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ObjectID: 202413199349315051 - Submission: 2024-11-14

TIN: 95-3741159

Form **990****Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

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.**2023**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service**A For the 2023 calendar year, or tax year beginning 01-01-2023, and ending 12-31-2023****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization

UNITED DOMESTIC WORKERS OF AMERICA

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)
4855 SEMINOLE DRIVE

Room/suite

City or town, state or province, country, and ZIP or foreign postal code
SAN DIEGO, CA 92115**F** Name and address of principal officer:ASTRID ZUNIGA
4855 SEMINOLE DRIVE
SAN DIEGO, CA 92115**D** Employer identification number

95-3741159

E Telephone number

(619) 263-7254

G Gross receipts \$ 43,623,664**I** Tax-exempt status: ☐ 501(c)(3) ☒ 501(c) (5) (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website:**K** Form of organization: ☐ Corporation ☐ Trust ☒ Association ☐ Other**H(a)** Is this a group return for subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions.

H(c) Group exemption number**L** Year of formation: 1979**M** State of legal domicile: CA**Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO PROVIDE REPRESENTATION TO MEMBERS IN MATTERS RELATED TO EMPLOYMENT IN ACCORDANCE WITH COLLECTIVE BARGAINING AGREEMENTS AND FAIR EMPLOYMENT STANDARDS.		
Revenue	2 Check this box ☐		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	0
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	232
	6 Total number of volunteers (estimate if necessary)	6	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	
Expenses		Prior Year	Current Year
	8 Contributions and grants (Part VIII, line 1h)	150,000	250,000
	9 Program service revenue (Part VIII, line 2g)	35,623,998	43,086,736
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	11,228	192,047
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	33,078	94,881
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	35,818,304	43,623,664
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	957,168	1,419,167
14 Benefits paid to or for members (Part IX, column (A), line 4)	2,550	9,913	
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	11,448,611	13,809,745	
16a Professional fundraising fees (Part IX, column (A), line 11e)		0	
b Total fundraising expenses (Part IX, column (D), line 25)	0		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	17,634,480	22,071,016	
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	30,042,809	37,309,841	
19 Revenue less expenses. Subtract line 18 from line 12	5,775,495	6,313,823	
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	23,611,780	31,761,092
	21 Total liabilities (Part X, line 26)	3,082,103	4,951,675
22 Net assets or fund balances. Subtract line 21 from line 20	20,529,677	26,809,417	

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

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Other program services (Describe in Schedule C.)

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expensesForm **990** (2023)Page **3**

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Page **3****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	No
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	No
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	No
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)? If "Yes," complete Schedule D, Part X	11f	No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a Yes	
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	No
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	No
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	No
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	No
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	

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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? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>	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? <i>If "Yes," complete Schedule L, Part III</i>	27	No
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	No
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	No
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	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? <i>If "Yes," complete Schedule R, Part I</i>	33	No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," 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? <i>If "Yes," complete Schedule R, Part VI</i>	37	No
38	Did the organization complete Schedule O and provide explanations on 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	120
b	Enter the number of Forms W-2G included on 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

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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	232
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	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? 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	No
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	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. Enter the amount of reserves the organization is required to maintain by the states to	13a	

d 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? If "No," provide an explanation in Schedule O	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? If "Yes," see the instructions and file Form 4720, Schedule N.	15			No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			No
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17			

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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 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.	1a	13	
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		No
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		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b Describe on 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		No
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c		No
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	Yes	
b Other officers or key employees of the organization	15b	Yes	
If "Yes" to line 15a or 15b, describe the process on 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 CA

18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ 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:
EVA MAYO CONTROLLER 4855 SEMINOLE DRIVE SAN DIEGO, CA 92115 (619) 263-7254

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) EDITHA ADAMS PRESIDENT	40.00			X				124,534	0	0
(2) ASTRID ZUNIGA VICE PRESIDE	7.00			X				42,394	0	0
(3) WILLIAM REED SECT-TREASUR	15.00			X				42,000	0	0
(4) MARIA ISABEL SERRANO EXECUTIVE BO	12.00	X						36,456	0	0
(5) FLORENCE CROWSON EXECUTIVE BO	12.00	X						36,000	0	0
(6) MARIA ESTHELA GARZA EXECUTIVE BO	12.00	X						36,669	0	0
(7) CARRINA BICHOP	12.00									

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2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 7		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

(A) Name and business address			(B) Description of services			(C) Compensation		
ICB ALL WE HAUL, 2150 CIENAGA ST STE 101 OCEANO, CA 93445			TRANSPORT SERVI			339,359		
USA PROMO ITEMS LLC, 1160 DEWEY WAY STE D UPLAND, CA 91786			PROMO SUPPLIER			228,039		
CLEVEREST LANDSCAPING INC, 7493 I AVE HESPERIA, CA 92345			LANDSCAPING			195,010		
CONFERENCE MICROPHONESCONGRESS NETW, 7235 NW 19TH STREET WEST PARK, FL 33024			DIGITAL MANAGEM			154,728		
WILLIE L PELOTE SR, 351 ROSS WAY SACRAMENTO, CA 95864			CONSULTING SVCS			130,000		
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization						7		

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

<https://projects.propublica.org/nonprofits/organizations/953741159/202413199349315051/full>

h Total. Add lines 1a-1f **250,000**

		Business Code				
Program Service Revenue	2a MEMBERSHIP DUES		42,593,973	42,593,973		
	b INITIATION FEES		492,763	492,763		
f All other program service revenue.						
g Total. Add lines 2a-2f.			43,086,736			

3 Investment income (including dividends, interest, and other similar amounts)			192,047			192,047
4 Income from investment of tax-exempt bond proceeds						
5 Royalties						
6a Gross rents	(i) Real	(ii) Personal				
	6a		31,050			
	b Less: rental expenses	6b				
	c Rental income or (loss)	6c	31,050			
d Net rental income or (loss)			31,050	31,050		
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	7a					
	b Less: cost or other basis and sales expenses	7b				
	c Gain or (loss)	7c				
d Net gain or (loss)						
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					
	b Less: cost of goods sold	10b				
c Net income or (loss) from sales of inventory						

		Business Code				
Other Revenue	11a OTHER INCOME		55,934	55,934		
	b ISSUES CONSOLIDATED INCOME		7,897	7,897		
	c Other Revenue Misc Amt					
	d All other revenue					
e Total. Add lines 11a-11d						

	63,831		
12 Total revenue. See instructions	43,623,664	43,181,617	192,047

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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	1,419,167			
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 Benefits paid to or for members	9,913			
5 Compensation of current officers, directors, trustees, and key employees	916,587			
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	9,828,084			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,128,670			
9 Other employee benefits	1,083,795			
10 Payroll taxes	852,609			
11 Fees for services (non-employees):				
a Management				
b Legal	28,567			
c Accounting	81,292			
d Lobbying	211,265			
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1,530,480			
12 Advertising and promotion	200,000			
13 Office expenses	2,597,608			
14 Information technology	30,728			
15 Royalties				
16 Occupancy	1,103,982			
17 Travel	873,759			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,821,984			
20 Interest				
21 Payments to affiliates	11,608,097			
22 Depreciation, depletion, and amortization	716,368			
23 Insurance	196,338			
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 PER CAPITA TAXES	506,463			
b PROMOTIONAL ITEMS	258,421			
c TRANSLATION	144,086			
d TRAINING	86,703			

u TRAINING	80,703			
e All other expenses	74,875			
25 Total functional expenses. Add lines 1 through 24e	37,309,841	0	0	0
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).				

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Form 990 (2023)

Page **11**Part X **Balance Sheet**Check if Schedule O contains a response or note to any line in this Part IX ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	2,305,272	1	2,796,319
	2 Savings and temporary cash investments	7,592,884	2	10,968,790
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	3,959,756	4	5,045,929
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		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	452,707	9	451,734
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 17,946,932		
	b Less: accumulated depreciation	10b 7,809,807	8,797,270	10c 10,137,125
	11 Investments—publicly traded securities	450,000	11	2,306,529
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets	5,833	14	5,166
	15 Other assets. See Part IV, line 11	48,058	15	49,500
16 Total assets. Add lines 1 through 15 (must equal line 33)	23,611,780	16	31,761,092	
Liabilities	17 Accounts payable and accrued expenses	2,024,330	17	3,866,409
	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	1,057,773	25	1,085,266
	26 Total liabilities. Add lines 17 through 25	3,082,103	26	4,951,675
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	20,097,277	27	26,130,933
	28 Net assets with donor restrictions	432,400	28	678,484
	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	20,529,677	32	26,809,417

Net	33	Total liabilities and net assets/fund balances	23,611,780	33	31,761,092
Form 990 (2023)					

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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	43,623,664
2	Total expenses (must equal Part IX, column (A), line 25)	2	37,309,841
3	Revenue less expenses. Subtract line 2 from line 1	3	6,313,823
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	20,529,677
5	Net unrealized gains (losses) on investments	5	
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	-34,083
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	26,809,417

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 _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on 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
2b	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	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		
3b	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.		

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Additional Data

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Software ID:

Software Version:

Form 990, Special Condition Description:

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TIN: 95-3741159

SCHEDULE D
(Form 990)**Supplemental Financial Statements**

OMB No. 1545-0047

2022Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

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

Name of the organization

UNITED DOMESTIC WORKERS OF AMERICA

Employer identification number

95-3741159

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.

	Held at the End of the 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 July 25, 2006, 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 ► \$ _____

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

Cat. No. 52283D

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022

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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 **d** ☐ Loan or exchange programs
- b** ☐ Scholarly research **e** ☐ Other
- c** ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements.

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

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? ☐

4 Describe in Part XIII the intended uses of the organization's endowment funds.

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

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		831,307		831,307
b Buildings		6,827,549	1,503,155	5,324,394
c Leasehold improvements		6,796,313	3,446,853	3,349,460
d Equipment		3,222,214	2,590,250	631,964
e Other		269,549	269,549	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				10,137,125

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022

Page **3****Part VII Investments - Other Securities.**

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

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

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
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
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
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	

(1) Federal income taxes

ACCRUED VACATION	733,822
PAYROLL LIABILITIES	351,444
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	1,085,266

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 ☐

Schedule D (Form 990) 2022

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Schedule D (Form 990) 2022

Page 4

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	33,782,520
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	33,782,520
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	9,841,144
c	Add lines 4a and 4b	4c	9,841,144
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	43,623,664

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	27,468,697
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	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	27,468,697
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	
b	Other (Describe in Part XIII.)	4b	9,841,144
c	Add lines 4a and 4b	4c	9,841,144
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	37,309,841

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
SCHEDULE D, PAGE 4, PART XI, LINE 4B	ADD BACK PER CAPITA EXPENSE 9,867,343 LESS RENTAL PROPERTY EXPENSE -26,199
SCHEDULE D, PAGE 4, PART XII, LINE 4B	ADD PER CAPITA EXPENSE 9,867,343 LESS REAL PROPERTY EXPENSE -26,199

Schedule D (Form 990) 2022

Additional Data

[Return to Form](#)

Software ID:

Software Version:

efile Public Visual Render		ObjectID: 202413199349315051 - Submission: 2024-11-14	TIN: 95-3741159
Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.			
Schedule I (Form 990)	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
			2023
			Open to Public Inspection
Department of the Treasury Internal Revenue Service	Name of the organization UNITED DOMESTIC WORKERS OF AMERICA		Employer identification number 95-3741159

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) BAPAC - SAN DIEGO PO BOX 741336 SAN DIEGO, CA 921741336			15,000				CONTRIBUTION
(2) BROTHERHOOD CRUSADE 200 E SLAUSON AVENUE LOS ANGELES, CA 90011			25,000				CONTRIBUTION
(3) BROTHERHOOD CRUSADE 200 E SLAUSON AVENUE LOS ANGELES, CA 90011			25,000				CONTRIBUTION
(4) BROWN PUBLISHING AND COMMUNICATIONS PO BOX 912 RIVERSIDE, CA 92502			20,000				CONTRIBUTION
(5) CAIPTC PO BOX 393 RIVERSIDE, CA 92502			10,750				CONTRIBUTION
(6) CAIPTC PO BOX 393 RIVERSIDE, CA 92502			10,750				CONTRIBUTION
(7) CAIPTC PO BOX 393 RIVERSIDE, CA 92502			10,750				CONTRIBUTION
(8) CAIPTC PO BOX 393 RIVERSIDE, CA 92502			10,750				CONTRIBUTION
(9) CAIPTC PO BOX 393 RIVERSIDE, CA 92502			10,750				CONTRIBUTION
(10) CAIPTC PO BOX 393 RIVERSIDE, CA 92502			10,750				CONTRIBUTION
(11) CAIPTC PO BOX 393 RIVERSIDE, CA 92502			10,750				CONTRIBUTION
(12) CAIPTC PO BOX 393 RIVERSIDE, CA 92502			10,750				CONTRIBUTION
(13) CAIPTC PO BOX 393 RIVERSIDE, CA 92502			10,750				CONTRIBUTION
(14) CAIPTC PO BOX 393 RIVERSIDE, CA 92502			10,750				CONTRIBUTION
(15) CAIPTC PO BOX 393 RIVERSIDE, CA 92502			250,000				CONTRIBUTION
(16) CALIFORNIA INDEPENDENT PROVIDER TRA 3600 LIME STREET STE 421 RIVERSIDE, CA 92501			30,000				CONTRIBUTION
(17) CALIFORNIA LEGISLATIVE BLACK CAUCUS 777 SOUTH FIGUEROA ST 4050 LOS ANGELES, CA 90017			35,000				CONTRIBUTION
(18) CAPITAL & MAIN 1910 W SUNSET BLVD SUITE 740 LOS ANGELES, CA 90026			40,000				CONTRIBUTION
(19) CARA PO BOX 23754 OAKLAND, CA 94623			7,500				CONTRIBUTION
(20) CARA PO BOX 23754 OAKLAND, CA 94623			10,000				CONTRIBUTION
(21) CARA PO BOX 23754 OAKLAND, CA 94623			50,000				CONTRIBUTION
(22) CENTER ON POLICY INITIATIVES 2820 CAMINO DEL RIO S STE 314 SAN DIEGO, CA 92108			10,000				CONTRIBUTION
(23) CENTER ON POLICY INITIATIVES 2820 CAMINO DEL RIO S 314 SAN DIEGO, CA 92108			10,000				CONTRIBUTION
(24) CENTRAL COAST LABOR COUNCIL			6,000				CONTRIBUTION

COUNCIL 765 MESA VIEW DR 97 ARROYO GRANDE, CA 93420						
(25) CHAVEZ SERVICE CLUBS PO BOX 131156 SAN DIEGO, CA 92170			15,000			CONTRIBUTION
(26) CLUW SAN DIEGO 1201 NEW JERSEY AVE NW WASHINGTON, DC 20001			10,000			CONTRIBUTION
(27) COURAGE CALIFORNIA 7119 W SUNSET BLVD 195 LOS ANGELES, CA 90046			25,000			CONTRIBUTION
(28) CSDBCC COUNTY OF SD BLACK CHAMBER O 1100 MARKET ST 325 SAN DIEGO, CA 92101			10,000			CONTRIBUTION
(29) EITC INC PO BOX 303279 AUSTIN, TX 78703			10,000			CONTRIBUTION
(30) EQUALITY CALIFORNIA 1150 S OLIVER ST FL 10 LOS ANGELES, CA 90015			10,000			CONTRIBUTION
(31) GOLD RUSH CLASSICS 100 PLACERVILLE DRIVE PLACER VILLE, CA 95667			15,000			CONTRIBUTIONS
(32) HOTWHEEL FOUNDATION 2601 OAKDALE ROAD STE 174 MODESTO, CA 95355			10,000			CONTRIBUTION
(33) INLAND EMPIRE LABOR COUNCIL COPE 1074 E LA CADENA SUITE 1 RIVERSIDE, CA 92507			15,000			CONTRIBUTION
(34) JORDAN'S GUARDIAN ANGELS 1121 L STREET STE 100 SACRAMENTO, CA 95814			35,000			CONTRIBUTION
(35) LOS ANGELES COUNTY FEDERATION OF L 2130 W JAMES M WOOD BLVD LOS ANGELES, CA 90006			50,000			CONTRIBUTION
(36) MIGUEL CONTRERAS FOUNDATION 2130 JAMES M WOOD BLVD LOS ANGELES, CA 90006			15,000			CONTRIBUTION
(37) NAACP SAN DIEGO BRANCH 3451 DOGWOOD RD EL CENTRO, CA 92243			10,000			CONTRIBUTION
(38) NATIONAL DOMESTIC WORKER'S ALLIANCE 45 BROADWAY SUITE 320 NEW YORK, NY 10006			20,000			CONTRIBUTION
(39) ORANGE COUNTY LABOR FEDERATION AFL 309 N RAMPART STREET SUITE A ORANGE, CA 92868			15,000			CONTRIBUTION
(40) PROGRESSIVE LABOR ALLIANCE 3737 CAMINO DEL RIO S 202 SAN DIEGO, CA 92108			10,000			CONTRIBUTION
(41) SACRAMENTO CLC 2617 K ST SUITE 175 SACRAMENTO, CA 95816			5,004			CONTRIBUTION
(42) SAN DIEGO & IMPERIAL COUNTIES LABOR 3737 CAMINO DEL RIO SO 403 SAN DIEGO, CA 92108			25,000			CONTRIBUTION
(43) SAN DIEGO & IMPERIAL COUNTIES LABOR 3737 CAMINO DEL RIO SO 403 SAN DIEGO, CA 92108			75,000			CONTRIBUTION
(44) SAN DIEGO AND IMPERIAL COUNTIES LAB 3737 CAMINO DEL RIO S 403 SAN DIEGO, CA 92108			30,000			CONTRIBUTION
(45) SAN DIEGO COUNTY DEMOCRATIC PARTY 3934 MURPHY CANYON RD B103 SAN DIEGO, CA 92123			10,000			CONTRIBUTION
(46) SOMALI-BANTU ASSOCIATION OF AMERICA 5532 EL CAJON BLVD SUITE 4 SAN DIEGO, CA 92115			6,000			CONTRIBUTION
(47) SPEAKER 2023 INAUGURAL FUND 2102 BUSINESS CENTER DR STE 130 IRVINE, CA 92612			50,000			CONTRIBUTION
(48) THE CALIFORNIA LEGISLATIVE CAUCUS F 777 SOUTH FIGUEROA ST 4050 LOS ANGELES, CA 90017			25,000			CONTRIBUTION
(49) THE CALIFORNIA LEGISLATIVE CAUS FOU 777 SOUTH FIGUEROA ST 4050 LOS ANGELES, CA 90017			25,000			CONTRIBUTION
(50) THE LA JAZZ FESTIVAL FOUNDATION 4391 MOUNT VERNON DRIVE LOS ANGELES, CA 90043			25,000			CONTRIBUTION
(51) UC RIVERSIDE FOUNDATION			8,000			CONTRIBUTION

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900 UNIVERSITY AVE RIVERSIDE, CA 92521							
(52) UDW RESOURCE CENTER 7777 ALVARADO RD STE 116 LA MESA, CA 91942			50,000				CONTRIBUTION

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3

Enter total number of other organizations listed in the line 1 table

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

Cat. No. 50055P

Schedule I (Form 990) 2023

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
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Additional Data

Return to Form

Software ID:
Software Version:

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	☐	Housing allowance or residence for personal use		
☐	Travel for companions	☐	Payments for business use of personal residence		
☐	Tax indemnification and gross-up payments	☐	Health or social club dues or initiation fees		
☐	Discretionary spending account	☐	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	1b	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?	2	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	☒	Written employment contract		
☐	Independent compensation consultant	☐	Compensation survey or study		
☐	Form 990 of other organizations	☐	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?	4a			No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b			No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c			No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.					
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:				
a	The organization?	5a			
b	Any related organization?	5b			
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?	6a			
b	Any related organization?	6b			
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	7			
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	8			
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9			

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

Cat. No. 50053T

Schedule J (Form 990) 2023

[illegible]

Schedule J (Form 990) 2023

Part III Supplemental Information

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

Return Reference	Explanation
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Schedule J (Form 990) 2023

Additional Data

Return to Form

Software ID:
Software Version:

efile Public Visual Render

ObjectID: 202413199349315051 - Submission: 2024-11-14

TIN: 95-3741159

SCHEDULE O
(Form 990)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

2023Open to Public
InspectionName of the organization
UNITED DOMESTIC WORKERS OF AMERICA

Employer identification number

95-3741159

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4D	TO PROVIDE REPRESENTATION TO MEMBERS IN MATTERS RELATED TO EMPLOYMENT IN ACCORDANCE WITH COLLECTIVE BARGAINING AGREEMENTS AND FAIR EMPLOYMENT STANDARDS.
FORM 990, PAGE 6, PART VI, LINE 6	THE ORGANIZATION IS A MEMBERSHIP ORGANIZATION. MEMBERS ARE MADE UP OF EMPLOYEES REPRESENTED UNDER COLLECTIVE BARGAINING AGREEMENTS. MEMBERSHIP IS MADE UP OF THE FOLLOWING CLASSES: REGULAR MEMBERS: FULL TIME EMPLOYEES WITHIN THE BARGAINING UNIT, PAY FULL DUES, AND HAVE VOTING RIGHTS.
FORM 990, PAGE 6, PART VI, LINE 7A	MEMBERS IN GOODSTANDING (DUES ARE PAID CURRENT) ELECT THE MEMBERS OF THE GOVERNING BODY AS PRESCRIBED BY THE BYLAWS DURING ELECTION PERIOD EVERY THREE YEARS AND AS VACANCIES BECOME AVAILABLE.
FORM 990, PAGE 6, PART VI, LINE 7B	MEMBERS IN GOODSTANDING (DUES ARE PAID CURRENT) VOTE ON SIGNIFICANT DECISIONS OF THE ORGANIZATION AS PRESCRIBED BY THE BYLAWS. MEMBERS ARE ALLOWED AND ENCOURAGED TO VOTE FOR OR AGAINST SIGNIFICANT DECISIONS THAT MATERIALLY IMPACT THE ASSETS OF THE ORGANIZATION IN ACCORDANCE WITH THE CONSTITUTION AND BYLAWS. SUCH MATTERS ARE GENERALLY PRESENTED AT THE GENERAL MEMBERSHIP MEETINGS.
FORM 990, PAGE 6, PART VI, LINE 11B	THE EXECUTIVE DIRECTOR AND THE DIRECTOR OF ACCOUNTING REVIEW THE TAX RETURN BEFORE IT IS SIGNED AND FILED.
FORM 990, PAGE 6, PART VI, LINE 15A	COMPENSATION FOR TOP MANAGEMENT WITHIN THE LOCAL IS APPROVED BY THE GOVERNING BOARD IN ACCORDANCE WITH THE CONSTITUTION AND BYLAWS.
FORM 990, PAGE 6, PART VI, LINE 15B	COMPENSATION FOR OTHER OFFICERS AND KEY EMPLOYEES IS APPROVED BY THE GOVERNING BOARD IN ACCORDANCE WITH THE CONSTITUTION AND BYLAWS.
FORM 990, PAGE 6, PART VI, LINE 19	FINANCIAL INFORMATION AND GOVERNING DOCUMENTATION ARE MADE PUBLICLY AVAILABLE ON THE FORM LM-2, ELECTRONICALLY FILED WITH THE DEPARTMENT OF LABOR, ON THE OFFICE OF LABOR-MANAGEMENT STANDARDS WEBSITE. ANY OTHER REQUEST FOR FINANCIAL INFORMATION IS MADE AVAILABLE UPON REQUEST.
FORM 990, PART XI, LINE 9	CORRECT PRIOR YEAR INTERFUND TRANSFERS

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

Cat. No. 51056K

Schedule O (Form 990) 2023

Additional Data[Return to Form](#)

Software ID:

Software Version:

efile Public Visual Render		ObjectID: 202413199349315051 - Submission: 2024-11-14		TIN: 95-3741159	
SCHEDULE R (Form 990)	Related Organizations and Unrelated Partnerships				OMB No. 1545-0047
					2023
	Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.				
Name of the organization UNITED DOMESTIC WORKERS OF AMERICA					Employer identification number 95-3741159

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)UNITED DOMESTIC WORKERS EL DORADO 4855 SEMINOLE DRIVE SAN DIEGO, CA 92115 45-5466903	BENEFITS	CA	501C9		UDW	Yes	
(2)UNITED DOMESTIC WORKERS IMPERIAL 4855 SEMINOLE DRIVE SAN DIEGO, CA 92115 84-2544213	BENEFITS	CA	501C9		UDW	Yes	
(3)UNITED DOMESTIC WORKERS IND EXP PAC 4855 SEMINOLE DRIVE SAN DIEGO, CA 92115 47-1025683	POLITICAL	CA	527		UDW	Yes	
(4)UNITED DOMESTIC WORKERS PLACER CNTY 4855 SEMINOLE DRIVE SAN DIEGO, CA 92115 27-6472885	BENEFITS	CA	501C9		UDW	Yes	
(5)UNITED DOMESTIC WORKERS RIVERSIDE 4855 SEMINOLE DRIVE SAN DIEGO, CA 92115 46-4169367	BENEFITS	CA	501C9		UDW	Yes	
(6)UNITED DOMESTIC WORKERS SAN DIEGO 4855 SEMINOLE DRIVE SAN DIEGO, CA 92115 27-6135515	BENEFITS	CA	501C9		UDW	Yes	
(7)UNITED DOMESTIC WORKERS SANTA BARBA 4855 SEMINOLE DRIVE SAN DIEGO, CA 92115 84-4622131	BENEFITS	CA	501C9		UDW	Yes	
(8)UNITED DOMESTIC WORKERS SLO TRUST 4855 SEMINOLE DRIVE SAN DIEGO, CA 92115 47-7438850	BENEFITS	CA	501C9		UDW	Yes	
(9)UNITED DOMESTIC WORKERS STANISLAUS 4855 SEMINOLE DRIVE SAN DIEGO, CA 92115 04-5572639	BENEFITS	CA	501C9		UDW	Yes	
(10)UNITED DOMESTIC WORKERS SUTTER 4855 SEMINOLE DRIVE SAN DIEGO, CA 92115 85-1265476	BENEFITS	CA	501C9		UDW	Yes	
(11)UNITED DOMESTIC WORKERS' BENEFITS T 4855 SEMINOLE DRIVE SAN DIEGO, CA 92115 30-6116859	BENEFITS	CA	501C9		UDW	Yes	
(12)UNITED DOMESTIC WORKERS' KERN COUNT 4855 SEMINOLE DRIVE SAN DIEGO, CA 92115 20-3245750	BENEFITS	CA	501C9		UDW	Yes	
(13)UNITED DOMESTIC WORKERS' PAC 4855 SEMINOLE DRIVE SAN DIEGO, CA 92115 32-0213986	POLITICAL	CA	527		UDW	Yes	

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

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

		Yes	No
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b		No
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o Sharing of paid employees with related organization(s)	1o		No
p Reimbursement paid to related organization(s) for expenses	1p		No
q Reimbursement paid by related organization(s) for expenses	1q		No
r Other transfer of cash or property to related organization(s)	1r		No
s Other transfer of cash or property from related organization(s)	1s		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

Page 4

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.

Schedule R (Form 990) 2023

Page 5

Page 5

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

Schedule R (Form 990) 2023

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