

Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations). Do not enter social security numbers on this form as it may be made public.
Go to [www.irs.gov/Form990](#) for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

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

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

C Name of organization
LABORERS' INTERNATIONAL UNION OF NORTH AMERICA

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite

905 16TH STREET NW

City or town, state or province, country, and ZIP or foreign postal code
WASHINGTON, DC 200061703

F Name and address of principal officer:
TERENCE M O'SULLIVAN
905 16TH STREET NW
WASHINGTON, DC 200061703

H(a) Is this a group return for subordinates?
H(b) Are all subordinates included?
If "No," attach a list. (see instructions)
H(c) Group exemption number 0121

D Employer identification number
53-0088501

E Telephone number
(202) 737-8320

G Gross receipts \$ 178,093,835

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

J Website: WWW.LIUNA.ORG

K Form of organization: ☐ Corporation ☐ Trust ☒ Association ☐ Other

L Year of formation: 1903

M State of legal domicile: DC

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
TO IMPROVE WORKING CONDITIONS AND LIVING STANDARDS OF MEMBERS THROUGH COLLECTIVE BARGAINING, EDUCATION AND TRAINING, EMPLOYEE BENEFITS.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	16
4	Number of independent voting members of the governing body (Part VI, line 1b)	0
5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	235
6	Total number of volunteers (estimate if necessary)	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	0
7b	Net unrelated business taxable income from Form 990-T, line 39	0

Revenue

	Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	0
9	Program service revenue (Part VIII, line 2g)	93,442,091
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	18,057,337
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-322,755
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	111,176,673

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,459,897	1,756,732
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	48,167,434	49,469,177
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25)	0	0
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	24,858,147	24,799,513
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	74,485,478	76,025,422
19	Revenue less expenses. Subtract line 18 from line 12	36,691,195	20,918,749

Net Assets or Fund Balances

	Beginning of Current Year	End of Year	
20	Total assets (Part X, line 16)	290,142,839	328,753,159
21	Total liabilities (Part X, line 26)	514,656	1,714,145
22	Net assets or fund balances. Subtract line 21 from line 20	289,628,183	327,039,014

Part II Signature Block

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

Sign Here

Signature of officer

2021-05-17

ARMAND E SABITONI GENERAL SEC/TREAS

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN P01712644
Firm's name CALIBRE CPA GROUP PLLC			Firm's EIN 47-0900880	
Firm's address 7501 WISCONSIN AVENUE SUITE 1200 WEST BETHESDA, MD 20814			Phone no. (202) 331-9880	

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

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2020)

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:
TO IMPROVE WORKING CONDITIONS AND LIVING STANDARDS OF MEMBERS THROUGH COLLECTIVE BARGAINING, EDUCATION, TRAINING, AND EMPLOYEE BENEFITS.

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

YesNo

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?

YesNo

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 \$)
IMPROVE WORKING CONDITIONS AND LIVING STANDARDS OF MEMBERS THROUGH COLLECTIVE BARGAINING, EDUCATION, TRAINING, EMPLOYEE BENEFITS, ETC.

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

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	No
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Yes
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?	11f	Yes
12a If the organization has a separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes

Part IV

Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	
26	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?	26	No
27	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? If "Yes," complete Schedule L, Part III	27	No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Yes
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions?	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?	33	No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	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
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	68
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)						
2a 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		2a	235			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				2b	Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?				3a		No
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>				3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?				4a	Yes	
b If "Yes," enter the name of the foreign country: <u>► C A</u> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts						
5a Did the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .				5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				5b		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?				5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?				6a		No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?				6b		
7 Organizations that may receive deductible contributions under section 170(c).						
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?				7a		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?				7c		
d If "Yes," indicate the number of Forms 8282 filed during the year				7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				7f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?				7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?				7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?				8		
9 Sponsoring organizations maintaining donor advised funds.						
a Did the sponsoring organization make any taxable distributions under section 4966?				9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?				9b		
10 Section 501(c)(7) organizations. Enter:						
a Initiation fees and capital contributions included on Part VIII, line 12				10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				10b		
11 Section 501(c)(12) organizations. Enter:						
a Gross income from members or shareholders				11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)				11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.				12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.						
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.				13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans				13b		
c Enter the amount of reserves on hand				13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?				14a		No
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>				14b		
15 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?				15		No
16 If the organization is subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.				16		No

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

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year.	1a	16	
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent	1b	0	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

Own website Another's website ☒ Upon request Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:

ARMAND E SABITONI GEN SEC-TREAS 905 16TH STREET NW WASHINGTON, DC 20006 (202) 737-8320

Part VII

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

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) TERENCE M O'SULLIVAN GENERAL PRESIDENT	60.00 2.00			X				806,877	0	209,234
(2) ARMAND E SABITONI GENERAL SECRETARY-TREASURER	50.00 2.00			X				597,679	0	203,026
(3) TERENCE M HEALY VICE PRESIDENT & REG MGR	50.00			X				435,129	0	160,276
(4) DENNIS L MARTIRE VICE PRESIDENT & REG MGR	50.00			X				373,912	0	146,780
(5) JOHN F PENN VICE PRESIDENT & REG MGR	50.00			X				387,636	49,816	145,083
(6) JOSEPH S MANCINELLI VICE PRESIDENT & REG MGR	50.00			X				359,623	0	103,323
(7) OSCAR DE LA TORRE VICE PRESIDENT	12.00			X				109,823	0	63,620
(8) PAUL V HOGROGIAN VICE PRESIDENT	12.00			X				89,805	0	62,456
(9) RALPH E COLE VICE PRESIDENT	12.00			X				112,367	157,775	69,103
(10) RAYMOND M POCINO VICE PRESIDENT & REG MGR	50.00			X				386,535	18,632	124,744
(11) ROBERT E RICHARDSON VICE PRESIDENT & REG MGR	50.00			X				395,789	117,209	145,083
(12) ROBERT F ABBOTT VICE PRESIDENT & REG MGR	50.00			X				369,166	0	130,833
(13) ROCCO DAVIS VICE PRESIDENT & REG MGR	50.00			X				437,836	0	159,950
(14) SAMUEL STATEN JR VICE PRESIDENT	12.00			X				110,572	0	63,620
(15) SERGIO RASCON VICE PRESIDENT	12.00			X				112,493	0	63,620
(16) VINCENT R MASINO VICE PRES & ASST REG MGR	50.00			X				392,124	127,821	126,137
(17) BRIAN DONOHUE CHIEF OF STAFF	45.00					X		317,282	0	129,455

Part VII

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	7,114,845	568,967	2,615,711

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		
		3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		
		4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		
		5	No

Section B. Independent Contractors

(A)	(B)	(C)
Name and business address	Description of services	Compensation
DC ARENA LIMITED PARTNERSHIP PO BOX 418610 BOSTON, MA 02241	EVENTS VENUE	1,082,041
BOSTON PROPERTIES LIMITED PO BOX 3557 BOSTON, WA 02241	LANDLORD	412,306
TP CHICAGO LLC PO BOX 310749 DES MOINES, IA 50331	LANDLORD	312,962
INTERNATIONAL GATEWAY WEST LLC 12201 TUKWILA INTL SEATTLE, WA 98168	LANDLORD	253,025
UNION REALTY ADVISORS 1325 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20005	CONSULTANT	241,366

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

1a	Federated campaigns	1a	
b	Membership dues	1b	
c	Fundraising events	1c	
d	Related organizations	1d	
e	Government grants (contributions)	1e	
f	All other contributions, gifts, grants, and similar amounts not included above	1f	
g	Noncash contributions included in lines 1a - 1f:\$	1g	
h Total. Add lines 1a-1f			

Program Service Revenue

2a	PER CAPITA & OTHER FEES	Business Code				
		900099	92,771,601	92,771,601		
b						
c						
d						
e						
f	All other program service revenue.					
g Total. Add lines 2a-2f.		92,771,601				

Other Revenue

3	Investment income (including dividends, interest, and other similar amounts)		4,053,211			4,053,211	
4	Income from investment of tax-exempt bond proceeds						
5	Royalties						
6a	Gross rents	(i) Real	(ii) Personal				
		6a	3,185,779				
		b	Less: rental expenses	6b	4,140,871		
		c	Rental income or (loss)	6c	-955,092		
d Net rental income or (loss)			-955,092			-955,092	
7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		7a	77,982,659				
		b	Less: cost or other basis and sales expenses	7b	76,897,728	6,937	
		c	Gain or (loss)	7c	1,084,931	-6,937	
d Net gain or (loss)			1,077,994			1,077,994	
8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a					
b	Less: direct expenses	8b					
c Net income or (loss) from fundraising events							
9a	Gross income from gaming activities. See Part IV, line 19	9a					
b	Less: direct expenses	9b					
c Net income or (loss) from gaming activities							
10a	Gross sales of inventory, less						

returns and allowances . . .	10a	90,043				
b Less: cost of goods sold	10b	104,128				
c Net income or (loss) from sales of inventory . . .			-14,085	-14,085		
Miscellaneous Revenue	Business Code					
11a						
b						
c						
d All other revenue			10,542	10,542		
e Total. Add lines 11a–11d			10,542			
12 Total revenue. See instructions			96,944,171	92,768,058	0	4,176,113

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
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,703,387			
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	53,345			
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	9,730,563			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	22,683,170			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	5,142,332			
9 Other employee benefits	10,090,242			
10 Payroll taxes	1,822,870			
11 Fees for services (non-employees):				
a Management				
b Legal	911,198			
c Accounting	296,654			
d Lobbying	188,721			
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	257,134			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	782,434			
12 Advertising and promotion	816,244			
13 Office expenses	2,029,968			
14 Information technology	1,094,547			
15 Royalties				
16 Occupancy	3,408,571			
17 Travel	1,574,812			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	141,800			
20 Interest				
21 Payments to affiliates	4,882,543			
22 Depreciation, depletion, and amortization	1,870,960			
23 Insurance	416,512			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a LIUNA POLITICAL FUND CO	5,000,000			
b SPONSORSHIPS	764,931			
c ORGANIZING CAMPAIGN EXP	240,000			
d				
e All other expenses	122,484			
25 Total functional expenses. Add lines 1 through 24e	76,025,422			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

☐

				(A)		(B)	
				Beginning of year		End of year	
Assets	1	Cash—non-interest-bearing		4,190	1	4,190	
	2	Savings and temporary cash investments		20,087,287	2	26,269,631	
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net		1,644,041	4	1,889,803	
	5	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			5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6		
	7	Notes and loans receivable, net			7		
	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges			9		
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	76,946,517			
	b	Less: accumulated depreciation	10b	20,109,218	59,654,321	10c	56,837,299
	11	Investments—publicly traded securities		20,711,283	11	18,561,539	
	12	Investments—other securities. See Part IV, line 11		187,710,911	12	224,528,559	
	13	Investments—program-related. See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		330,806	15	662,138	
16	Total assets. Add lines 1 through 15 (must equal line 33)		290,142,839	16	328,753,159		
Liabilities	17	Accounts payable and accrued expenses			17		
	18	Grants payable			18		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21		
	22	Loans and other payables to 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			22		
	23	Secured mortgages and notes payable to unrelated third parties			23		
	24	Unsecured notes and loans payable to unrelated third parties			24		
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		514,656	25	1,714,145	
	26	Total liabilities. Add lines 17 through 25		514,656	26	1,714,145	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.						
	27	Net assets without donor restrictions		289,628,183	27	327,039,014	
	28	Net assets with donor restrictions			28		
	Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.						
	29	Capital stock or trust principal, or current funds			29		
	30	Paid-in or capital surplus, or land, building or equipment fund			30		
	31	Retained earnings, endowment, accumulated income, or other funds			31		
	32	Total net assets or fund balances		289,628,183	32	327,039,014	
	33	Total liabilities and net assets/fund balances		290,142,839	33	328,753,159	

Part XI

Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	96,944,171
2	Total expenses (must equal Part IX, column (A), line 25)	2	76,025,422
3	Revenue less expenses. Subtract line 2 from line 1	3	20,918,749
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	289,628,183
5	Net unrealized gains (losses) on investments	5	16,492,082
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (A))	10	327,039,014

Part XII

Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: ☐ Cash ☐ Accrual ☒ Other <u>Modified cash</u> If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a 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: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
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: ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis	Yes	
c 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.		No
3a 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 If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Additional Data

Return to Form

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

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 LABORERS' INTERNATIONAL UNION OF NORTH AMERICA	Employer identification number 53-0088501
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

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

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

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

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

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1) LIUNA PAC	905 16TH STREET NW WASHINGTON, DC 20006	52-0886981		88,696
2				
3				
4				
5				
6				

Part II-A

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.															
<table><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr><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></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.														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a. If zero or less, enter -0-															
i Subtract line 1f from line 1c. If zero or less, enter -0-															
j 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?		☐ Yes ☐ 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.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f 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
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

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
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Additional Data

[Return to Form](#)

Software ID:

Software Version:

Name of the organization LABORERS' INTERNATIONAL UNION OF NORTH AMERICA	Employer identification number 53-0088501
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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.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No	

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

1	Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area ☐ Protection of natural habitat ☐ Preservation of a certified historic structure ☐ Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____	
4	Number of states where property subject to conservation easement is located ▶ _____	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

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.

1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.	
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____ (ii) Assets included in Form 990, Part X ▶ \$ _____	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____ b Assets included in Form 990, Part X ▶ \$ _____	

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:

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

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
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a

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

(i) Unrelated organizations

(ii) Related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

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
1a Land		1,478,004		1,478,004
b Buildings		58,443,846	10,979,578	47,464,268
c Leasehold improvements		8,440,030	3,401,250	5,038,780
d Equipment		8,269,914	5,728,390	2,541,524
e Other		314,723		314,723
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				56,837,299

Schedule D (Form 990) 2020

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) AFL-CIO HOUSING INVESTMENT TRUST	11,650,828	F
(B) SSGA S & P 500 INDEX MUTUAL FUND	79,025,939	F
(C) INVESCO BALANCED-RISK ALLOCATION FUND	24,569,164	F
(D) VANGUARD INTERNATIONAL STOCK INDEX FUND	25,461,891	F
(E) COHEN & STEERS INSTITUTIONAL REALTY SHARES	23,370,354	F
(F) CORPORATE BONDS	30,964,500	F
(G) CORPORATE STOCKS	5,009,983	F
(H) CORPORATE BACKED SECURITIES	13,847,754	F
(I) GOVERNMENT BACKED SECURITIES	10,628,146	F
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	224,528,559	

Part VIII

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

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

Part IX

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

(a) Description	(b) Book value
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (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)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	1,714,145

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.

1	Total revenue, gains, and other support per audited financial statements	1	113,279,234
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	16,492,082
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-163,958
e	Add lines 2a through 2d	2e	16,328,124
3	Subtract line 2e from line 1	3	96,951,110
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	-6,939
c	Add lines 4a and 4b	4c	-6,939
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	96,944,171

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.

1	Total expenses and losses per audited financial statements	1	75,868,403
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	18,991
e	Add lines 2a through 2d	2e	18,991
3	Subtract line 2e from line 1	3	75,849,412
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	176,012
b	Other (Describe in Part XIII.)	4b	-2
c	Add lines 4a and 4b	4c	176,010
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	76,025,422

Part XIII

Supplemental Information

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

Return Reference	Explanation
PART X, LINE 2:	THE INTERNAL REVENUE SERVICE (IRS) HAS ADVISED THAT LIUNA QUALIFIES UNDER SECTION 501(C)(5) OF THE INTERNAL REVENUE CODE AND IS, THEREFORE, NOT SUBJECT TO TAX UNDER PRESENT INCOME TAX LAWS. FOR TAX PURPOSES, LIUNA TRAVEL, INC. IS CONSIDERED A TAXABLE ENTITY BY THE IRS. BOTH LIUNA AND LIUNA TRAVEL, INC. ARE NO LONGER SUBJECT TO FEDERAL AND STATE TAX EXAMINATIONS BY EITHER TAX AUTHORITY FOR YEARS BEFORE THE YEAR ENDED DECEMBER 31, 2017. LIUNA FOLLOWS THE AUTHORITATIVE GUIDANCE RELATING TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES INCLUDED IN ACCOUNTING STANDARDS CODIFICATION (ASC) TOPIC INCOME TAXES. THESE PROVISIONS PROVIDE CONSISTENT GUIDANCE FOR THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND PRESCRIBE A THRESHOLD OF "MORE LIKELY THAN NOT" FOR RECOGNITION AND DE-RECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. LIUNA PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YEAR ENDED DECEMBER 31, 2020, AND DETERMINED THAT THERE WERE NO ADDITIONAL MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE AN EFFECT ON ITS TAX-EXEMPT STATUS.
PART XI, LINE 2D - OTHER ADJUSTMENTS:	INCOME OF LIUNA TRAVEL 12,054. INVESTMENT EXPENSES NETTED AGAINST REVENUE ON AUDITED FINANCIAL STATEMENTS -176,012.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	LOSS ON DISPOSAL OF FIXED ASSETS -6,937. ROUNDING -2.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	EXPENSES OF LIUNA TRAVEL 12,054. LOSS ON DISPOSAL OF FIXED ASSETS 6,937.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	ROUNDING -2.

Additional Data

[Return to Form](#)

Software ID:

Software Version:

Name of the organization
LABORERS' INTERNATIONAL UNION
OF NORTH AMERICA

Employer identification number
53-0088501

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants or other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	2	20	PROGRAM SERVICES	SEE ORGANIZATIONAL MISSION	3,595,986
(2) NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	2	20	GRANTS TO RECIPIENTS LOCATED IN REGION		38,345
(3) EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		15,000
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	2	20			3,649,331
b Total from continuation sheets to Part I.	0	0			0
c Totals (add lines 3a and 3b)	2	20			3,649,331

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	GENERAL SUPPORT	10,000	WIRE			
(2)			NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	GENERAL SUPPORT	38,345	CHECK			
(3)			EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	GENERAL SUPPORT	5,000	WIRE			
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

2

1

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1

Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☐ Yes

☒ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)*

☐ Yes

☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☐ Yes

☒ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☐ Yes

☒ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)*

☐ Yes

☒ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).*

☐ Yes

☒ No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

[illegible]

Additional Data

Software ID:

Software Version:

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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 for the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
LABORERS' INTERNATIONAL UNION
OF NORTH AMERICA

Employer identification number
53-0088501

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) CAPITAL & MAIN 1910 W SUNSET BLVD SUITE 740 LOS ANGELES,CA 90026	81-0895767	501 (C)(3)	30,000				GENERAL SUPPORT
(2) CENTER FOR MILITARY RECRUITMENT ASSESSMENT AND VETERANS EMPLOYMENT 815 16TH STREET NW SUITE 600 WASHINGTON,DC 20006	43-1972568	501 (C)(3)	50,000				GENERAL SUPPORT
(3) EDWARD M KENNEDY INSTITUTE FOR THE UNITED STATES SENATE 210 MORRISSEY BOULEVARD BOSTON,MA 02125	27-0963869	501 (C)(3)	100,000				GENERAL SUPPORT
(4) JOHN BURTON ADVOCATES FOR YOUTH 235 MONTGOMERY STREET STE 1142 SAN FRANCISCO,CA 94104	81-2600695	501 (C)(3)	10,000				GENERAL SUPPORT
(5) LABOR COUNCIL FOR LATIN AMERICAN ADVANCEMENT 815 16TH STREET NW 3RD FLOOR WASHINGTON,DC 20006	52-1002207	501 (C)(3)	20,000				GENERAL SUPPORT
(6) LABORERS' DISTRICT COUNCIL CHARITABLE FOUNDATION 999 MCCLINTOCK DRIVE STE 300 BURR RIDGE,IL 60527	26-2865687	501 (C)(3)	10,000				GENERAL SUPPORT
(7) NEW ENGLAND LABORERS' APPRENTICESHIP ADVANCEMENT 226 SOUTH MAIN STREET PROVIDENCE,RI 02903	03-0466664	501 (C)(3)	150,000				GENERAL SUPPORT
(8) OPERATION NO PERSON LEFT BEHIND INC PO BOX 132 LIBERTYTOWN,MD 21762	81-1602191	501 (C)(3)	5,000				GENERAL SUPPORT
(9) THE PEGGY BROWNING FUND 100 SOUTH BROAD STREET STE 1208 PHILADELPHIA,PA 19110	23-2887086	501 (C)(3)	10,000				GENERAL SUPPORT
(10) UNITE HERE EDUCATION AND SUPPORT FUND 275 SEVENTH AVENUE 16TH FL NEW YORK,NY 10001	52-2351515	501 (C)(3)	25,000				GENERAL SUPPORT
(11) UNION SPORTSMEN'S ALLIANCE 4800 NORTHFIELD LANE SPRING HILL,TN 37174	27-2345009	501 (C)(3)	175,000				GENERAL SUPPORT
(12) WASHINGTON	52-2254430	501 (C)(3)	10,000				GENERAL SUPPORT

IRELAND PROGRAM 620 F STREET NW SUITE 747 WASHINGTON,DC 20004							
(13) TRANSPORTATION CONSTRUCTION COALITION 250 E STREET SW SUITE 900 WASHINGTON,DC 20024	53-0026395	501 (C)(6)	10,000				GENERAL SUPPORT
(14) ENERGY EQUIPMENT AND INFRASTRUCTURE ALLIANCE INC 601 PENNSYLVANIA AVE NW SUITE 900 WASHINGTON,DC 20004	32-0374377	501 (C)(6)	15,000				GENERAL SUPPORT
(15) AMERICANS FOR ECONOMIC GROWTH DBA REBUILD USA PO BOX 35522 WASHINGTON,DC 20033	46-3343083	501 (C)(4)	1,000,000				GENERAL SUPPORT
(16) GOOD JOBS FIRST 1380 MONROE STREET NW PMB 405 WASHINGTON,DC 20010	82-0542649	501 (C)(3)	50,000				GENERAL SUPPORT
(17) TOYS FOR TOTS 18251 QUANTICO GATEWAY DRIVE TRIANGLE,VA 221721776	20-3021444	501 (C)(3)	10,000				GENERAL SUPPORT
(18) WEST VIRGINIA UNIVERSITY FOUNDATION ONE WATERFRONT PLACE 7TH FLOOR MORGANTOWN,WV 26507	55-6017181	501 (C)(3)	10,000				GENERAL SUPPORT

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:
Software Version:

Name of the organization
LABORERS' INTERNATIONAL UNION
OF NORTH AMERICA

Employer identification number
53-0088501

Part I Questions Regarding Compensation

	Yes	No
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. ☒ First-class or charter travel ☒ Travel for companions ☒ Tax idemnification and gross-up payments ☐ Discretionary spending account ☒ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ 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	Yes	
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?	Yes	
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. ☐ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations ☐ Written employment contract ☐ Compensation survey or study ☒ 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.		No
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)?		

Part II

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1TERENCE M O'SULLIVAN GENERAL PRESIDENT	(i)	592,894	0	213,983	168,404	40,830	1,016,111	0
	(ii)	0	0	0	0	- 0	- 0	0
2ARMAND E SABITONI GENERAL SECRETARY-TREASURER	(i)	570,000	0	27,679	162,450	40,576	800,705	0
	(ii)	0	0	0	0	- 0	- 0	0
3TERRENCE M HEALY VICE PRESIDENT & REG MGR	(i)	412,243	0	22,886	121,433	38,843	595,405	0
	(ii)	0	0	0	0	- 0	- 0	0
4DENNIS L MARTIRE VICE PRESIDENT & REG MGR	(i)	362,459	0	11,453	108,489	38,291	520,692	0
	(ii)	0	0	0	0	- 0	- 0	0
5JOHN F PENN VICE PRESIDENT & REG MGR	(i)	356,189	0	31,447	106,859	38,224	532,719	0
	(ii)	0	0	49,816	0	- 0	- 49,816	0
6JOSEPH S MANCINELLI VICE PRESIDENT & REG MGR	(i)	351,350	0	8,273	91,351	11,972	462,946	0
	(ii)	0	0	0	0	- 0	- 0	0
7OSCAR DE LA TORRE VICE PRESIDENT	(i)	109,658	0	165	28,511	35,109	173,443	0
	(ii)	0	0	0	0	- 0	- 0	0
8PAUL V HOGROGIAN VICE PRESIDENT	(i)	89,210	0	595	27,656	34,800	152,261	0
	(ii)	0	0	0	0	- 0	- 0	0
9RALPH E COLE VICE PRESIDENT	(i)	109,658	0	2,709	33,994	35,109	181,470	0
	(ii)	0	0	157,775	0	- 0	- 157,775	0
10RAYMOND M POCINO VICE PRESIDENT & REG MGR	(i)	362,099	0	24,436	108,396	16,348	511,279	0
	(ii)	0	0	18,632	0	- 0	- 18,632	0
11ROBERT E RICHARDSON VICE PRESIDENT & REG MGR	(i)	356,189	0	39,600	106,859	38,224	540,872	0
	(ii)	0	0	117,209	0	- 0	- 117,209	0
12ROBERT F ABBOTT VICE PRESIDENT & REG MGR	(i)	356,189	0	12,977	92,609	38,224	499,999	0
	(ii)	0	0	0	0	- 0	- 0	0
13ROCCO DAVIS VICE PRESIDENT & REG MGR	(i)	411,544	0	26,292	121,251	38,699	597,786	0
	(ii)	0	0	0	0	- 0	- 0	0
14SAMUEL STATEN JR VICE PRESIDENT	(i)	109,658	0	914	28,511	35,109	174,192	0
	(ii)	0	0	0	0	- 0	- 0	0
15SERGIO RASCON VICE PRESIDENT	(i)	109,658	0	2,835	28,511	35,109	176,113	0
	(ii)	0	0	0	0	- 0	- 0	0
16VINCENT R MASINO VICE PRES & ASST REG MGR	(i)	367,459	0	24,665	109,789	16,348	518,261	0
	(ii)	0	0	127,821	0	- 0	- 127,821	0
17BRIAN DONOHUE CHIEF OF STAFF	(i)	299,324	0	17,958	91,920	37,535	446,737	0
	(ii)	0	0	0	0	- 0	- 0	0
18DONATO A BIANCO ASST REG MGR	(i)	235,897	0	12,688	73,128	36,834	358,547	0
	(ii)	0	0	0	0	- 0	- 0	0
19MICHAEL BARRETT ASSOCIATE GENERAL COUNSEL	(i)	308,030	0	5,212	94,338	37,616	445,196	0
	(ii)	0	0	0	0	- 0	- 0	0
20STEPHEN FARNER ASST REG MGR	(i)	302,057	0	15,485	92,785	37,628	447,955	0
	(ii)	0	0	0	0	- 0	- 0	0
21THEODORE GREEN GENERAL COUNSEL	(i)	407,508	0	33,320	120,202	16,845	577,875	0
	(ii)	0	0	97,714	0	- 0	- 97,714	0

Part III **Supplemental Information**

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

Return Reference	Explanation
PART I, LINE 1A	FIRST CLASS TRAVEL - GENERAL EXECUTIVE BOARD IS ALLOWED TO TRAVEL FIRST CLASS. TRAVEL FOR COMPANIONS - THE CONSTITUTION OF LIUNA STATES THAT "TRAVEL EXPENSES MAY ALSO BE PROVIDED FOR AN OFFICER'S SPOUSE WHO ACCOMPANIES THE OFFICER WHEN THE OFFICER TRAVELS IN CONNECTION WITH THE PERFORMANCE OF OFFICIAL DUTIES AND RESPONSIBILITIES." THESE AMOUNTS ARE INCLUDED AS TAXABLE INCOME TO THE OFFICER. TAX INDEMNIFICATION AND GROSS-UP PAYMENTS AND HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE - THE CONSTITUTION OF LIUNA STATES THAT "THE GENERAL PRESIDENT AND GENERAL SECRETARY-TREASURER SHALL EACH BE PROVIDED WITH THE USE OF ACCOMODATIONS PURCHASED OR LEASED BY THE UNION WHEN SUCH OFFICERS ARE IN THE CITY OF WASHINGTON, DISTRICT OF COLUMBIA, IN CONNECTION WITH THE PERFORMANCE OF THEIR DUTIES AND RESPONSIBILITIES." THE GENERAL EXECUTIVE BOARD HAS AUTHORIZED LIUNA TO RENT HOUSING BASED ON THE CONSTITUTION FOR GENERAL PRESIDENT TERENCE M. O'SULLIVAN AND GENERAL SECRETARY-TREASURER ARMAND E. SABITONI. AUTHORIZATION WAS GIVEN TO GROSS-UP HOUSING EXPENSES TO HANDLE ALL THE TAXES FOR THE GENERAL PRESIDENT. LIUNA DOES NOT GROSS-UP HOUSING EXPENSES FOR THE GENERAL SECRETARY-TREASURER.
PART I, LINE 4B	LABORERS' INTERNATIONAL UNION OF NORTH AMERICA HAD A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN TO PAY BENEFITS THAT ARE NOT PAYABLE FROM THE PENSION FUND BECAUSE OF BENEFIT AND COMPENSATION LIMITS OF THE INTERNAL REVENUE CODE. THE PLAN IS NOW ADMINISTERED BY THE LABORERS'STAFF AND AFFILIATES PENSION FUND. IN 2019, RALPH E. COLE RECEIVED \$157,775, THEODORE GREEN RECEIVED \$97,714, VINCENT R. MASINO RECIEVED \$127,821, JOHN F. PENN RECEIVED \$49,816, RAYMOND M. POCINO RECIEVED \$18,632 AND ROBERT E. RICHARDSON RECIEVED \$117,209.

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Name of the organization
LABORERS' INTERNATIONAL UNION
OF NORTH AMERICA

Employer identification number
53-0088501

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

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

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ ▶ _____

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

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

Total ▶ \$ _____

Part III Grants or Assistance Benefiting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

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

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) YVETTE PENA-O'SULLIVAN	FAMILY MEMBER OF TERENCE M. O'SULLIVAN	244,155	EMPLOYED BY LIUNA		No
(2) KEVIN O'SULLIVAN	FAMILY MEMBER OF TERENCE M. O'SULLIVAN	211,976	EMPLOYED BY LIUNA		No
(3) BRENDAN O'SULLIVAN	FAMILY MEMBER OF TERENCE M. O'SULLIVAN	224,402	EMPLOYED BY LIUNA		No
(4) CAITLIN O'SULLIVAN	FAMILY MEMBER OF TERENCE M. O'SULLIVAN	71,822	EMPLOYED BY LIUNA		No
(5) PATRICK HEALY	FAMILY MEMBER OF TERRENCE HEALY	233,883	EMPLOYED BY LIUNA		No
(6) CHRISTOPHER SABITONI	FAMILY MEMBER OF ARMAND E. SABITONI	195,786	EMPLOYED BY LIUNA		No
(7) CHRISTOPHER BURNETT	FAMILY MEMBER OF ARMAND E. SABITONI	162,800	EMPLOYED BY LIUNA		No
(8) MARIO DE LA TORRE JR	FAMILY MEMBER OF OSCAR DE LA TORRE	161,462	EMPLOYED BY LIUNA		No
(9) ROBERT RICHARDSON III	FAMILY MEMBER OF ROBERT RICHARDSON	163,820	EMPLOYED BY LIUNA		No
(10) YANIRA MERINO	FAMILY MEMBER OF RAYMOND POCINO	168,768	EMPLOYED BY LIUNA		No

Part V Supplemental Information

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

Return Reference	Explanation
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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.**
▶ **Attach to Form 990 or 990-EZ.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization
LABORERS' INTERNATIONAL UNION
OF NORTH AMERICA

Employer identification number

53-0088501

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	EVERY FIVE YEARS MEMBERS OF LABORERS' INTERNATIONAL UNION OF NORTH AMERICA (LIUNA) ELECT DELEGATES THAT GO TO THE CONVENTION. THE DELEGATES NOMINATE AND ELECT THE GENERAL EXECUTIVE BOARD MEMBERS, WITH THE EXCEPTION OF THE PRESIDENT OF THE MAIL HANDLERS DIVISION, WHO IS AN EX-OFFICIO MEMBER OF THE BOARD. DELEGATES FROM THE MAIL HANDLERS DIVISION CANNOT VOTE TO NOMINATE VICE PRESIDENTS IN THEIR REGION. ASSOCIATE MAIL HANDLERS ARE NOT REGULAR MEMBERS AND HAVE NO VOTING RIGHTS. RETIREE MEMBERS OF LIUNA HAVE LIMITED VOTING RIGHTS. DELEGATES ALSO APPROVE RESOLUTIONS AT THE CONVENTION. THESE RESOLUTIONS CONCERN THE OPERATIONS OF THE LABORERS' INTERNATIONAL UNION OF NORTH AMERICAN AND ALSO CHANGES TO THE CONSTITUTION, WHICH IS THE GOVERNING DOCUMENT OF LIUNA.
FORM 990, PART VI, SECTION A, LINE 7A	SEE SUMMARY ABOVE.
FORM 990, PART VI, SECTION A, LINE 7B	SEE SUMMARY ABOVE
FORM 990, PART VI, SECTION B, LINE 11B	FORM 990 WAS REVIEWED BY THE GENERAL PRESIDENT, GENERAL SECRETARY-TREASURER, AND GENERAL COUNSEL FOR THEIR APPROVAL. A COPY OF THE FORM 990 WAS MADE AVAILABLE TO EACH GENERAL EXECUTIVE BOARD MEMBER BEFORE IT WAS FILED.
FORM 990, PART VI, SECTION B, LINE 12C	THE WRITTEN CONFLICT OF INTEREST POLICY IS INCLUDED IN LIUNA POLICIES. ANY MEMBER OR EMPLOYEE OF THE ORGANIZATION CAN CONTACT THE LIUNA GENERAL PRESIDENT WITH ANY COMPLAINT ARISING UNDER THE CONSTITUTION, THE LIUNA POLICIES, OR ANY OTHER DISCIPLINARY RULE, REGULATION, PRACTICE, OR PROCEDURE ADOPTED BY THE LIUNA GENERAL EXECUTIVE BOARD. LIUNA POLICIES EXPLAIN THE DISCIPLINARY PROCEDURES THAT MUST BE FOLLOWED WHEN NECESSARY AND THE INDEPENDENT OFFICERS WHO ARE ENTRUSTED TO ENFORCE THE CODE. THE US DEPARTMENT OF LABOR REQUIRES ALL NON-CLERICAL EMPLOYEES TO REPORT ON FORM LM-30 POTENTIAL SITUATIONS WHERE THERE MAY BE CONFLICTS OF INTEREST. THIS INFORMATION IS OPEN TO THE PUBLIC.
FORM 990, PART VI, SECTION C, LINE 19	LIUNA FILES A DEPARTMENT OF LABOR (DOL) FORM LM-2, WHICH IS AVAILABLE TO THE PUBLIC THROUGH THE DOL'S WEBSITE (OLMS DIVISION, ONLINE PUBLIC DISCLOSURE ROOM). THIS FORM IS AN EXTENSIVE FINANCIAL REPORT CONCERNING LIUNA. THE MOST RECENT CONSTITUTION (GOVERNING DOCUMENT) OF LIUNA HAD BEEN FILED WITH THE DEPARTMENT OF LABOR WITH THE 2017 LM-2 REPORT. AS DISCUSSED IN THE ANSWER TO PART VI, LINE 12(C) THE CONFLICT OF INTEREST POLICY IS IN THE ETHICS AND DISCIPLINARY PROCEDURE, WHICH IS PART OF THE CONSTITUTION.

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LABORERS' INTERNATIONAL UNION
OF NORTH AMERICA

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)LIUNA PAC 905 16TH STREET NW WASHINGTON, DC 20006 52-0886981	POLITICAL ORGANIZATION	DC	527		N/A		No
(2)LIUNA STAFF & AFFILIATES PENSION FUND 905 16TH STREET NW WASHINGTON, DC 20006 52-0743575	PENSION FUND	DC	501(A)		N/A		No
(3)LIUNA NATIONAL 401 K RETIREMEMT SAVINGS PLAN 905 16TH STREET NW WASHINGTON, DC 20006 52-6941497	401K FUND	DC	501(A)		N/A		No
(4)LABORERS' POLITICAL LEAGUE - EDUCATION FUND 905 16TH STREET NW WASHINGTON, DC 20006 52-2257725	POLITICAL ORGANIZATION	DC	527		N/A		No
(5)NATIONAL POSTAL MAIL HANDLERS UNION PAC 905 16TH STREET NW WASHINGTON, DC 20006 20-8609421	POLITICAL ORGANIZATION	DC	527		N/A		No
(6)TERENCE J O'SULLIVAN LIUNA CHARITABLE FOUNDATION 905 16TH STREET NW WASHINGTON, DC 20006 33-1082848	FINANCIAL ASSISTANCE TO NON-PROFITS AND MEMBERS	DC	501(C)(5)		N/A		No
(7)LIUNA BUILDING AMERICA 905 16TH STREET NW WASHINGTON, DC 20006 47-1906702	POLITICAL ORGANIZATION	DC	527		N/A		No
(8)LABORERS' INTERNATIONAL UNION OF NORTH AMERICA POLITICAL FUND 905 16TH STREET NW WASHINGTON, DC 20006 85-2004948	POLITICAL ORGANIZATION	DC	527		N/A		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
(1)LIUNA TRAVEL INC 905 16TH STREET NW WASHINGTON, DC 20006 52-2088637	TRAVEL AGENT	DC	LABORERS' INTERNATIONAL UNION OF NORTH AMERICA	C	12,054	44,257	100.000 %	Yes	

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

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

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

- 1a

Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity

1b

Gift, grant, or capital contribution to related organization(s)

1c

Gift, grant, or capital contribution from related organization(s)

1d

Loans or loan guarantees to or for related organization(s)

1e

Loans or loan guarantees by related organization(s)

1f

Dividends from related organization(s)

1g

Sale of assets to related organization(s)

1h

Purchase of assets from related organization(s)

1i

Exchange of assets with related organization(s)

1j

Lease of facilities, equipment, or other assets to related organization(s)

1k

Lease of facilities, equipment, or other assets from related organization(s)

1l

Performance of services or membership or fundraising solicitations for related organization(s)

1m

Performance of services or membership or fundraising solicitations by related organization(s)

1n

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

1o

Sharing of paid employees with related organization(s)

1p

Reimbursement paid to related organization(s) for expenses

1q

Reimbursement paid by related organization(s) for expenses

1r

Other transfer of cash or property to related organization(s)

1s

Other transfer of cash or property from related organization(s)

Yes

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

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

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

[illegible]

Part VII

Supplemental Information

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

Return Reference	Explanation
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Schedule R (Form 990) 2020

Additional Data

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