502	0	77,126
(9) Veronica Turner-Biggs ..... Sr. Exec. VP	35.00 ..... 0.00	X		X				181,301	0	77,126
(10) Samantha Morales ..... Director	35.00 ..... 0.00							179,557	0	78,755
(11) Raul Hocson ..... Dir - MIS	35.00 ..... 0.00							168,595	0	80,462
(12) Milagros Silva-Bermudez ..... Executive VP	35.00 ..... 0.00	X		X				157,462	0	64,640
(13) Lisa Brown ..... Executive VP	35.00 ..... 0.00	X		X				154,313	0	61,743
(14) Antonio Howell ..... Vice President	35.00 ..... 0.00	X		X				148,205	0	64,108
(15) Gregory Speller ..... Executive VP	35.00 ..... 0.00	X		X				149,747	0	61,969
(16) Patrick Forde ..... Vice President	35.00 ..... 0.00	X		X				149,148	0	61,776
(17) Maria Kercado ..... Executive VP	35.00 ..... 0.00	X		X				148,732	0	61,969

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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) Nadine Williamson	35.00	X		X			148,885	0	61,757
Acting Exec. VP	0.00								
(19) Rona Shapiro	35.00	X		X			146,548	0	61,830
Executive VP	0.00								
(20) Jacqueline Alleyne	35.00	X		X			145,994	0	61,969
Executive VP	0.00								
(21) Joycelyn Neil	35.00	X		X			139,408	0	61,830
Executive VP	0.00								
(22) Todd Hobler	35.00	X		X			141,447	0	59,038
Vice President	0.00								
(23) Dale Ewart	35.00	X		X			146,182	0	46,181
Acting Exec. VP	0.00								
(24) Daine E Williams	35.00	X		X			135,927	0	55,842
Asst. div. dir.	0.00								
(25) Brian L Morse	35.00	X		X			131,978	0	56,963
Acting VP	0.00								
(26) Winslow J Luna	35.00	X		X			131,525	0	53,778
Vice President	0.00								
(27) Shaywaal Amin	35.00	X		X			132,607	0	51,215
Vice President	0.00								
(28) Neva Shillingford	35.00	X		X			129,812	0	51,863
Asst Div. Dir.	0.00								
(29) Allan Sherman	35.00	X		X			124,885	0	54,537
Asst. Div. Dir.	0.00								
(30) Raymond D Dorsey	35.00	X		X			127,794	0	51,494
Vice President	0.00								
(31) Victor Anthony	35.00	X		X			127,555	0	51,683
Vice President	0.00								
(32) Timothy Rodgers	35.00	X		X			126,806	0	50,467
Vice President	0.00								
(33) Sui Lung Xu	35.00	X		X			126,754	0	50,467
Vice President	0.00								
(34) Rene R Ruiz	35.00	X		X			126,404	0	50,467
Vice President	0.00								
(35) Roger C. Cumberbatch	35.00	X		X			126,140	0	50,704
Vice President	0.00								
(36) Dante M Marshall	35.00	X		X			125,541	0	50,993
Vice President	0.00								
(37) Taren L Peterson	35.00	X		X			125,696	0	50,555
Vice President	0.00								
(38) Joseph China	35.00	X		X			125,780	0	50,467
Vice President	0.00								
(39) Tracey S Harrison	35.00	X		X			125,780	0	50,225
Vice President	0.00								
(40) Michael Ashby	35.00	X		X			126,477	0	49,470
Vice President	0.00								
(41) Kevin M Lockhart	35.00	X		X			124,797	0	50,467
Vice President	0.00								
(42) James Scordato	35.00	X		X			124,797	0	50,467
Vice President	0.00								
(43) David J Greenberg	35.00	X		X			124,747	0	50,467
Vice President	0.00								
(44) Maureen L Tomlinson	35.00	X		X			124,627	0	50,467
Vice President	0.00								
(45) Brenda Spry	35.00	X		X			124,875	0	50,117
Vice President	0.00								
(46) Jude Derisme	35.00	X		X			124,572	0	50,337
Vice President	0.00								
(47) Rhina Molina-Munck	35.00	X		X			124,539	0	50,338
Vice President	0.00								
(48) Kwai K Ho	35.00	X		X			124,234	0	50,467
Vice President	0.00								
(49) Keith Joseph	35.00	X		X			124,090	0	50,467
Vice President	0.00								
(50) Margaret West-Allen	35.00	X		X			123,867	0	50,684
Vice President	0.00								
(51) William Kee	35.00	X		X			124,022	0	50,467
Vice President	0.00								
(52) Lystra C Sawney	35.00	X		X			124,629	0	49,759
Vice President	0.00								
(53) Adekemi Gray	35.00	X		X			124,079	0	50,280
Vice President	0.00								
(54) Stephanie Shaw	35.00	X		X			123,902	0	50,337
Vice President	0.00								
(55) Leilani C Montes	35.00	X		X			124,079	0	50,152
Vice President	0.00								
(56) Clauvice Saint-Hilaire	35.00	X		X			123,713	0	50,472
Vice President	0.00								
(57) Zenaida Colon	35.00	X		X			124,128	0	49,893
Vice President	0.00								
(58) Grace Bogdanove	35.00	X		X			124,575	0	49,340
Acting VP	0.00								
(59) Julio Vives	35.00	X		X			123,392	0	50,401
Vice President	0.00								
(60) Lorraine A Brown-Zanders	35.00	X		X			124,247	0	49,340
Acting VP	0.00								
(61) Patricia Marthone	35.00	X		X			122,643	0	50,295
Vice President	0.00								
(62) Brian Joseph	35.00	X		X			122,285	0	50,467
Vice President	0.00								
(63) Yahnae M Barner	35.00	X		X			123,143	0	49,430
Vice President	0.00								
(64) Anthony E Peterson	35.00	X		X			122,362	0	49,456
Vice President	0.00								
(65) Berta Silva	35.00	X		X			121,135	0	50,467
Vice President	0.00								
(66) Noreen Wray-Roach	35.00	X		X			120,231	0	48,721
Vice President	0.00								
(67) Vladimir Fortunny	35.00	X		X			116,087	0	50,467
Vice President	0.00								
(68) Coraminita Mahr	35.00	X		X			116,208	0	50,098
Vice President	0.00								
(69) Mary Wislie	35.00	X		X			118,848	0	47,227
Vice President	0.00								
(70) Caridad Rivera	35.00	X		X			128,379	0	36,255
Acting VP	0.00								
(71) Katia Guillaume	35.00	X		X			114,533	0	50,037
Vice President	0.00								
(72) Karen Barrett	35.00	X		X			120,305	0	43,674
Vice President	0.00								
(73) Ruth Karen Heller	35.00	X		X			138,615	0	22,790
Executive VP	0.00								
(74) Dequasiasharah R. Canales	35.00	X		X			121,999	0	37,683
Vice President	0.00								
(75) Brynley Lloyd-Bollard	35.00	X		X			110,765	0	48,747
Vice President	0.00								
(76) Herbert Jean-Baptiste	35.00	X		X			158,866	0	0
Vice President	0.00								
(77) Patricia Smith	35.00	X		X			112,018	0	44,915
Vice President	0.00								
(78) Gerard Cadet	35.00	X		X			109,648	0	43,850
Vice President	0.00								
(79) Timothy C Foley	35.00	X		X			152,063	0	0
Executive VP	0.00								
(80) Frances O Gentle	35.00	X		X			118,676	0	33,292
Vice President	0.00								
(81) Isabel A Rodriguez-Simpson	35.00	X		X			106,362	0	45,435
Vice President	0.00								
(82) Filaine Deronnette	35.00	X		X			127,554	0	21,201
Vice President	0.00								
(83) Margarette Nerette	35.00	X		X			101,518	0	28,405
Vice President	0.00								
(84) Gladys Bruno	35.00	X		X			89,383	0	38,391
Vice President	0.00								
(85) Rebecca A Gutman	35.00	X		X			126,031	0	0
Vice President	0.00								
(86) Jerry Fishbein	35.00	X		X			125,777	0	0
Vice President	0.00								
(87) Steven Kramer	35.00	X		X			45,279	0	21,007
Executive VP	0.00								
(88) Katherine Taylor	35.00	X		X			54,871	0	5,236
Caucus Coord/VP	0.00								
(89) Monica M Russo	35.00	X		X			58,995	0	0
Executive VP	0.00								
(90) Manuel Leon	35.00	X		X			38,331	0	4,976
Vice President	0.00								
(91) Ionis Bandele	1.50	X					0	0	0
Exec. Council	0.00								
(92) Tiffany Carter	1.50	X					0	0	0
Exec. Council	0.00								
(93) Belinda Blanck	1.50	X					0	0	0
Exec. Council	0.00								
(94) Andy Cassagnol	1.50	X					0	0	0
Exec. Council	0.00								
(95) Sophia Colley	1.50	X					0	0	0
Exec. Council	0.00								
(96) Carmen Schaefer	1.50	X					0	0	0
Exec. Council	0.00								
(97) Sandra Diaz	1.50	X					0	0	0
Exec. Council	0.00								
(98) Cheryl Roberts	1.50	X					0	0	0
Exec. Council	0.00								
(99) Cheryl Castillo	1.50	X					0	0	0
Exec. Council	0.00								
(100) Clifton Barker	1.50	X					0	0	0
Exec. Council	0.00								
(101) Dennese Wray	1.50	X					0	0	0
Exec. Council	0.00								
(102) Elizabeth Mauvais-Jazon	1.50	X					0	0	0
Exec. Council	0.00								
(103) Evelyn Harris	1.50	X					0	0	0
Exec. Council	0.00								
(104) Frazier Dudley Gaines	1.50	X					0	0	0
Exec. Council	0.00								
(105) Felix Quinones	1.50	X					0	0	0
Exec. Council	0.00								
(106) Cheryl Dunn	1.50	X					0	0	0
Exec. Council	0.00								
(107) Sheila Ennist	1.50	X					0	0	0
Exec. Council	0.00								
(108) Noel Evelyn	1.50	X					0	0	0
Exec. Council	0.00								
(109) Tiffany Fields	1.50	X					0	0	0
Exec. Council	0.00								
(110) Tamikio Gallishaw	1.50	X					0	0	0
Exec. Council	0.00								
(111) Jane Garencser	1.50	X					0	0	0
Exec. Council	0.00</								

**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																								
Contributions, Gifts, Grants, and Other Similar Amounts			<table border="1"> <tr> <td><b>1a</b> Federated campaigns . . . . .</td> <td><b>1a</b></td> <td></td> </tr> <tr> <td><b>b</b> Membership dues . . . . .</td> <td><b>1b</b></td> <td></td> </tr> <tr> <td><b>c</b> Fundraising events . . . . .</td> <td><b>1c</b></td> <td></td> </tr> <tr> <td><b>d</b> Related organizations . . . . .</td> <td><b>1d</b></td> <td></td> </tr> <tr> <td><b>e</b> Government grants (contributions) . . . . .</td> <td><b>1e</b></td> <td></td> </tr> <tr> <td><b>f</b> All other contributions, gifts, grants, and similar amounts not included above . . . . .</td> <td><b>1f</b></td> <td></td> </tr> <tr> <td><b>g</b> Noncash contributions included in lines 1a - 1f:\$ . . . . .</td> <td><b>1g</b></td> <td></td> </tr> <tr> <td><b>h Total.</b> Add lines 1a-1f . . . . .</td> <td></td> <td align="right">0</td> </tr> </table>				<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>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>	<b>2a</b> contract services	Business Code 900099	4,748,672	4,748,672																										
	<b>b</b> Membership Dues	900099	180,102,842	180,102,842																										
	<b>c</b> rental income	532000	1,869,383	1,869,383																										
	<b>d</b>																													
	<b>e</b>																													
	<b>f</b> All other program service revenue.																													
<b>g Total.</b> Add lines 2a-2f. . . . .			186,720,897																											
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		26,665			26,665																								
	<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)																												
	<b>d</b> Net rental income or (loss) . . . . .			0																										
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other																											
		<b>7b</b> Less: cost or other basis and sales expenses																												
		<b>7c</b> Gain or (loss)																												
	<b>d</b> Net gain or (loss) . . . . .			0																										
	<b>8a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 . . . . .																													
		<b>8b</b> Less: direct expenses																												
	<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>9b</b> Less: direct expenses . . . . .																														
<b>c</b> Net income or (loss) from gaming activities . . . . .			0																											
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .																														
	<b>10b</b> Less: cost of goods sold . . . . .																													
<b>c</b> Net income or (loss) from sales of inventory . . . . .			0																											
Miscellaneous Revenue		Business Code																												
<b>11a</b> Gain on subsidiaries	900099	2,714,057	2,714,057																											
<b>b</b> Other revenue	900099	1,491,751	1,491,751																											
<b>c</b>																														
<b>d</b> All other revenue . . . . .																														
<b>e Total.</b> Add lines 11a-11d . . . . .			4,205,808																											
<b>12 Total revenue.</b> See instructions . . . . .			190,953,370	190,926,705	26,665																									

**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

**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,583,523			
<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	15,168,904			
<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	56,825,503			
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	5,989,026			
<b>9</b> Other employee benefits	17,356,094			
<b>10</b> Payroll taxes	5,507,308			
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management	1,728,202			
<b>b</b> Legal	8,010,080			
<b>c</b> Accounting	176,365			
<b>d</b> Lobbying	0			
<b>e</b> Professional fundraising services. See Part IV, line 17	0			
<b>f</b> Investment management fees	0			
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	599,417			
<b>12</b> Advertising and promotion	1,640,686			
<b>13</b> Office expenses	2,109,223			
<b>14</b> Information technology	3,844,245			
<b>15</b> Royalties	0			
<b>16</b> Occupancy	22,952,058			
<b>17</b> Travel	1,064,337			
<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	493,522			
<b>20</b> Interest	1,866,752			
<b>21</b> Payments to affiliates	31,800,190			
<b>22</b> Depreciation, depletion, and amortization	4,714,395			
<b>23</b> Insurance	3,845,158			
<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> Printing and Publications	1,180,752			
<b>b</b> Postage and Shipping	498,691			
<b>c</b> OTHER EXPENSES	275,971			
<b>d</b> Bad debt	81,074			
<b>e</b> All other expenses	46,447			
<b>25 Total functional expenses.</b> Add lines 1 through 24e	189,357,923	0	0	0
<b>26 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

		(A)		(B)
		Beginning of year		End of year
<b>Assets</b>	<b>1</b> Cash-non-interest-bearing . . . . .	26,316,640	<b>1</b>	59,403,156
	<b>2</b> Savings and temporary cash investments	46,935,519	<b>2</b>	18,862,272
	<b>3</b> Pledges and grants receivable, net . . . . .		<b>3</b>	0
	<b>4</b> Accounts receivable, net . . . . .	17,687,513	<b>4</b>	15,752,600
	<b>5</b> Loans and other receivables from 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		<b>5</b>	0
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		<b>6</b>	0
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	0
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	0
	<b>9</b> Prepaid expenses and deferred charges . . . . .	2,109,861	<b>9</b>	3,010,990
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 75,812,430		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> 19,034,664	59,438,931	<b>10c</b> 56,777,766
	<b>11</b> Investments—publicly traded securities . . . . .		<b>11</b>	0
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .		<b>12</b>	0
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .	7,777,273	<b>13</b>	11,093,466
	<b>14</b> Intangible assets . . . . .		<b>14</b>	0
	<b>15</b> Other assets. See Part IV, line 11	4,772,305	<b>15</b>	1,500,841
<b>16 Total assets:</b> Add lines 1 through 15 (must equal line 33) . . . . .	165,038,042	<b>16</b>	166,401,091	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	24,879,535	<b>17</b>	23,531,748
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .	407,125	<b>19</b>	615,662
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D		<b>21</b>	
	<b>22</b> Loans and other 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		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	50,000,000	<b>23</b>	50,000,000
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	760,022	<b>25</b>	596,284
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	76,046,682	<b>26</b>	74,743,694
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions . . . . .	72,954,369	<b>27</b>	75,620,406
	<b>28</b> Net assets with donor restrictions	16,036,991	<b>28</b>	16,036,991
	<b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds . . . . .		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds		<b>31</b>	
	<b>32</b> Total net assets or fund balances	88,991,360	<b>32</b>	91,657,397
<b>33</b> Total liabilities and net assets/fund balances	165,038,042	<b>33</b>	166,401,091	

**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>	190,953,370
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	189,357,923
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	1,595,447
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	88,991,360
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<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>	1,070,590
<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>	91,657,397

**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 on 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:** 21013475

**Software Version:** 2021v4.0

**Form 990, Special Condition Description:**

**Special Condition Description**

**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.**

**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 1199SEIU UNITED HEALTHCARE WORKERS EAST	Employer identification number 13-1510821
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

<b>1</b>	Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."		
<b>2</b>	Political campaign activity expenditures. See instructions .....	▶	\$ <u>1,020,240</u>
<b>3</b>	Volunteer hours for political campaign activities. See instructions .....		

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

<b>1</b>	Enter the amount of any excise tax incurred by the organization under section 4955 .....		\$ _____
<b>2</b>	Enter the amount of any excise tax incurred by organization managers under section 4955 .....		\$ _____
<b>3</b>	If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>4a</b>	Was a correction made? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>b</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).**

<b>1</b>	Enter the amount directly expended by the filing organization for section 527 exempt function activities .....		\$ <u>403,020</u>
<b>2</b>	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities .....	▶	\$ _____
<b>3</b>	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b.....		\$ <u>403,020</u>
<b>4</b>	Did the filing organization file <b>Form 1120-POL</b> for this year? .....		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>5</b>	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) 1199SEIU NYS Political Action Fund	498 Seventh Ave 24th FL New York, NY 10018	13-4128203		232,919
(2) 1199Seiu Fed Political Action Fund	498 Seventh Ave 24th FL New York, NY 10018	30-0123610		110,139
(3) 1199SEIU Political Action Fund Mass	498 Seventh Ave 24th FL New York, NY 10018	20-3288982		684
(4) 1199 32BJ144 SEIU Home Care PAF	498 7th avenue 24th fl New York, NY 10018	13-4052719		1,077
<b>5</b>				
<b>6</b>				

**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.)	<b>(a)</b> Filing organization's totals	<b>(b)</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%; text-align:left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:65%; text-align:left;">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) 2018	(b) 2019	(c) 2020	(d) 2021	(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 required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
Part I-A, Line 1 - Direct and Indirect Political Campaign Activities	To advocate for members' interests through intervention in campaigns for local, state and federal public office

## **Additional Data**

**Return to Form**

**Software ID:** 21013475

**Software Version:** 2021v4.0

Supplemental Financial Statements

2021

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 1199SEIU UNITED HEALTHCARE WORKERS EAST

Employer identification number

13-1510821

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 informed.

Part II Conservation Easements.

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

Form for Part II Conservation Easements. Includes checkboxes for various purposes, a table for 'Held at the End of the Year' with rows 2a-2d, and several text-based questions.

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:
- |  | Yes           | No |
|--|---------------|----|
| <b>(i)</b> Unrelated organizations . . . . .   | <b>3a(i)</b>  |    |
| <b>(ii)</b> Related organizations . . . . .  | <b>3a(ii)</b> |    |
| <b>b</b> If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . . | <b>3b</b>     |    |
- 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 . . . . .		42,112		42,112
<b>b</b> Buildings . . . . .		1,895,061	1,059,757	835,304
<b>c</b> Leasehold improvements		55,405,220	5,807,233	49,597,987
<b>d</b> Equipment . . . . .		18,470,037	12,167,674	6,302,363
<b>e</b> Other . . . . .				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				56,777,766

**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 _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<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
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 13.)	11,093,466	

**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
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<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	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 25.)	596,284

**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 1:		
<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 1:		
<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 : FIN48 Footnote	1199 AND SUBSIDIARIES HAVE ADOPTED THE PROVISIONS PERTAINING TO UNCERTAIN TAX POSITIONS AND HAVE ANALYZED TAX POSITIONS TAKEN FOR FILING WITH THE INTERNAL REVENUE SERVICE AND STATE JURISDICTIONS WHERE IT OPERATES. 1199 AND SUBSIDIARIES DO NOT ANTICIPATE ANY SIGNIFICANT UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE RECOGNITION IN THE CONSOLIDATED FINANCIAL STATEMENT. PERIODS ENDING DECEMBER 31, 2018 AND SUBSEQUENT REMAIN SUBJECT TO EXAMINATION BY THE TAXING AUTHORITIES.

## Additional Data

[Return to Form](#)

**Software ID:** 21013475

**Software Version:** 2021v4.0

**Schedule I (Form 990)**

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

OMB No. 1545-0047

**2021**

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  
1199SEIU UNITED HEALTHCARE WORKERS EAST

Employer identification number  
13-1510821

**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) 1199 SEIU Homecare Industry POBox 463 New York, NY 10108	71-1028611	501(c)(3)	15,000	0			Solidarity Contribution
(2) 1199SEIU Employer Childcare C POBox 303 New York, NY 10108	13-4063281	501(c)(3)	25,000	0			Solidarity Contribution
(3) Center For Independent Docume 1300 Soldiers Field Road Brighton, MA 02135	04-2738458	501(c)(3)	25,000	0			Solidarity Contribution
(4) chinatown manpower project in 70 mulberry street new york, NY 10013	13-2755214	501(c)(3)	25,000	0			solidarity contribution
(5) Greater Harlem Chamber of Com 200A West 136th Street New Year, NY 10030	13-3662434	501(c)(6)	10,000	0			Solidarity Contribution
(6) Herbert Daughtry Global Minis 415 Atlantic Ave Brooklyn, NY 11217	84-2280951	501(c)(3)	15,000	0			Solidarity contribution
(7) Immigrant Family Services Ins 1626 Blue Hill Avenue Mattapan, MA 02126	47-4400495	501(c)(3)	10,000	0			Solidarity Contribution
(8) montefiore medical center 111 east 210th street bronx, NY 10467	13-1740114	501(c)(3)	20,000	0			solidarity contribution
(9) NAACP New York State 44 Wall Street Suite604 New York, NY 10005	13-1084135	501(c)(3)	10,000	0			Solidarity Contribution
(10) National Action Network 106 West 145 Street New York, NY 10039	11-3269182	501(c)(4)	45,000	0			Solidarity Contribution
(11) New York Amsterdam News 2340 Federick Douglas Blvd New York, NY 10027	13-2677838		10,000	0			Solidarity Contribution
(12) Peggy Browning Fund 100 South Broad StSuite 1208 Philadelphia, PA 19110	23-2887086	501(c)(3)	10,000	0			Solidarity Contribution
(13) riverkeeper ny 20 secor road ossining, NY 10562	13-3204621	501(c)(3)	25,000	0			Solidarity contribution
(14) Rize Massachusstts Foundation 101 huntington ave boston, MA 02199	83-0989395	501(c)(3)	300,000	0			Solidarity contribution
(15) SEIU Healthcare 1199 NW 15 S Grady Way 200 Renton, WA 98057	91-1275780	501(c)(5)	12,000	0			Solidarity Contribution
(16) UA3Inc 384 Grand Street Suite 1B New York, NY 10002	47-4803090	501(c)(3)	10,000	0			Solidarity Contribution
(17) Ujamaa Community Development 52 South 6th Avenue Mount Vernon, NY 10550	13-3940622	501(c)(3)	10,000	0			Solidarity Contribution
(18) United Hospital Fund of NY 1411 broadway new york, NY 10018	13-1562656	501(c)(3)	15,000	0			solidarity contribution

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 15
- 3** Enter total number of other organizations listed in the line 1 table 3

**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

## Additional Data

[Return to Form](#)

**Software ID:** 21013475

**Software Version:** 2021v4.0

**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.**

**2021**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
1199SEIU UNITED HEALTHCARE WORKERS EAST

Employer identification number  
13-1510821

**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 checked="" type="checkbox"/> Compensation committee          | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant        | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" 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
<b>1b</b>		
<b>2</b>		
<b>4a</b>		No
<b>4b</b>		No
<b>4c</b>		No
<b>5a</b>		
<b>5b</b>		
<b>6a</b>		
<b>6b</b>		
<b>7</b>		
<b>8</b>		
<b>9</b>		

**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, 1099-MISC compensation, and/or 1099-NEC			(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 Adekemi Gray Vice President	(i)	124,079			12,654	37,626	174,359	
	(ii)					-	-	
2 Allan Sherman Asst. Div. Dir.	(i)	124,885			13,741	40,796	179,422	
	(ii)					-	-	
3 Anthony E Peterson Vice President	(i)	122,362			12,405	37,051	171,818	
	(ii)					-	-	
4 Antonio Howell Vice President	(i)	148,205			16,135	47,973	212,313	
	(ii)					-	-	
5 Berta Silva Vice President	(i)	121,135			12,654	37,813	171,602	
	(ii)					-	-	
6 Brenda Spry Vice President	(i)	124,875			12,635	37,482	174,992	
	(ii)					-	-	
7 Brian Joseph Vice President	(i)	122,285			12,654	37,813	172,752	
	(ii)					-	-	
8 Brian L Morse Acting VP	(i)	131,978			14,367	42,596	188,941	
	(ii)					-	-	
9 Brynley Lloyd-Bollard Vice President	(i)	110,765			12,240	36,507	159,512	
	(ii)					-	-	
10 Caridad Rivera Acting VP	(i)	128,379			11,705	24,550	164,634	
	(ii)					-	-	
11 Clauvise Saint-Hilaire Vice President	(i)	123,713			12,654	37,818	174,185	
	(ii)					-	-	
12 Coraminita Mahr Vice President	(i)	116,208			12,597	37,501	166,306	
	(ii)					-	-	
13 Daine E Williams Asst. div. dir.	(i)	135,927			14,017	41,825	191,769	
	(ii)					-	-	
14 Dale Ewart Acting Exec. VP	(i)	146,182				46,181	192,363	
	(ii)					-	-	
15 David J Greenberg Vice President	(i)	124,747			12,654	37,813	175,214	
	(ii)					-	-	
16 Debra Pucci Chief of Staff	(i)	221,411			26,388	77,319	325,118	
	(ii)					-	-	
17 Dequasiasharah R Canales Vice President	(i)	121,999				37,683	159,682	
	(ii)					-	-	
18 Donta M Marshall Vice President	(i)	125,541			12,769	38,224	176,534	
	(ii)					-	-	
19 Frances O Gentle Vice President	(i)	118,676			8,490	24,802	151,968	
	(ii)					-	-	
20 Gabrielle Seay Political Director	(i)	224,195			25,751	75,652	325,598	
	(ii)					-	-	
21 George Gresham President	(i)	264,895			27,254	79,968	372,117	
	(ii)					-	-	
22 Gerard Cadet Vice President	(i)	109,648			10,910	32,940	153,498	
	(ii)					-	-	
23 Grace Bogdanove Acting VP	(i)	124,575			12,654	36,686	173,915	
	(ii)					-	-	
24 Gregory Speller Executive VP	(i)	149,747			15,574	46,395	211,716	
	(ii)					-	-	
25 Helen Schaub Vice President	(i)	184,359			20,910	61,736	267,005	
	(ii)					-	-	
26 Herbert Jean-Baptiste Vice President	(i)	158,866					158,866	
	(ii)					-	-	
27 Isabel A Rodriguez-Simpson Vice President	(i)	106,362			11,625	33,810	151,797	
	(ii)					-	-	
28 Jacqueline Alleyne Executive VP	(i)	145,994			15,574	46,395	207,963	
	(ii)					-	-	
29 James Scordato Vice President	(i)	124,797			12,654	37,813	175,264	
	(ii)					-	-	
30 James Tynan Director	(i)	211,200			16,927	50,738	278,865	
	(ii)					-	-	
31 Joseph Chinaea Vice President	(i)	125,780			12,654	37,813	176,247	
	(ii)					-	-	
32 Joycelyn Neil Executive VP	(i)	139,408			15,574	46,256	201,238	
	(ii)					-	-	
33 Jude Derisme Vice President	(i)	124,572			12,654	37,683	174,909	
	(ii)					-	-	
34 Julio Vives Vice President	(i)	123,392			12,654	37,747	173,793	
	(ii)					-	-	
35 Karen Barrett Vice President	(i)	120,305			11,431	32,243	163,979	
	(ii)					-	-	
36 Katia Guillaume Vice President	(i)	114,533			12,608	37,429	164,570	
	(ii)					-	-	
37 Keith Joseph Vice President	(i)	124,090			12,654	37,813	174,557	
	(ii)					-	-	
38 Kevin M Lockhart Vice President	(i)	124,797			12,654	37,813	175,264	
	(ii)					-	-	
39 Kwai K Ho Vice President	(i)	124,234			12,654	37,813	174,701	
	(ii)					-	-	
40 Leilani C Montes Vice President	(i)	124,079			12,654	37,498	174,231	
	(ii)					-	-	
41 Lisa Brown Executive VP	(i)	154,313			15,574	46,169	216,056	
	(ii)					-	-	
42 Lorraine A Brown-Zanders Acting VP	(i)	124,247			12,654	36,686	173,587	
	(ii)					-	-	
43 Lucy Chen CFO	(i)	242,755			29,326	86,067	358,148	
	(ii)					-	-	
44 Lystra C Sawney Vice President	(i)	124,629			12,654	37,105	174,388	
	(ii)					-	-	
45 Margaret West-Allen Vice President	(i)	123,867			12,711	37,973	174,551	
	(ii)					-	-	
46 Maria Castaneda Secretary/treas	(i)	197,248			21,969	64,766	283,983	
	(ii)					-	-	
47 Maria Kercado Executive VP	(i)	148,732			15,574	46,395	210,701	
	(ii)					-	-	
48 Mary Wilsie Vice President	(i)	118,848			11,887	35,340	166,075	
	(ii)					-	-	
49 Maureen L Tomlinson Vice President	(i)	124,627			12,654	37,813	175,094	
	(ii)					-	-	
50 Michael Ashby Vice President	(i)	126,477			12,688	36,782	175,947	
	(ii)					-	-	
51 Milagros Silva-Bermudez Executive VP	(i)	157,462			16,251	48,389	222,102	
	(ii)					-	-	
52 Nadine Williamson Acting Exec. VP	(i)	148,885			15,574	46,183	210,642	
	(ii)					-	-	
53 Neva Shillingford Asst Div. Dir.	(i)	129,812			13,305	38,558	181,675	
	(ii)					-	-	
54 Noreen Wray-Roach Vice President	(i)	120,231			12,230	36,491	168,952	
	(ii)					-	-	
55 Patricia Marthone Vice President	(i)	122,643			12,711	37,584	172,938	
	(ii)					-	-	
56 Patricia Smith Vice President	(i)	112,018			11,408	33,507	156,933	
	(ii)					-	-	
57 Patrick Forde Vice President	(i)	149,148			15,574	46,202	210,924	
	(ii)					-	-	
58 Raul Hocson Dir - MIS	(i)	168,595			20,361	60,101	249,057	
	(ii)					-	-	
59 Raymond D Dorsey Vice President	(i)	127,794			12,918	38,576	179,288	
	(ii)					-	-	
60 Rene R Ruiz Vice President	(i)	126,404			12,654	37,813	176,871	
	(ii)					-	-	
61 Rhina Molina-Munck Vice President	(i)	124,539			12,654	37,684	174,877	
	(ii)					-	-	
62 Roger C Cumberbatch Vice President	(i)	126,140			12,769	37,935	176,844	
	(ii)					-	-	
63 Rona Shapiro Executive VP	(i)	146,548			15,574	46,256	208,378	
	(ii)					-	-	
64 Ruth Karen Heller Executive VP	(i)	138,615				22,790	161,405	
	(ii)					-	-	
65 Samantha Morales Director	(i)	179,557			20,288	58,467	258,312	
	(ii)					-	-	
66 Shaywaal Amin Vice President	(i)	132,607			13,109	38,106	183,822	
	(ii)					-	-	
67 Stephanie Shaw Vice President	(i)	123,902			12,654	37,683	174,239	
	(ii)					-	-	
68 Sul Ling Xu Vice President	(i)	126,754			12,654	37,813	177,221	
	(ii)					-	-	
69 Taren L Peterson Vice President	(i)	125,696			12,654	37,903	176,253	
	(ii)					-	-	
70 Timothy C Foley Executive VP	(i)	152,063					152,063	
	(ii)					-	-	
71 Timothy Rodgers Vice President	(i)	126,806			12,654	37,813	177,273	
	(ii)					-	-	
72 Todd Hobler Vice President	(i)	141,447			14,850	44,188	200,485	
	(ii)					-	-	
73 Tracey S Harrison Vice President	(i)	125,780			12,654	37,571	176,005	
	(ii)					-	-	
74 Veronica Turner-Biggs Sr. Exec. VP	(i)	181,301			19,454	57,672	258,427	
	(ii)					-	-	
75 Victor Anthony Vice President	(i)	127,555			12,961	38,722	179,238	
	(ii)					-	-	
76 Vladimir Fortunny Vice President	(i)	116,087			12,654	37,813	166,554	
	(ii)					-	-	
77 William Kee Vice President	(i)	124,022			12,654	37,813	174,489	
	(ii)					-	-	
78 Winslow J Luna Vice President	(i)	131,525			13,492	40,286	185,303	
	(ii)					-	-	
79 Yahnnae M Barner Vice President	(i)	123,143			12,654	36,776	172,573	
	(ii)					-	-	
80 Yvonne Armstrong Sr.Exec VP	(i)	182,502			19,454	57,672	259,628	

**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:** 21013475

**Software Version:** 2021v4.0

**SCHEDULE O**  
**(Form 990)****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.

**2021****Open to Public  
Inspection**Department of the Treasury  
Internal Revenue Service▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.Name of the organization  
1199SEIU UNITED HEALTHCARE WORKERS EAST

Employer identification number

13-1510821

Return Reference	Explanation
Form 990, Part VI, Line 6: Explanation of Classes of Members or Shareholder	All persons working as employees in bargaining units in the trades, crafts, occupations, industries or establishments within the jurisdiction of the union as defined in this constitution shall be eligible for membership in the union. Persons employed by the union and other related organizations shall also be eligible for membership. The jurisdiction of the union shall extend to employees of medical centers, hospitals, nursing homes, clinics, home care agencies, drug stores, surgical stores, cosmetic shops and similar, related or comparable institutions and shall embrace all professional, technical, clerical, service and maintenance and all other employees in the health care and human services fields.
Form 990, Part VI, Line 7a: How Members or Shareholders Elect Governing Body	The union's constitution provides that each member in good standing is entitled to vote in the election of union officers, rank-and-file representatives and, in the case of retired members in good standing, a retired members division representative to serve on the union's governing body, the executive council.
Form 990, Part VI, Line 7b: Describe Decisions of Governing Body Approval by Members or Shareholders	The constitution provides that the members shall have the right to reverse any policy or action of the executive council by a majority vote of the members participating in a referendum. Such a referendum may be initiated by a petition signed by 15% of the members of the union who are in good standing.
Form 990, Part VI, Line 11b: Form 990 Review Process	Copies of the form 990 are provided to the members of the executive committee, A standing committee of the executive council, the organizations' governing body, who are given the opportunity to comment prior to filing.
Form 990, Part VI, Line 12c: Explanation of Monitoring and Enforcement of Conflicts	Request annual disclosure forms from all staff and follow up on all issues identified therein or otherwise.
Form 990, Part VI, Line 15b: Compensation Review and Approval Process for Officers and Key Employees	Compensation for officers and other key employees is based on market data from comparable unions using information from LM2 filings and other available sources, including recruiting experts. Wage increases for all positions are the same as the contractual increases negotiated by the union for its members who are employed by institutions that are part of voluntary hospitals and homes.
Form 990, Part VI, Line 19: Other Organization Documents Publicly Available	All governing documents, conflict of interest policy and financial statements are available to the public upon request.
Other Changes In Net Assets Or Fund Balances - Other Increases	Investment in SEIU-CC = \$1070590
Form 990, Part XII, Line 2: Change of Oversight or Selection Process	The Organization's financial statements were audited on a consolidated basis and we do have a committee that assumes responsibility for oversight of the audit and selection of an independent accountant.

## Additional Data

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**Software ID:** 21013475

**Software Version:** 2021v4.0

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047  
**2021**  
**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  
1199SEIU UNITED HEALTHCARE WORKERS EAST

**Employer identification number**  
13-1510821

**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
<b>(1)</b> Seiu CC LLC 498 Seventh Ave 24th FL New York, NY 10018 26-3708347	Call Center	NY	2,249,322	579,345	1199Seiu United Healthcare Workers East

**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> Ardeon Realty Corp 498 Seventh Ave 24th FL  New York, NY 10018 13-1822756	Property operations for 1199SEIU	NY	501(c)(2)		NA		No
<b>(2)</b> Dhu Realty Corp 498 Seventh Ave 24th FL  New York, NY 10018 13-3687074	Property Operations for 1199SEIU	NY	501(c)(2)		NA		No

**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

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

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
<b>(1)</b> Ardeon Realty Corp	d	700,000	Actual Amt
<b>(2)</b> Ardeon Realty Corp	n	23,707	Employee Time
<b>(3)</b> Ardeon Realty Corp	o	98,248	Employee Time
<b>(4)</b> Dhu Realty Corp	c	602,136	Actual amount
<b>(5)</b> Dhu Realty Corp	k	1,331,880	Leased property
<b>(6)</b> Dhu Realty Corp	n	158,048	Allocated amt
<b>(7)</b> Dhu Realty Corp	o	519,030	Allocated amt
<b>(8)</b> Dhu Realty Corp	q	152,189	Actual Expense



**Part VII Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

Return Reference

Explanation

Schedule R (Form 990) 2021

**Additional Data**[Return to Form](#)**Software ID:** 21013475**Software Version:** 2021v4.0