SCANNED AUG 18 2021

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

## **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

2018

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

Department	of	the	Treas	un
Internal Rev	eni	Je S	ervice	•

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

		if the Treasury nue Service	► Go to www.irs.gov/Form990 for instructions and the lates	t information.	1909	Inspection
A	For the	2018 cale	ndar year, or tax year beginning Oct 1 , 2018, and end	ing Se	p 30	<b>, 20</b> 1 9
В	Check if	fapplicable	C Name of organization UFCW LOCAL 1776KS WESTERN DIVISION AND EMPLOYERS'	HEALTH FUND	D Employ	er identification number
	Address	change	Doing business as		23-7	083247
	Name cl	hange	Number and street (or P O box if mail is not delivered to street address) Room/s	suite	E Telepho	ne number
	Initial re	turn	345 SOUTHPOINTE BOULVARD 200		(724	743-4260
	Final retu	ım/terminated	City or town, state or province, country, and ZIP or foreign postal code			
	Amende	ed return	CANONSBURG, PA 15317		<b>G</b> Gross re	eceipts \$ 54,033,758.
	Applicat	tion pending	F Name and address of principal officer	H(a) Is this a gr		subordinates? Yes No
	• •		CHERYL HAMERSKI, 345 SOUTHPOINTE BLVD., CANONSBURG, PA 15			
_	Tax-exe	mpt status	□ 501(c)(3) 🗵 501(c) ( 9) ◄ (insert no ) □ 4947(a)(1) or □ 527			list (see instructions)
J	Website		/A 1	H(c) Group	exemption	number ►
ĸ	Form of	organization [	Corporation   Trust  Association  Other ► L Year of form.	ation 1968	3 M State	of legal domicile PA
P	art I	Summ	ary			
	1		scribe the organization's mission or most significant activities: TO I	PAY HEALTI	H BENE	FITS
ė		•				
au						
Governance	2	Check th	is box ▶ ☐ if the organization discontinued its operations or disposed	of more than	25% of	its net assets.
Š	3	Number o	of voting members of the governing body (Part VI, line 1a) RF(	CEIVED	3	6
8	4	Number o	of independent voting members of the governing body (Part VI, line 16	LIVED	_ 4	6
Activities &	5		nber of individuals employed in calendar year 2018 (Part V; ine 2a)		5	15
ΞΞ	6		nber of volunteers (estimate if necessary)	. <b>2 2</b> 2020 .	6	0
Act	7a		elated business revenue from Part VIII, column (C), line 12		/ 7a	0.
	Ь		ated business taxable income from Form 990-T, line 38	EM. LIT	' 7b	0.
				FIATE TO	ar	Current Year
d)	8	Contribut	tions and grants (Part VIII, line 1h)			
Ž	9		service revenue (Part VIII, line 2g)	48,019	9,970.	46,526,120.
Revenue	10	_	nt income (Part VIII, column (A), lines 3, 4, and 7d)		8,887.	1,523,497.
Œ	11		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		700.0	
	12		enue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	49,828	8.857.	48,049,617.
	13		nd similar amounts paid (Part IX, column (A), lines 1-3)		7	
	14	Benefits	oald to or for members (Part IX, column (A), line 4)	51,892	2,488.	48,474,052.
s	15	•	other compensation, employee benefits (Part IX, column (A), lines 5-10)		,298.	1,002,560.
Expenses	16a	Professio	nal fundraising fees (Part IX, column (A), line 11e)		•	,
tbe	b		draising expenses (Part IX, column (D), line 25) ▶			
ŵ	17		penses (Part IX, column (A), lines 11a-11d, 11f-24e)	410	772.	413,617.
	18	Total exp	enses. Add lines 13-17 (must equal Part IX, column (A), line 25)	53,270		49,890,229.
	19	Revenue	less expenses. Subtract line 18 from line 12	-3,441		-1,840,612.
es es				Beginning of Cu	rrent Year	End of Year
Net Assets or Fund Balances	20	Total ass	ets (Part X, line 16)	56,462	751.	55,884,300.
t Ass	21	Total liab	ılıtıes (Part X, Iıne 26)	1,291	,536.	1,310,227.
캶	22	Net asset	s or fund balances. Subtract line 21 from line 20	55,171		54,574,073.
Pa	art II	Signat	ықе Block			
Un	der pena e, correc	ilties of perjui	ry. I declare that I have examined this return, including accompanying schedules and state the Declaration of preparer (other than officer) is based on all information of which prepare	ements, and to the er has any knowle	ne best of r edge	ny knowledge and belief, it is
			Hala Withele		1-24	.2020
Sig	ın	Signa	ature of officer	Dat		
He		רוא ב	THONY HEAFER, TRUSTEE			
	-		or print name and title			
_	•	<u> </u>		Date		PTIN
Pa				5/27/20	Check [	if   P00828366
	epare	71			<del>'</del>	<del> </del>
Us	e Onl	ly Firm's na				27-0889793
Ma	v the IF		ddress ► 5000 WATERDAM PLAZA DR STE 220, MCMURRAY, PA			X Yes No
ivia	y 1110 11	. U GIOCGO	and retain with the property shown above; (see instructions)			🖂 ies 🗀 140

REV 05/20/19 PRO

orm 9	90 (2018)				Page 2
Part		ment of Program Service			
_			response or note to any line in this Pa	art III <u> </u>	
1		ribe the organization's missi			
,					
2	Did the orga	anızatıon undertake anv sigr	nificant program services during the year	ar which were not listed on the	
	prior Form 9	990 or 990-EZ?			☐ Yes 区 No
_		scribe these new services or			
3	services? .		g, or make significant changes in ho		☐ Yes ⊠ No
		scribe these changes on Sch			
4		<del>-</del>	ervice accomplishments for each of its	three largest program services,	as measured by
			<ul><li>(4) organizations are required to report for each program service reported.</li></ul>	the amount of grants and alloc	ations to others
	•				
4a			including grants of \$		
			PRESCRIPTIONS, LIFE & DIS-M		
				·	
4b	(Code.	(Expenses \$	including grants of \$	) (Revenue \$	)
		***************************************			
		***************************************			
		· · · · · · · · · · · · · · · · · · ·			
4c	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$	)
	************				
	***************************************				
					••••
				•••••	
4d	Other progra	am services (Describe in Sch	nedule O.)		
	(Expenses \$			)	
4e	Total progra	m service expenses >			



Part IV	Checklist	of Requi	red Scher	tules
	Uncomise	OI I I CUUI	I CU OCIIC	<b>34163</b>

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation? If "Yes," complete Schedule B. Schedule of Contributors (see instructions?) 2 Is the organization required to complete Schedule B. Schedule of Contributors (see instructions?) 3 Is the organization required to complete Schedule B. Schedule of Contributors (see instructions?) 4 Section 501(c)(4) organizations, Dut the organization engage in lobbying activities, or have a section 501(t) election in effect during the tax year." If "Yes," complete Schedule C, Part II 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 96-197 If "Yes," complete Schedule C, Part II 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the night to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 7 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the networment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 8 Did the organization maintain collections of works of art, historical treasures, or other similar assess? If "Yes," complete Schedule D, Part II 8 Did the organization maintain collections of works of art, historical treasures, or other similar assess? If "Yes," complete Schedule D, Part V. 9 Did the organization services" If "Yes," complete Schedule D, Part V. 10 Did the organization report an amount for resemble organization, determined the part X, in part V. 11 If the organization report an amount for revestments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part X V. 11 Ut the organization report an amount for revestments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part X V. 11 Did the organization report an amount for revestments—oth				res	NO
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  Did the organization regoge in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II  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  be the organization a section 501(c)(4), 501(c)(5), 501(c)(6), 50			1		×
3 De the organization engage in direct of indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.  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 I.  5 Is the organization amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III I.  6 Did the organization maintain any donor adversd 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 II II.  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 II.  8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  9 Did the organization report an amount in Part X, line 21, for escrive or custodial account liability, serve as a custodian for amounts not listed in Part X, in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V.  10 Did the organization report an amount for Infand, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V.  11 If the organization report an amount for least publication services? If "Yes," complete Schedule D, Part V.  12 Did the organization report an amount for least publication services? Schedule D, Part V.  13 Did the organization report an amount for other assets in Part X, line 12? If If I I I I I I I X V.  14 Did the organization report an amount for other assets in Part X, line 12? If I I I I I I I I I I I I I I I I I I			2		×
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 "Fes," complete Schedule C, Part III 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 84-197 If "Yes," complete Schedule C, Part III is the organization and the provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II is 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 III is the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III is the organization report an amount in Part X, Ine 21, for escroy or custodial account liability, serve as a custodian for amounts not listed in Part X, for provide oredit courseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part VI is the organization, directly or through a related organization, hold assets in temporarily restricted endowments (in Yes," complete Schedule D, Part VI is the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI is the organization report an amount for investments—other securities in Part X, line 10 If the Is X is the organization report an amount for ories therefore the securities in Part X, line 11 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI is X in the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 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 "Ye	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	3		
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  4 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? II "Yes," complete Schedule D, Part II  5 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical advance, or hostoric structures? If "Yes," complete Schedule D, Part III  5 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  5 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, inc 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, inc 21, Part IV III If 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 III III the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IVII.  6 Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part IVII.  7 Did the organization report an amount for other assets 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 XIII.  8 Did the organization report an amount for other assets in Part X, line 16? III "Yes," complete Schedule D, Part XIII.  9 Did the organization report an amount for other assets in Part X, line 16? If "Yes," complete Schedule D, Part XIII.  10 Did the organization in pa	4		4		-
6 Dd the organization maintain any donor advised funds or any similar funds or accounts for which donors have the night to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II  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 II  8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II II  9 Did the organization report an amount in Part X, line 21, for escrive 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 V II  10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, cor quasi-endowments? If "Yes," complete Schedule D, Part V II, VII, VII, VII, X 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 VIII  b) Did the organization report an amount for investments—other securities 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  b) 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 VIII  c) Did the organization separate, independent audited financial statements for the tax year? If wes," complete Schedule D, Part X III dx X  11d X  12a Did the organization has esparate, independent audited financial statements for the tax year? If Wes," complete Schedule D, Part X III dx X  12b Was the organization have aggregate revenues or expenses of more than \$10	5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	5		×
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 and the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II and the organization proper 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 V.  Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasis-endowments? If "Yes," ormplete Schedule D, Part V.  If the organization sawser to any of the following questions is "Yes," then complete Schedule D, Part V.  If the organization amount for the following questions is "Yes," then complete Schedule D, Part V.  If the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII.  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 VIII.  Did the organization report an amount for other liabilities 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 VIII.  Did the organization report an amount for other liabilities 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 VIII.  Did the organization separate independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII  Did the organization orbit an separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII  Did t	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	6		×
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  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, for provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V I.  10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasis-endowments? If "Yes," complete Schedule D, Part V III. If the organization report an amount for limiting the properties Schedule D, Part V III. If the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part V III. In the 16? If "Yes," complete Schedule D, Part V III. In the 16? If "Yes," complete Schedule D, Part V III. In the 16? If "Yes," complete Schedule D, Part V III. In the 16? If "Yes," complete Schedule D, Part V III. In the organization report an amount for other liabilities 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 V III. In the organization report an amount for other liabilities 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 X III. In the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X III. In the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X III. In the organization in Internation in Consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III. In the organization in Internation in Consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III. In the organizatio	7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
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.  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 VI.  11 If the organization answer to any of the following questions is "Yes," in the complete Schedule D, Part VI.  12 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII.  13 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 VIII.  14 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.  15 Did the organization report an amount for other assets 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.  16 Did the organization report an amount for other assets 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 XI and XII.  17 Did the organization obtain separate independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part XI.  18 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part XI and XII.  18 Did the organization included in section 170(1)(1)(1)(1)(1) "Yes," complete Schedule P, Part XI and XII.  19 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for forgan individuals? If "Yes," complete Schedule P, Parts II and IV.  19 Did the organization report more than	8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8		×
endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V V, VII, VIII, 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 VII, VIII, VIII, IX, or X as applicable.  b Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII VII VIII VIII VIII VIII VIII VIII	9	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	9		×
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	10		10		×
complete Schedule D, Part VI  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.  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.  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 VIII.  e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Into the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X Into the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII is 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 is the organization and aschool described in section 170(b)(1)(A)(i))? If "Yes," complete Schedule E.  11b	11	VII, VIII, IX, or X as applicable.			
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	а	complete Schedule D, Part VI	11a	×	
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  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 X   110	b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		×
reported in Part X, line 16? If "Yes," complete Schedule D, Part IX  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  In Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII so promote In "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization as school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  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 II and IV.  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.  Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part XIII, lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  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 II.  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.  In the complete Schedule G, Part III.  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.  In the complete Schedule G, Part III.  Did the organ	С	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		×
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's hability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts X and XII is A 12b Did 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 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.  12a X 12b X 12a X 12a X 12a X 12a X 12b X 12	d	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	-		
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X   11f   x   Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII   x   12a	е		11e	×	
Schedule D, Parts XI and XII  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 13 Is the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E.  14a Did the organization maintain an office, employees, or agents outside of the United States?  15 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.  16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garnts or other assistance to or for or foreign individuals? If "Yes," complete Schedule F, Parts II and IV.  17 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.  18 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IXI, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  18 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 II  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  20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.  b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  20 b Und the organization report more than \$5,000 of grants or other assistance to any domestic organization or	f	· · · · · · · · · · · · · · · · · · ·	11f		×
"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  13	12a	Schedule D, Parts XI and XII	12a	×	
Did the organization maintain an office, employees, or agents outside of the United States?  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.  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.  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.  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)  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  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  19 If "Yes," complete Schedule G, Part III  20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20 a Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional			
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					
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			170		
for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		fundraising, business, investment, and program service activities outside the United States, or aggregate	14b		×
assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	15		15		×
Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	16		16		×
Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	17	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		×
If "Yes," complete Schedule G, Part III	18		18		×
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	19	If "Yes," complete Schedule G, Part III	<b></b>		×
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			<del></del>		X
		· · · · · · · · · · · · · · · · · · ·	20b		
	21		21		×

Part	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		×
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		×
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		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С.	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, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		×
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		×
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		×
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		×
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		×
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		×
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		×
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? If "Yes," complete Schedule R, Part I	33		×
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	×	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
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		×
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2 </i>	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		×
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	×	
Part				_
	Check if Schedule O contains a response or note to any line in this Part V			
.4	5-1	مسين	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	,		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	reportable gaming (gambling) winnings to prize winners?	1c	×	

Part '	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
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 15			1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	×	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		×
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
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		×
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		×
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
С	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		×
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	Ĺ		
	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			
е	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		ļ
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		ļ
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		ļ
10	Section 501(c)(7) organizations. Enter.			
a	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]			
11	Section 501(c)(12) organizations. Enter.			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
10-	against amounts due or received from them.)	12a		ļ
12a		144		ļ
	· · · · · · · · · · · · · · · · · · ·			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note. See the instructions for additional information the organization must report on Schedule O.	100		-
L	Enter the amount of reserves the organization is required to maintain by the states in which			
b	the organization is licensed to issue qualified health plans			
_	Enter the amount of reserves on hand			
с 14а	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		<del>                                     </del>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
13	excess parachute payment(s) during the year?	15		1
	If "Yes," see instructions and file Form 4720, Schedule N.			-
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
	If "Yes," complete Form 4720, Schedule O			

Part					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change				
04	Check if Schedule O contains a response or note to any line in this Part VI	· · · · ·	• •		<u> </u>
Secti	on A. Governing Body and Management			Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year	<b>1a</b> 6		163	1
ıa	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 .	<b>1b</b> 6	•		
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		×
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	er person?	3		×
4	Did the organization make any significant changes to its governing documents since the prior Form 9		4		×
5	Did the organization become aware during the year of a significant diversion of the organization	on's assets? .	5	<u> </u>	×
6	Did the organization have members or stockholders?		6		×
7a	Did the organization have members, stockholders, or other persons who had the power to	elect or appoint	7-		
	one or more members of the governing body?		7a		×
b	Are any governance decisions of the organization reserved to (or subject to approva stockholders, or persons other than the governing body?	i by) members,	7b		
0	Did the organization contemporaneously document the meetings held or written actions ur	dertaken during			×
8	the year by the following.	dertaken duning			
а	The governing body?		8a	×	_
b	Each committee with authority to act on behalf of the governing body?		8b	×	_
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot	ot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule C	)	9		×
Secti	on B. Policies (This Section B requests information about policies not required by the	e Internal Reven	ue C	ode.)	<del></del>
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		×
b	If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exemption of the control of t		10b	į	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body bef	-	11a	×	<u> </u>
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		×
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		12b		<del> </del>
С	Did the organization regularly and consistently monitor and enforce compliance with the	policy" If "Yes,"	12c		
40	describe in Schedule O how this was done		13		×
13 14	Did the organization have a written whistleblower policy?		14		×
15	Did the process for determining compensation of the following persons include a review a		<u> </u>		
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation				
а	The organization's CEO, Executive Director, or top management official		15a		×
b	Other officers or key employees of the organization		15b		×
	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 sim		L	<b> </b>	
	with a taxable entity during the year?		16a		×
b	If "Yes," did the organization follow a written policy or procedure requiring the organization	n to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps		16b		<b> </b>
Saati	organization's exempt status with respect to such arrangements?		TOD		<u> </u>
17	Let the states with which a copy of this Form 900 is required to be filed				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable	a) 990 and 990-			501(c)
10	(3)s only) available for public inspection. Indicate how you made these available. Check all that		,550		, o i (o)
	☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Sc				
19	Describe in Schedule O whether (and if so, how) the organization made its governing docume	•	erest	policy	, and
	financial statements available to the public during the tax year.		1	-,	
20	State the name, address, and telephone number of the person who possesses the organization				
	PLAN ADMINISTRATOR, 345 SOUTHPOINTE BLVD; SUITE, 200; CANONSBURG,	PA 15317 (7	24)7	43-4	4260

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

### 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, and 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.

List persons in the following order individual trustees or directors; institutional trustees, officers, key employees, highest compensated employees, and former such persons.

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)	box, office Individua	unles	Pos eck s pe	rson	than of the state	an tee)	(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
(1) ANTHONY HELFER UNION TRUSTEE	1.00	×						0.	0.	0.
(2) LANCE HUBER UNION TRUSTEE	1.00	×						0.	0.	0.
(3) EDWARD AUER UNION TRUSTEE	1.00	×						0.	0.	0.
(4) RAYMOND HUBER EMPLOYER TRUSTEE	1.00	×						0.	0.	0.
(5) DOUG BAILEY EMPLOYER TRUSTEE	1.00	×						0.	0.	0.
(6) LORA DIKUN EMPLOYER TRUSTEE	1.00	×						0.	0.	0.
(7) JULIE CURRY  ALTERNATE UNION TRUSTEE	1.00	×						0.	0.	0.
(8) TOM MALICK ALTERNATE UNION TRUSTEE	1.00	×						0.	0.	0.
(9) JAN TALERICO ALTERNATE EMPLOYER TRUSTEE	1.00	×						0.	0.	0.
(10) ERIC POLISCHAK ALTERNATE EMPLOYER TRUSTEE	1.00	×						0.	0.	0.
(11)										
(12)										
(13)										
(14)										

		(B)  Average hours per week (list any hours for related organizations below dotted line)	ox file Individua	ot ch unles	eck is pe	more that erson is bedirector/tri  Key employee		ntion more rson irecto	tion more son recto	re than on its both ctor/trus	th an stee)	Reportable compensation from	(E) Reportable compensation related organizatior (W-2/1099-MI	from ns	(F) Estimate amount of cother compensal from the organizati and relate organization		f on n d
(15)							8.										
(16)												—					
(17)																	
(18)																	
									,								
											<u> </u>						
(25)																	
1b c d	Sub-total	VII, Sectio	n A	-				<b>&gt; &gt; &gt;</b>	0.		0.			0.			
2	Total number of individuals (including but reportable compensation from the organization)	not limited				ed a		e) w	ho received mo	ore than \$10	0,000 c	of					
3	Did the organization list any former off employee on line 1a? If "Yes," complete S											3	Yes	No			
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of rep	oortal	ole d	com	per	satio	n a	nd other comp	ensation fro	m the	4		×			
5	Did any person listed on line 1a receive of for services rendered to the organization?											5		×			
Section	n B. Independent Contractors	ii res, c	отр	- (C ·	JCI I	euu	ile J i	OI S	such person	· · · ·		<u> </u>	ļ				
1	Complete this table for your five highest compensation from the organization. Rep year.													ax			
	(A) Name and business addi	ress							(B) Description of s	ervices	Co	(C) ompens	sation				
												<u></u>					
2	Total number of independent contracto	rs (ıncludır	ng bu	t no	ot i	imit	ed to	th	ose listed abo	ove) who		<u> </u>	<del>-</del>				

REV 05/20/19 PRO

Part VIII		Statement of Revenue  Check if Schedule O contains a response or note to any line in this Part VIII										
	•	Officer if Schedule C	o contains a res	ponse of flote	(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 b c d e f	Federated campaign Membership dues . Fundraising events . Related organizations Government grants (con All other contributions, gand similar amounts not income	1b 1c s 1d ntributions) 1e pifts, grants, cluded above 1f				:					
ont nd (	g	Noncash contributions include				-						
<u>a</u>	h	Total. Add lines 1a-1		Business Code								
Program Service Revenue	2a b c d	EMPLOYER CONTR PARTICIPANT CON LIQUIDATED DAMAGE	NTRIBUTIONS S & INTEREST	900099 900099 900099	45,428,862. 1,090,340. 6,918.	45,428,862. 1,090,340. 6,918.	0. 0. 0.	0. 0. 0.				
ogi	f	All other program ser										
<u>~</u>	3	Total. Add lines 2a-2 Investment income and other similar and	(including divid	lends, interest,	1,606,533.	0.	0.	1,606,533.				
	4 5	Income from investmen	· ·		1,000,333.		0.	1,000,333.				
	6a b c d	Gross rents . Less. rental expenses Rental income or (loss) Net rental income or	(loss)		]							
	7a b	Gross amount from sales of assets other than inventory Less, cost or other basis and sales expenses	(i) Securities 5, 901, 105. 5, 984, 141.	(II) Other				1				
	С	Gain or (loss) .	-83,036.		╣							
	d	Net gain or (loss)		▶	-83,036.	0.	0.	-83,036.				
Other Revenue	8a	Gross income from frevents (not including \$ of contributions report See Part IV, line 18	ed on line 1c).									
Othe	С	Less direct expense Net income or (loss) Gross income from g See Part IV, line 19	from fundraising aming activities	events . ►								
	b	Less direct expense			1							
	С	Net income or (loss) Gross sales of in returns and allowand	from gaming act nventory, less	ivities ►								
		Less: cost of goods s Net income or (loss)	from sales of inv	entory . ►								
		Miscellaneous F	Revenue	Business Code								
	11a b c d	All other revenue										
	e	Total. Add lines 11a-		•	1							
	12	Total revenue. See			48,049,617.	46,526,120.	0.	1,523,497.				

Part IX	Statement of Functional Expenses	

	IX Statement of Functional Expenses				
Sectio	n 501(c)(3) and 501(c)(4) organizations must con				lumn (A)
	Check if Schedule O contains a respon				<u> </u>
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
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				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	48,474,052.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	696,849.			
7 8	Other salaries and wages	20,222.			
9	Other employee benefits	20,222.			
10	Payroll taxes	58,247.	***************************************		
11	Fees for services (non-employees)	3072171			
а	Management				
b	Legal	69,008.			····
С	Accounting	28,950.			
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	130,890.			
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	01 507			
13 14	Office expenses	91,507. 29,147.			
15	Royalties	29,147.			
16	Occupancy	123,370.			
17	Travel	123,3757	***		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials		·		
19	Conferences, conventions, and meetings .	21,865.			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	4,483.			
23	Insurance	28,244.			
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)				
а	CONSULTING & ACTUARIAL	76,098.			
b	WITHDRAWAL LIAB EXP	47,304.			
c	MEDICARE PART D ANALYSIS FEE	1,875.		·	
d	OTHER EXPENSES	24,344.			
е	A II — Ab —	-263,468.			
25	Total functional expenses. Add lines 1 through 24e	49,890,229.			
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)				
		<del></del>			

32

33

34

. Form 990 (2018) Page 11 Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X Beginning of year End of year 3,322,881. 1,932,682. 213,612. 2 2 262,678. Savings and temporary cash investments . . . . . . . . . 3 4 1,298,857. 485,955. Loans and other receivables from current and former officers, directors, 5 trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Assets 7 7 Inventories for sale or use . . . . . 8 8 Prepaid expenses and deferred charges . . . 216,018. 72,943. q 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 238,636. 211,314. 19,170. 27,322. 10b 10c Less, accumulated depreciation 51,160,195. 52,888,279. 11 11 12 Investments—other securities. See Part IV, line 11 . . . . 12 13 Investments—program-related. See Part IV, line 11 . . . . . . . 13 14 14 232,018. 214,441. 15 15 56,462,751. 55,884,300. 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . . 17 Accounts payable and accrued expenses . . . . . . 65,175. 17 83,866. 18 18 Grants pavable 19 19 Deferred revenue 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . 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 1,226,361. 1,226,361. 1,291,536. 1,310,227. 26 26 **Total liabilities.** Add lines 17 through 25 . Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 28 Temporarily restricted net assets . . . . . . . . 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 🗵 and complete lines 30 through 34. 54,574,073. 55,171,215. 30 30 Capital stock or trust principal, or current funds . . . . . . . . . 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . .

54,574,073.

32

33

55,171,215.

56,462,751.

Retained earnings, endowment, accumulated income, or other funds .

Total liabilities and net assets/fund balances . . . . . . . . .

Part	XI Reconciliation of Net Assets			-	
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	48,0	49,6	517.
2 .	Total expenses (must equal Part IX, column (A), line 25)	2	49,8	90,2	29.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,8	40,6	12.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	55 <b>,</b> 1	71,2	15.
5	Net unrealized gains (losses) on investments	5	1,2	43,4	70.
6	Donated services and use of facilities	6			
7	Investment expenses	7	<del></del>		
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	54,5	74,0	73.
<b>Part</b>	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990.   Cash Accrual Other			ļ.	
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın ın			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		×
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled or			
	reviewed on a separate basis, consolidated basis, or both:		į.		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	×	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a			
	separate basis, consolidated basis, or both:		(		
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o				
	of the audit, review, or compilation of its financial statements and selection of an independent account	untant?	2c	×	
	If the organization changed either its oversight process or selection process during the tax year, ex	kplain in			
	Schedule O.				
За		forth in			
	the Single Audit Act and OMB Circular A-133?		3a		×
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	ıudıts.	3b		
			Forr	n 990	(2018)

### · SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

### **Supplemental Financial Statements**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

► Attach to Form 990.

OMB No 1545-0047 2018

Open to Public Inspection

Employer identification number

UFCW LOCAL 1776KS WESTERN DIVISION AND EMPLOYERS' HEALTH FUND 23-7083247 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 . . . . . . . Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) . 3 4 Aggregate value at end of year . . 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 ☐ Yes ☐ No Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 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 a historically important land area Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space 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. Held at the End of the Tax Year Total number of conservation easements . . 2a Total acreage restricted by conservation easements . . . . . 2b Number of conservation easements on a certified historic structure included in (a) . 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 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)? . 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. If the organization elected, as permitted under SFAS 116 (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. If the organization elected, as permitted under SFAS 116 (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: (ii) Assets included in Form 990, Part X . \$ 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 SFAS 116 (ASC 958) relating to these items Assets included in Form 990, Part X .

Page	2

Par	III Organizations Maintaining	Collections of	Art, His	torical 1	Treasures,	or Oth	ner Similar A	ssets (con	tinued)
3	Using the organization's acquisition, collection items (check all that apply)	accession, and ot	her reco	rds, chec	k any of the	follow	ing that are a	significant u	se of its
a.	☐ Public exhibition		d	□ Loan	or exchange	e progra	ams		
b	☐ Scholarly research		е						
С	☐ Preservation for future generations	5							
4	Provide a description of the organiza XIII.		and expla	ain how t	hey further t	he orga	anization's exe	mpt purpos	e in Part
5	During the year, did the organization assets to be sold to raise funds rather								☐ No
Part	IV Escrow and Custodial Arra								
	Complete if the organization	answered "Yes	" on For	m 990, F	Part IV, line	9, or r	eported an ar	nount on F	orm
	990, Part X, line 21.								
1a	Is the organization an agent, trustee							ot	
	included on Form 990, Part X?							☐ Yes	☐ No
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the fo	llowing to	able				
							Α Α	Mount	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount	nt on Form 990, Pa	art X, line	21, for e	scrow or cu	stodial	account liability	y <sup>っ</sup> 🗌 Yes	☐ No
	If "Yes," explain the arrangement in P	art XIII. Check her	e if the e	kplanatio	n has been p	provide	d on Part XIII .		
Par									
	Complete if the organization								
		(a) Current year	(b) Pri	or year	(c) Two years	back	(d) Three years bac	k (e) Four ye	ars back
1a	Beginning of year balance								
b	Contributions	=							
С	Net investment earnings, gains, and								
	losses			•					
d	Grants or scholarships								
е	Other expenditures for facilities and					-			
	programs								
f	Administrative expenses								
g	End of year balance				l				
2	Provide the estimated percentage of t	he current year en	id balanc	e (line 1g	ı, column (a))	held a	s		
а	Board designated or quasi-endowment	nt ▶	%						
b	Permanent endowment								
С	Temporarily restricted endowment ▶	%							
_	The percentages on lines 2a, 2b, and								
За	Are there endowment funds not in the	e possession of th	ie organi	zation tha	at are neid a	ind adn	ninistered for th		
	organization by								es No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	+
b	If "Yes" on line 3a(ii), are the related o							3b	
4	Describe in Part XIII the intended uses		on's endo	wment it	unas.				
Part			" <b>-</b>	000 [	2 11 / 1 ·	11- 0	Fauna 000	David V. Jun	- 10
	Complete if the organization							· ·	
	Description of property	(a) Cost or ot		· ·	or other basis ther)		ccumulated preciation	(d) Book v	alue
		(117001111		,,,					
1a	Land	•	0.						0.
b	Buildings	•							
C	Leasehold improvements	•		1	15 205		100 507	1 4	050
d	Equipment	•			15,385.	_	100,527.		,858.
e Total	Other	evet equal Farra Ci	20 0-4		23, 251.	. 1	110,787.		,464.
ı vtal.	Add lines 1a through 1e. (Column (d) n	iusi equal romii 99	ou, ran i	i, column	i رص, iirie i uc	.,	🕨	21	,322.

Part VII	Investments – Other Securities		000 5 111/1	441 0 5	000 0 1 1 10
	Complete if the organization ansi				
	(a) Description of security or category (including name of security)		(b) Book value	• • •	hod of valuation -of-year market value
(1) Financial	derivatives				
(2) Closely-h	neld equity interests		<u></u>		
(3) Other			-		
(A)					
(B)					· · · · · · · · · · · · · · · · · · ·
(C)					
(D)					
(E)					
(F)					
(G)					
(H)	the many forms 2000 Part V and /Dilling 10.1 h			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	76 T 197
Part VIII	b) must equal Form 990, Part X, col (B) line 12) ► Investments—Program Related	1	<u> </u>		<u>-1111111111. </u>
Part VIII	Complete if the organization answer		rm 990 Part IV Jir	e 11c See Form	990 Part X line 13
	(a) Description of investment	Weled les offic	(b) Book value	í	hod of valuation
	(a) Description of investment		(b) Book value		of-year market value
(1)					
(2)					
(3)		<u> </u>			
(4)		···-			
(5)					
(6)			_		
<u>(7)</u>			<del> </del>		
(8)			<u> </u>		<del></del>
(9)	1)				
	b) must equal Form 990, Part X, col (B) line 13 )  Other Assets.				
Part IX	Complete if the organization answ	wered "Ves" on Fo	rm 990 Part IV Ju	e 11d See Form	990 Part X line 15
		n) Description	7111 330, 1 art 14, m	174.00010111	(b) Book value
/1) DENITA	L RESERVE DEPOSIT		<del></del>		75,000.
******	ED INTEREST				139,441.
(3)		<del></del>	<del></del> _		
(4)					
(5)					
(6)					
(7)					
(8)					
(9)				" '	
Total. (Colu	mn (b) must equal Form 990, Part X, co	ol (B) line 15 ) .		. ▶	214,441.
Part X	Other Liabilities.  Complete if the organization answline 25.	wered "Yes" on Fo	rm 990, Part IV, lır	ne 11e or 11f. See	e Form 990, Part X,
1.	(a) Description of liability	(b) Book value			
(1) Federal in					
	RAWAL LIABILITY PAYABLE	1,226,	361		
(3)	WALL BIADIBITI TATADAD	1,2201	301.		
(4)			1		
(5)					
(6)					
(7)					
(8)					
(9)					
	b) must equal Form 990, Part X, col (B) line 25)	1,226,	361.		٩
	r uncertain tax positions In Part XIII, provi			n's financial stateme	nts that reports the
	s liability for uncertain tax positions under				

Par			•	Retur	n.
	Complete if the organization answered "Yes" on Form 990,		, line 12a.	-	10 160 107
1	Total revenue, gains, and other support per audited financial statements			1	49,162,197.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:  Net unrealized gains (losses) on investments	122	1 242 470		
a b	Donated services and use of facilities		1,243,470.		
	Recoveries of prior year grants	<del></del>			
c d	Other (Describe in Part XIII.)	2d			
e		20		2e	1,243,470.
3	Subtract line 2e from line 1			3	47,918,727.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	iii			47,910,727.
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	130,890.		
b	Other (Describe in Part XIII.)		130/0301	i	
c	Add lines <b>4a</b> and <b>4b</b>			4c	130,890.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	48,049,617.
Part					
	Complete if the organization answered "Yes" on Form 990,				
1	Total expenses and losses per audited financial statements	· ·		1	49,759,339.
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	-			
С	Other losses				
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	49,759,339.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	130,890.		
b	Other (Describe in Part XIII.)	4b	· ·		
С				4c	130,890.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, III	ne 18.)		5	49,890,229.
Part	XIII Supplemental Information.				
	le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a art XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this par			•	•
		· · · · · · · · · · · · · · · · · · ·			
	······································				
		·	••••••		
			••••		
					,

Schedule D (For		Page \$
Part XIII	Supplemental Information (continued)	
	•	
•		
·		
	······································	
	•	•••••
	•	
	······································	
	,	
	······································	

### ·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

2018

Open to Public Inspection

Name of the organization	Employer identification number
UFCW LOCAL 1776KS WESTERN DIVISION AND EMPLOYERS' HEALTH FUND	23-7083247
Pt VI, Line 11b: REVIEWED BY PRINCIPAL OFFICER AND SIGNING TRUSTE	E
Pt VI, Line 19: FORM 990 AVAILABLE BY REQUEST	
Pt XII, Line 2c: BOARD OF TRUSTEES SELECTS AUDITORS	
Other: SCHEDULE R - ALL CONTRIBUTING EMPLOYERS TO THE MULTI EMPLO	
FUND ARE LISTED ON SCHEDULE R.	
Pt IX, Line 24e:	
Description: ADMINISTRATIVE COST REIMB.	
Total: -\$282,877	
Description: PCORI FEE	
Total: \$19,409	,
······································	••••••
	••••••
······································	
	<u>-</u>

# SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Partl

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

OMB No 1545-0047 2018 Open to Public Inspection

Employer identification number

23-7083247

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

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

UFCW LOCAL 1776KS WESTERN DIVISION AND EMPLOYERS' HEALTH FUND

(g) Section 512(b)(13) controlled entity? Schedule R (Form 990) 2018 Yes No (f) Direct controlling 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. (f)
Direct controlling entity (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) (d) Total income (d) Exempt Code section (c)
Legal domicile (state
or foreign country) (c)
Legal domicile (state
or foreign country) (b) Primary activity REV 05/17/19 PRO (b) Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. BAA (a)
Name, address, and EIN (if applicable) of disregarded entity (a)
Name, address, and EIN of related organization (1) See Attached Schedule (1) See Attached Schedule Part II ල € 8 3 9 8 ව € 3 9

Schedule R (Form 990) 2018	,											Page 2
Part III Identification of Related Organizations Taxable because it had one or more related organizations to	Related Organizate of or more related or	tions Taxable	as a Partnership. Complete if the organiza reated as a partnership during the tax year	rship. Co partnershi	mplete if the p during the	organizat tax year.	on answer	ъъ, ра	as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line reated as a partnership during the tax year.	), Part I	V, line	34,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	Predo unre exclud tax t	(e) Predominant income (related, unrelated, excluded from tax under sections 512—514)		(g) Share of end-of- year assets	(h) - Disproportionate allocations?	(f) (g) (n) (n) (n) (n) (n) (n) (n) (n) (n) (n		General or managing partner?	, (k) Percentage ownership
								Yes	No	Yes	S No	
(1) See Attached Schedule												
(2)												
(3)												
(4)												
(5)				_			:					
(9)												
(2)												
Part IV Identification of Fine 34, because it	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.	tions Taxable	as a Corpor	ration or ed as a co	Trust. Comportion or	plete if the trust durir	organizations or the tax y	on answ ear.	ered "Yes" on	Form 9	90, Pa	ıt IV,
(a) Name, address, and EIN of related organization	d organization	(b) Primary activity	Legal c (state or for	(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	S No
(1) See Attached Schedule	ıle											
(2)												_
(6)												
(4)												
(9)												
(9)												
(7)												
BAA				REV 05/17/19 PRO	PRO					Schedule	R (For	Schedule R (Form 990) 2018

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

Annual Late line 4 is a min and the in Late of in Darte II II and IV as the and also				Yes	Ž
Note: Complete line I it any entity is listed in Parts II, III, or IV of this schedule.					—í
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?	or more related organ	izations listed in Part			
Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				<b>1</b> a	×
Gift, grant, or capital contribution to related organization(s)				<b>1</b> p	×
Gift, grant, or capital contribution from related organization(s)				10	×
Loans or loan quarantees to or for related organization(s)				<b>1</b> 9	×
Loans or loan guarantees by related organization(s)			· · · ·	1e	×
			<u></u>	额	1.00 kg
Dividends from related organization(s)					×
Sale of assets to related organization(s)			•	1g	×
Purchase of assets from related organization(s)				무	×
Exchange of assets with related organization(s)				-	×
Lease of facilities, equipment, or other assets to related organization(s)		  		;=	×
					1
Lease of facilities, equipment, or other assets from related organization(s)			•	×	1
Performance of services or membership or fundraising solicitations for related organization(s)				=	×
Performance of services or membership or fundraising solicitations by related organization(s)			•	Ē	×
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).				1n	×
Sharing of paid employees with related organization(s)				10	×
			[ · · · · · ]		1
Reimbursement paid to related organization(s) for expenses				1p	×
Reimbursement paid by related organization(s) for expenses				19	×
				The second second	,
Other transfer of cash or property to related organization(s)				1.	×
Other transfer of cash or property from related organization(s)				1s	×
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	implete this line, inclu	uding covered relatio	nships and transactio	on threshol	ဒွ
(a) Name of related organization	(b) Transaction type (a—s)	(c) Amount involved	(d) Method of determining amount involved	g amount invol	<u>ved</u>
(1) UNITED FOOD AND COMMERCIAL WORKERS UNION LOCAL #1776KS	Ĺ	123,370.	FAIR RENTAL VALUE	/ALUE	
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# Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

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.

or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partities sinbs.	gamzanom, see	INSTRUCTIONS OF	garding exclusi	ion for certa	n mvestment pa	i ti let stillps.				
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile	(d) Predominant	(e) Are all partners	(f) Share of		(h) Disproportionate		(J) General or	(k) Percentage
		(state or foreign country)	income (related, unrelated, excluded	section 501(c)(3)	total income	end-of-year assets	allocations?	ਰ ਡ	managing partner?	ownership
			rrom tax under sections 512—514)	organizations?			N NO	(Form 1065)	Ves	
(1)										
(2)										
(6)										
(4)										
(5)										
(9)	,									
(2)										
(8)										
(6)	, -									
(10)	, , , , , ,									
(11)										
(12)										
(13)	,								<u>.</u>	
(14)	,									
(15)										
(16)			,							
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Part VII	Provide additional information for responses to questions on Schedule R. See instructions.
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