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# SCANNED DEC 0 7 2010

Department of the Treasury Internal Revenue Service

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

benefit trust or private foundation) The organization may have to use a copy of this return to satisfy state reporting requirements OMB No 1545-0047 Open to Public Inspection

<u>A</u>	For the	e 2009 cal	endar year, or tax year beginning and ending	_							
В	Check if applicable	le Please use IRS	C Name of organization	D Employer identific	cation number						
Г	Addre chang	label or print or	GENERAL TEAMSTERS LOCAL #431								
	Name chang	type	Doing Business As	94-0	577293						
	Initial return	Coontie	Number and street (or P.O. box if mail is not delivered to street address) Room/su 1140 WEST OLIVE	ite E Telephone number	Ī						
Ļ	Termu	Instruc-	(559								
Ļ	Amen		City or town, state or country, and ZIP + 4	G Gross receipts \$	1,480,196.						
L	Application pendi		FRESNO, CA 93728	H(a) Is this a group re							
	<b>,</b>	FNam	ne and address of principal officer:DARRELL PRATT	for affiliates?	Yes X No						
_			0 W. OLIVE, FRESNO, CA 93728	H(b) Are all affiliates inc							
			s: X 501(c) ( 5	<del></del> 1	list (see instructions)						
	J Website: ► N/A  H(c) Group exemption number ►										
	K Form of organization: Corporation Trust Association X Other ► SUBOR L Year of formation: 1950 M State of legal domicile: CA  Part I Summary										
_ a	1	Briefly des	cribe the organization's mission or most significant activities. LABOR ORG	GANIZATION							
Governance		•									
rna	2	Check this	box In the organization discontinued its operations or disposed of m	ore than 25% of its net as	sets						
o Ve	3	Number of	voting members of the governing body (Part VI, line 1a)	3	7						
<u>ن</u> مع	4	Number of	findependent voting members of the governing body (Part VI, line 1b)	4	0						
es &	5	Total num!	ber of employees (Part V, line 2a)	5	0						
Ş	6	Total numi	ber of volunteers (estimate if necessary)	6	0						
Activities	7a	Total gross	s unrelated business revenue from Part VIII, column (C), line 12	7a	0.						
_	b	Net unrela	ted business taxable income from Form 990-T, line 34	7b							
	ļ			Prior Year	Current Year						
<u>o</u>	8	Contribution	ons and grants (Part VIII, line 1h)		<del>_</del>						
Pun	9	Program s	ervice revenue (Part VIII, line 2g)	1,533,377.	1,469,408.						
Revenue	10	Investmen	t income (Part VIII, column (A), lines 3, 4, and 7d)	10,614.	3.						
ш	11	Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,557.	10,785.						
	12	Total reve	nue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>1,545,548.</u>	1,480,196.						
	13	Grants and	Simular amounts paid (Part X, column (A), lines 1-3)	2,586.	4,938.						
	14	Benefits p	aid to or for members (Parkix, column (A), line 4)	26,978.	<u>23,057.</u>						
es	15	Salanes, o	ther compensation remplayes benefits (Part IX, column (A), lines 5-10)	882,218.	862,928.						
Expenses	16a	1 1 1 1 1	nal fundraising fees (Part ) (2chlumn (A), line 11e)								
ă	b	Total fund	raising expenses (Part IX, column (D), line 25)								
ш	17	Other exp	475 (Part X column A), lines 11a-11d, 11f-24f)	622,381.	591,061.						
	18	Total expe	ntes Add lines 13-17 (must equal Part IX, column (A), line 25)	1,534,163.	1,481,984.						
	19	Revenue l	ess expenses Subtract line 18 from line 12	11,385.	<u>&lt;1,788.</u> >						
SOS				Beginning of Current Year	End of Year						
Sset	20		ts (Part X, line 16)	440,722.	415,728.						
Net Assets or	21		ities (Part X, line 26)	113,828.	90,622.						
쯚	22		s or fund balances. Subtract line 21 from line 20	326,894.	325,106.						
<u> </u>	art II	<del></del>	ture Block	its, and to the best of my knowledge	no and belief it is true, correct						
		and complet	ties of perjury, I declare that I have examined this return, including accompanying schedules and statemer e. Declaration of preparer (other than officer) is based on all information of which preparer has any knowled	ige	go and belief, it is tide, confect,						
۵.		/	March Life	10-12	-11)						
Sig		Sign	ature of officer	Date Date	10						
He	re	'		Dato							
			RRELL PRATT, PRESIDENT or print name and title	<del></del>							
_		1	, Doto	Check if Prepare	er's identifying number						
Paid Preparer's signature   Date   Preparer's signature   Preparer's											
Preparer's Firm's name (or DAWN M. ROGERS, CPA											
Use	Only	yours if self-employe		LIN	<u> </u>						
		address, and ZIP + 4	OAKLAND, CA 94619	Phone no 5	10-482-3433						
Ma	v the l	٠	s this return with the preparer shown above? (see instructions)	T Holle Hu. P J	X Yes No						
	001 02-0		A For Privacy Act and Paperwork Reduction Act Notice, see the separate	nstructions	Form <b>990</b> (2009)						
-02					••• (=000)						

	1990 (2009) GENERAL TEAMSTERS LOCAL #431	<u>94-0577293</u>	Page 2
Pa	rt III Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission:		
	LABOR ORGANIZATION		
	<del></del>		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	L Yes	X No
	If "Yes," describe these new services on Schedule O	_	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for each of the organization's three largest program services by exp	oenses	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of g		
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	jranto ano	
	allocations to others, the total expenses, and revenue, if any, for each program service reported.		
			<del></del>
4a		evenue \$	)
	PROVIDING LOCAL UNION MEMBERSHIP WITH CONTRACT NEGOTIATI	ION SUPPORT	
	<u>SERVICES</u>		
4b	(Code <sup>-</sup> ) (Expenses \$ including grants of \$ ) (Re	evenue \$	)
	PROVIDING LOCAL UNION MEMBERSHIP WITH SUPPORT SERVICES		
4c	(Code ) (Expenses \$ including grants of \$ ) (Re	evenue \$	)
	PROVIDING LOCAL UNION MEMBERSHIP WITH CONTRACT SUPPORT S		,
	INOVIDING DOCAL ONION MEMBERSHIP WITH CONTRACT BUTTORT E	DERVICED	
		<del></del>	
			<del></del>
	Oth		
4d	Other program services. (Describe in Schedule O)		
	(Expenses \$ including grants of \$ ) (Revenue \$		
<u>4e</u>	Total program service expenses ▶ \$		

932002 02-04-10 Form 990 (2009) GENERAL TEAMSTERS LOCAL #431

Part IV Checklist of Required Schedules

			Yes	No
1	ls the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
•	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, 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		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI			
•	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.			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			1
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	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.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		.,	
	Schedule D, Parts XI, XII, and XIII.	12	Х	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No  12A  X			
	The first of the f	40		v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Х
45	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	140		41
15	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
10	located outside the United States? If "Yes," complete Schedule F, Part III	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			_ <del>-</del> _
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
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		Х
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		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х
		Form	990	2009)

Part IV Checklist of Required Schedules (continued)

	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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		X
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 25	24a		X
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) and 501(c)(4) 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	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27	ļ	X
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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	ļ	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
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		X
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	ļ	X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	1		
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	ļ	<u> </u>
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O.	38	X	<u> </u>
		Form	990	(2009)

Form 990 (2009) GENERAL TEAMSTERS LOCAL #431

Part V Statements Regarding Other IRS Filings and Tax Compliance

16 Enter the number reported in Box 3 of Form 1996, Annual Summary and Transmittal of U.S. Information Returns. Earlier of Annual Summary and Transmittal of U.S. Information Returns. Earlier of Annual Summary and Transmittal of U.S. Information Returns. Earlier of Annual Summary and Transmittal of U.S. Information Returns. Earlier of Forms WG3 cincluded in the 1a. Enter 0.4 not applicable.  © Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamining (gambling) withing with or within the year covered by this return.  10 If all teast one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1 and 2a is greater than 250, you may be required to e-file this return. (see metructions)  13 Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  14 If "Yes," sum of lines 1 and 2a is greater than 250, you may be required to e-file this return. (see metructions)  15 If "Yes," enter the name of the foreign country.  16 If "Yes," enter the name of the foreign country.  17 If "Yes," enter the name of the foreign country.  18 Was the organization in party to a prohibited tax shelter transaction?  19 If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  19 If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  10 If "Yes," did the organization that was or is a party to a prohibited tax shelter transaction?  10 If "Yes," did the organization that it was or is a party to a prohibited tax shelter transaction?  11 If yes, "did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  11 If yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  12 If yes, "did the organiz				Yes	No
U.S. Information Returns Enter-O- if not applicable Enter the number of Forms W.Q. Ginduded in line 1a. Enter-O- if not applicable D. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to pinze winners? 2	1a	Enter the number reported in Box 3 of Form 1096. Annual Summary and Transmittal of			
b. Enter the number of Forms W/3 unducted in tine 1a. Enter 0-if not applicable  C. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamming (gambing) winnings to prize without provided in the complex with the complex w					ĺ
counts or comply with backup withholding rules for reportable payments to vendors and reportable gamining (gambling) withings to prize winners?  2a. Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return.  b if at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return, (see instructions)  3 but the organization have unreated business gross income of \$1,000 or more during the year covered by this return?  3 if "Yss," has if filed a form 990-T for this year? If "No," provide an explanation in Schedule 0  4 At any time during the calendar year, did the organization have an interest in, or a spanative or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  5 if "Yes," enter the name of the foreign country, (such as a bank account, securities account, or other financial account)?  6 if "Yes," in loss 5 or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  6 if "Yes," in loss 5 or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  6 if "Yes," one Say of Say of the organization that it was or is a party to a prohibited tax shelter transaction?  7 or granizations that were not tax deductible?  8 if "Yes," did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible?  9 if "Yes," did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible?  1 organizations that may receive deductible contributions under section 170(c).  1 of the organization shall may receive deductible contributions under section 170(c).  1 of the organization shall may receive dedu	b	''			
Enter the number of employees reported or Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.  If all least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. See instructions)  Note is the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. See instructions?  Note is the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. See instructions of the see instructions of exceptions and filing requirements for Form 56 in the second of the second o					ĺ
titled for the calendar year ending with or within the year covered by this return    If at least one is reported on line 2a, did the organization file all required federal employment tax returns?   Note. If the sum of lines 1 and 2 as greater than 250, you may be required to e-file this return, (see instructions)   3a			1c		ĺ
b if at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note: if the sum of lines 1a and 2a is greater than 250, you may be required to e-file this netum. (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  5 If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  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; or a segnature or other authority over, a financial account in a foreign country. ►  5a If "Yes," et alien structions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  5a Was the organization party to a prohibited tax shelter transaction?  6a Does the organization aparty to a prohibited tax shelter transaction?  6b If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shetter Transaction?  6c 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?  6c Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7b If "Yes," did the organization include with every solicitation an express provided?  7c Did the organization or the payor?  7d If "Yes," indicate the number of Forms 8282 filed during the year  9c Did the organization, during the year, receive any turnds, directly or indirectly, on a personal benefit contract?  7d If "Yes," indicate the number of Forms 8282 filed during the year  9c Did the organization, or a donor advised fund maintained by a sponsoring organization, and expression for promised to the supporting	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
Note, if the sum of lines 1a and 2 as greater than 250, you may be required to e-file this return, (see instructions) 3 Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 4 At 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, or other financial account)?  b if "Yes," enter the name of the foreign country. ►  See the instructions for exceptions and filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts.  5 Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that flavs or is a party to a prohibited tax shelter transaction?  5 Was the organization aparty to a prohibited that shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that flavs or is a party to a prohibited tax shelter transaction?  5 Did any taxable party notify the organization file Form 88661, Disclosure by Tax. Exempt Entity Regarding Prohibited any contributions that were not tax deductible?  6 Did the organization new annual gross receipts that are normally greater than \$100,000, and did the organization shear may receive deductible contributions under section 170(c).  9 Did the organization shart may receive deductible contributions under section 170(c).  9 Did the organization shart may receive deductible contributions under section 170(c).  10 If "Yes," indicate the number of Forms 8282 filed during the year obditions under section 170(c).  11 If "Yes," indicate the number of Forms 8282 filed during the year obditions under section 170(c).  12 At If "Yes, "Indicate the number of Forms 8282 filed during the year obdition of qualified intellectual property, did the organization file Form 1898 as required?  12 Did the organization of qualified intellectual property, did th		filed for the calendar year ending with or within the year covered by this return 2a 0			
3a Dt the organization have unrelated business gross moome of \$1,000 or more during the year covered by this return?  b if "Yes," has if filed a Form 990.1 for this year? if "No," provide an explanation in Schedule O  3b	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<u> </u>
b if "Yes," has it filled a Form 990-T for this year? If "No," provide an explanation in Schedule O 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)?  b if "Yes," enter the name of the foreign country, Implication is a bank account, securities account, or other financial account;?  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  5a Was the organization a party to a prohibited tax shelter transaction?  5b In Carl Stable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  6a Des 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?  6b If "Yes," to line 5a or 4b the organization receive a payment in excess of \$7 made party as a contribution and party for goods and services provided to the payor?  6b If "Yes," indicate the number of Forms 8282 filed during the year ob the organization found the very excess any funds, directly or indirectly, to pay premiums on a personal benefit contract?  6b If "Yes," indicate the number of Forms 8282 filed during the year of all contributions of qualified inflictual property, did the organization file a Form 1098 C as required?  7c X  7d If Yes, "Indicate the number of Forms 8282 filed during the year of all contributions of qualified inflictual property, did the organization file a Form 1098 C as required?  7d If yes organization or advised funds and section 509(a)(3) supporting organizations. Did the supporting organizati		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
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)?  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization aparty notify the organization that it was or is a party to a prohibited tax shelter transaction?  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?  6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8a If "Yes," did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?  8b If "Yes," indicate the number of Forms 8282 filed during the year  10 bid the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c If Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  8 Sponsoring organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  9 For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  7 The orontributions of cars, boats, airplanes, and other vehicles, did the organization, have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  9 Did the organization make any taxable distributions under section 4966?  9 Did the organiz	За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
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b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  f For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization make any taxable distributions under section 4966?  9 Sponsoring organization make any taxable distributions under section 4966?  b Did the organization make any taxable distributions under section 4966?  b Did the organization make and distribution to a donor, donor advisor, or related person?  9 Section 501(c)(7) organizations. Enter:  a Intitation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12  foross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax exempt interest received or accrued during the year  12b	_		7a		X
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12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	b				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		· · · · · · · · · · · · · · · · · · ·			
			12a	<del> </del>	<del> </del>
	<u>b</u>	if "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	Form	990	(3000)

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

<u>Sec</u>	tion A. Governing Body and Management		_			
			1		Yes	No
1a	Enter the number of voting members of the governing body	1a				
b	Enter the number of voting members that are independent	1b		0		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	ıp wıt	h any other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	ne dir	ect supervisior	1		
	of officers, directors or trustees, or key employees to a management company or other person?			3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Fo	orm 9	90 was filed?	4		<u>X</u>
5	Did the organization become aware during the year of a material diversion of the organization's asse	ts?		5		X
6	Does the organization have members or stockholders?			6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	embe	rs of the			
	governing body?			7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per	rsons	s?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken	dur	ng the year			
	by the following:					
а	The governing body?			8a	X	
	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached	d at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	<u> </u>	X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Fi	Reven	ue Code.)		1	
					Yes	No
	Does the organization have local chapters, branches, or affiliates?			10a	<u></u>	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such	chap	oters, affiliates,	4		
	and branches to ensure their operations are consistent with those of the organization?			10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before f	filing	the form?	11	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990					
	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that co	uld g	ıve rise			
	to conflicts?			12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes	," describe			
	in Schedule O how this is done			12c		
13	Does the organization have a written whistleblower policy?			13		X
14	Does the organization have a written document retention and destruction policy?			14_		
15	Did the process for determining compensation of the following persons include a review and approv		independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•		450		X
_	The organization's CEO, Executive Director, or top management official			15a 15b		X
b	Other officers or key employees of the organization			130		A
16 -	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	men	with a			
юа	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	HIEN	willia	16a		х
	taxable entity during the year?	aluate	te narticinati	_		
D	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva- in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization.					
		عدا الدو		16b		
Sec	tion C. Disclosure		1.111			
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 Forms 1023 (or 1024 if applicable), 990, and 990-	T (50	1(c)(3)s only) a	vailable for		
	public inspection. Indicate how you make these available. Check all that apply	,- <b>-</b>				
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents,	confl	ct of interest o	olicy, and fina	ancial	
	statements available to the public.			,,		
20	State the name, physical address, and telephone number of the person who possesses the books a	and re	ecords of the o	organization	<b>&gt;</b>	
	DARRELL PRATT - (559)486-5414			J		
	1140 WEST OLIVE, FRESNO, CA 93728					
				Form	990	יפחחפי

# 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. Use Schedule J-2 if additional space is needed.

- 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. 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

DARRELL PRATT PRESIDENT VICE-PRESIDENT PETER NUNEZ SECRETARY-TREASURER STEVE LAGOE RECORDING-SECRETARY GEORGE AVALOS TRUSTEE/BUSINESS AGENT LENNIE WELLS TRUSTEE DAVID CARLOCK TRUSTEE  DAVID CARLOCK TRUSTEE  5.00  X  Check all that apply) Date using per use of particular apply and purply and purpl	compensation from the organization (W-2/1099-MISC)  84,540.  79,674.  88,153.  1,250.	compensation from related organizations (W-2/1099-MISC)  12,164.  0.	32,767. 32,767.
DARRELL PRATT PRESIDENT KEN FLEMING VICE-PRESIDENT PETER NUNEZ SECRETARY-TREASURER STEVE LAGOE RECORDING-SECRETARY GEORGE AVALOS TRUSTEE/BUSINESS AGENT LENNIE WELLS TRUSTEE CURTIS THIESEN TRUSTEE DAVID CARLOCK	the organization (W-2/1099-MISC)  84,540.  79,674.  88,153.	organizations (W-2/1099-MISC)  12,164.  0. 0.	compensation from the organization and related organizations  32,767.  32,767.
PRESIDENT 40.00 X  KEN FLEMING VICE-PRESIDENT 40.00 X  PETER NUNEZ SECRETARY-TREASURER 40.00 X  STEVE LAGOE RECORDING-SECRETARY 5.00 X  GEORGE AVALOS TRUSTEE/BUSINESS AGENT 40.00 X  LENNIE WELLS TRUSTEE 40.00 X  CURTIS THIESEN TRUSTEE 5.00 X  DAVID CARLOCK	79,674. 88,153. 1,250.	0.	32,767.
KEN FLEMING VICE-PRESIDENT 40.00 X  PETER NUNEZ SECRETARY-TREASURER 40.00 X  STEVE LAGOE RECORDING-SECRETARY 5.00 X  GEORGE AVALOS TRUSTEE/BUSINESS AGENT 40.00 X  LENNIE WELLS TRUSTEE 40.00 X  CURTIS THIESEN TRUSTEE 5.00 X  DAVID CARLOCK	79,674. 88,153. 1,250.	0.	32,767. 32,767. 32,767.
VICE-PRESIDENT         40.00         X           PETER NUNEZ         SECRETARY-TREASURER         40.00         X           STEVE LAGOE         TRECORDING-SECRETARY         5.00         X           GEORGE AVALOS         TRUSTEE/BUSINESS AGENT         40.00         X           LENNIE WELLS         40.00         X           CURTIS THIESEN         TRUSTEE         5.00         X           DAVID CARLOCK         5.00         X	88,153. 1,250.	0.	32,767.
PETER NUNEZ SECRETARY-TREASURER 40.00 X STEVE LAGOE RECORDING-SECRETARY 5.00 X GEORGE AVALOS TRUSTEE/BUSINESS AGENT 40.00 X LENNIE WELLS TRUSTEE 40.00 X CURTIS THIESEN TRUSTEE 5.00 X DAVID CARLOCK	88,153. 1,250.	0.	32,767.
SECRETARY-TREASURER 40.00 X  STEVE LAGOE RECORDING-SECRETARY 5.00 X  GEORGE AVALOS TRUSTEE/BUSINESS AGENT 40.00 X  LENNIE WELLS TRUSTEE 40.00 X  CURTIS THIESEN TRUSTEE 5.00 X  DAVID CARLOCK	1,250.	0.	
RECORDING-SECRETARY 5.00 X GEORGE AVALOS TRUSTEE/BUSINESS AGENT 40.00 X LENNIE WELLS TRUSTEE 40.00 X CURTIS THIESEN TRUSTEE 5.00 X DAVID CARLOCK			0.
GEORGE AVALOS TRUSTEE/BUSINESS AGENT 40.00 X LENNIE WELLS TRUSTEE 40.00 X CURTIS THIESEN TRUSTEE 5.00 X DAVID CARLOCK			
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TRUSTEE 40.00 X CURTIS THIESEN 5.00 X DAVID CARLOCK	0 2 7 0 7 2 7	0.	32,767
CURTIS THIESEN TRUSTEE 5.00 X DAVID CARLOCK	70 505	0.	32, <u>767</u> .
TRUSTEE 5.00 X DAVID CARLOCK	78,585.		34,101
DAVID CARLOCK	3,675.	0.	0.
TRUSTEE 5.00 X			
	1,500.	0.	0.

Form 990 (2009)

	. (A)  Name and title	(B) Average hours			(C Pos	C) ition			(D)  Reportable compensation	(E) Reportable compensatio	n		(F) timate	
		per week	Individual frustee or director	Institutional trustee	Officer		Highest compensated E		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MIS	s	comp fro orga and	other	ation e tion ted
														_
													_	_
					-									
														_
													·	
1b	Total				<u> </u>		<u> </u>	<u> </u>	418,748.	12,1	64.	16	3,8	35.
2	Total number of individuals (including but is compensation from the organization	not limited to th	nose	liste	ed a	bov	e) wl	no r	eceived more than \$100	0,000 in reportabl	е			0
3	Did the organization list any former officer			e, ke	y en	nplo	yee,	or h	nighest compensated ei	mployee on	ſ		Yes	No
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the si and related organizations greater than \$15	um of reportab	le c							the organization		4		X
5	Did any person listed on line 1a receive or the organization? If "Yes," complete Scheoo	accrue compe	nsat	ion 1						rices rendered to		5		х
1	Complete this table for your five highest countries the organization.	ompensated in	dep	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of com	npensa	ation f	rom	
	(A) Name and business	s address							(B) Description of s	services	Co	(C		on
			<u> </u>	<u>-</u>										
						·								
	Total number of independent contractors	(including but	not h	ımıte	nd to	the	ا مور	ster	d above) who received r	nore than				
<u> </u>	\$100,000 in compensation from the organ						0						990	(2009)

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete on not include amounts reported on lines 6b, p, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
Grants and other assistance to governments and	4,938.	•		<del></del>
organizations in the U.S. See Part IV, line 21  Grants and other assistance to individuals in	4,330.			· <del>-</del>
the U S See Part IV, line 22				
· · · · · · · · · · · · · · · · · · ·	· · · · · ·			
Grants and other assistance to governments, organizations, and individuals outside the U.S.				
See Part IV, lines 15 and 16				
Benefits paid to or for members	23,057.			
Compensation of current officers, directors,	23,037.			
trustees, and key employees	582,584.			
Compensation not included above, to disqualified	002/0021			
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)				
Other salaries and wages	139,612.			
Pension plan contributions (include section 401(k)		····		
and section 403(b) employer contributions)	53,472.			
Other employee benefits	42,100.			
Payroll taxes	45,160.			<del></del> -
Fees for services (non-employees)				
a Management				_
b Legal	17,203.	•		
Accounting	7,500.			
Lobbying				
Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
Advertising and promotion	200.			
Office expenses	70,083.			
Information technology				
Royalties				<u> </u>
Occupancy	14,022.			
Travel	55,430.			
Payments of travel or entertainment expenses				
for any federal, state, or local public officials				·
Conferences, conventions, and meetings	10,378.		-	
Interest	5,261.	<del></del>		
Payments to affiliates	358,852.			
Depreciation, depletion, and amortization	29,222.	- <del></del>		
Insurance			-	
Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a AUTOMOBILE EXPENSES	22,568.			
ORGANIZING & STRIKE	306.			
FUNDS RECEIVED FOR TRAN	36.			
d				
e				
f All other expenses				
Total functional expenses. Add lines 1 through 24f	1,481,984.			
Joint costs Check here   If following				
SOP 98-2. Complete this line only if the organization				
reported in column (B) joint costs from a combined				
educational campaign and fundraising solicitation				

415,728. Form 990 (2009)

325,106.

31

32

33

326,894.

440,722

31

32

33

Paid-in or capital surplus, or land, building, or equipment fund

Total net assets or fund balances

Total liabilities and net assets/fund balances

Retained earnings, endowment, accumulated income, or other funds

1 0111	GENERAL IERMSTERS DOCAL #451	, 433	га	ye ız
Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990.   Cash Accrual X Other MODIFIED \$			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	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?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both.			
	X Separate basis Consolidated basis Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or guides, explain why in Schodule O and describe any stone taken to undergo such guides	O.L.		

Form **990** (2009)

### SCHEDULE C

(Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047
2009

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

t the organization a	answered "Yes," to Fo	m 990, Part IV, line 3, c	or Form 990-EZ, Part VI, li	ne 46 (Political Campai	gn Activities), then
----------------------	-----------------------	---------------------------	-----------------------------	-------------------------	----------------------

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only.

### If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

GENERAL TEAMSTERS LOCAL #431  Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.  Provide a description of the organization's direct and indirect political campaign activities in Part IV.	<ul> <li>Section 501(c)(4), (5), or (6) organization</li> </ul>	tions: Complete Part III			
Part I-A   Complete if the organization is exempt under section 501(c) or is a section 527 organization.  1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.  2 Political expenditures	Name of organization	•		Empl	oyer identification number
1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political expenditures	GENERAL	TEAMSTERS LOCAL	# <u>431</u>		94-0577293
2 Political expenditures 3 Volunteer hours    Part I-B   Complete if the organization is exempt under section 501(c)(3).   I Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?   Yes   No   Yes   Yes   No   Yes   No   Yes   Yes   No   Yes   Yes	Part I-A Complete if the org	janization is exempt und	der section 501(c	or is a section 527 o	rganization.
Part I-B   Complete if the organization is exempt under section 501(c)(3).    Enter the amount of any excise tax incurred by the organization under section 4955   \$	1 Provide a description of the organiz	ation's direct and indirect politi	cal campaign activities	in Part IV.	
Part I-B   Complete if the organization is exempt under section 501(c)(3).  1	2 Political expenditures			▶\$	0.
1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 Was a correction made? 5 If "Yes," describe in Part IV  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization is funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter ·0-delivered to a separate political organization organization organization organization.	3 Volunteer hours				0.
1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 Was a correction made? 5 If "Yes," describe in Part IV  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization is funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter ·0-delivered to a separate political organization organization organization organization.					
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3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  4a Was a correction made?  b If "Yes," describe in Part IV  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0.  (e) Amount of political contributions received and promptly and directly delivered to a separate political organization or a separate political organization.	•	· •			
4a Was a correction made?      Yes   No	•	, ,		5	
b If "Yes," describe in Part IV  Part I-C   Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities  2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities  3 Total exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV  (a) Name  (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0- filing organization's funds. If none, enter -0- delivered to a separate political organization organization.	•	n 4955 tax, did it file Form 4720	for this year?		
Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities  2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities  3 Total exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0-filing organization's funds. If none, enter -0-filing organization is political contributions received and promptly and directly delivered to a separate political organization.					tes No
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2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities  3 Total exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0- delivered to a separate political organization organization.					<del></del>
Total exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b  Did the filing organization file Form 1120-POL for this year?  Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0- delivered to a separate political organization		· · ·		- · · · · · · · · · · · · · · · · · · ·	
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Inne 17b  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0-intributions received and promptly and directly delivered to a separate political organization	•	Add lines 1 and 2. Enter here	and on Form 1120-POI	<b>_,</b>	
Did the filing organization file Form 1120-POL for this year?  Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0- promptly and directly delivered to a separate political organization				▶\$	
For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0- promptly and directly delivered to a separate political organization	4 Did the filing organization file Form	1120-POL for this year?			Yes No
that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filling organization's funds. If none, enter -0-promptly and directly delivered to a separate political organization	5 Enter the names, addresses and er	nployer identification number (E	IN) of all section 527 p	olitical organizations to whic	h payments were made
(PAC) If additional space is needed, provide information in Part IV  (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0- promptly and directly delivered to a separate political organization					
(a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0- delivered to a separate political organization				eparate segregated fund or a	a political action committee
filing organization's contributions received and funds. If none, enter -0-bromptly and directly delivered to a separate political organization	(PAC) If additional space is needed	I, provide information in Part IV			<del></del>
funds. If none, enter -0- promptly and directly delivered to a separate political organization	(a) Name	(b) Address	(c) EIN	1	
delivered to a separate political organization			}	, 5 5	
				lunus, ir rione, criter o	delivered to a separate
				<del></del>	ii florie, enter -o-
		<u></u>	<del></del>		<del> </del>
				<del> </del>	
			<u> </u>		

932041 02-04-10

LHA

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

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 GE Part II-A Complete if the organize	NERAL TE	AMSTERS LOC	AL #431	94-( ad Form 5768	0577293 Page 2
(election under section		inprunder sectio	in so hojoj and in	50 1 OIIII 0700	
A Check ▶ ☐ If the filing organization b		iliated group			
B Check If the filing organization of	_	- ·	ovisions apply		
	Lobbying Expe	nditures		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence					
b Total lobbying expenditures to influence	a legislative bo	dy (direct lobbying)			
c Total lobbying expenditures (add lines 1	a and 1b)				
d Other exempt purpose expenditures					
e Total exempt purpose expenditures (ad-	d lines 1c and 1	d)			_ <del> </del>
f Lobbying nontaxable amount Enter the				· · · · · · · · · · · · · · · · · · ·	<u> </u>
If the amount on line 1e, column (a) or (b) i	I	bying nontaxable am			
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,000,000		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,500,00		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,000,0		00 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000	000.			
g Grassroots nontaxable amount (enter 2	504 of line 1f)				
h Subtract line 1g from line 1a If zero or le	•				
i Subtract line 1f from line 1c If zero or le					
i If there is an amount other than zero on	=	line 1i, did the organiz	zation file Form 4720		<u> </u>
reporting section 4911 tax for this year?					Yes No
	4-Year Av	eraging Period Under			
			n do not have to comp es 2a through 2f on pa		
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))			<del> </del>		
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

## Schedule C (Form 990 or 990-EZ) 2009 GENERAL TEAMSTERS LOCAL #431 94-0577293 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(6	3)	(b	)
		Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				·
g					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities? If "Yes," describe in Part IV				
j	Total Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	-		<del>.</del>	
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	ion 501/o	(5) or so	otion	
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	1011 50 1(0)	(5), 01 56	Ction	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	Χ	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?		3		X
1	"Yes."  Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	tical			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b			2b		
c	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	kcess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
	expenditure next year?		4		
_	Taxable amount of lobbying and political expenditures (see instructions)		5		
5					
Pa	rt IV Supplemental Information				
Pa	rt IV Supplemental Information  plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; a	and Part II-B,	line 1ı Also	, complete	this pa
<b>Pa</b> Com		and Part II-B,	line 1ı Also	, complete	this pa
Pa Com	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5;	and Part II-B,	line 1ı Also	o, complete	this pa
Pa Com for a PA	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; any additional information $\mathbf{RT}  \mathbf{I} - \mathbf{A}$ , $\mathbf{LINE}  1$ :	and Part II-B,	line 1ı Also	o, complete	this pa
Pa Com for a PA	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; any additional information	and Part II-B,	line 1ı Also	o, complete	this pa
Pa Comfor a PA	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; any additional information $\mathbf{RT}  \mathbf{I} - \mathbf{A}$ , $\mathbf{LINE}  1$ :	and Part II-B,	line 1ı Also	o, complete	this pa
Pa Comfor a PA	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; any additional information $\mathbf{RT}  \mathbf{I} - \mathbf{A}$ , $\mathbf{LINE}  1$ :	and Part II-B,	line 1ı Also	o, complete	this pa
Pa Comfor a PA	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; any additional information $\mathbf{RT}  \mathbf{I} - \mathbf{A}$ , $\mathbf{LINE}  1$ :	and Part II-B,	line 1ı Also	o, complete	this pa
Pa Comfor a PA	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; any additional information $\mathbf{RT}  \mathbf{I} - \mathbf{A}$ , $\mathbf{LINE}  1$ :	and Part II-B,	line 1ı Also	o, complete	this pa
Pa Compor a	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; any additional information $\mathbf{RT}  \mathbf{I} - \mathbf{A}$ , $\mathbf{LINE}  1$ :	and Part II-B,	line 1ı Also	o, complete	this p

Schedule C (Form 990 or 990-EZ) 2009

### Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

2009
Open to Public Inspection

Name of the organization

GENERAL TEAMSTERS LOCAL #431

Employer identification number 94-0577293

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (b) Funds and other accounts (a) Donor advised funds Total number at end of year 1 2 Aggregate contributions to (during year) Aggregate grants from (during year) 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? 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? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Preservation of a certified historic structure Protection of natural habitat 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 2a a Total number of conservation easements 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIV, 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, 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) Revenues included in Form 990, Part VIII, line 1 (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 relating to these items. a Revenues included in Form 990, Part VIII, line 1

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932051 02-01-10

Schedule D (Form 990) 2009

b Assets included in Form 990, Part X

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009

932053 02-01-10

Schedule D (Form 990) 2009

	dule D (Form 990) 2009	GENERAL TEAMSTERS LOCAL	#431		94-(	577293	Page 4
Par	t XI Reconciliation of	f Change in Net Assets from Form 9	990 to Audited Fir	ancial State	ement	S	
1	Total revenue (Form 990, Par	t VIII, column (A), line 12)		1		1,480	<u> 196.</u>
2	Total expenses (Form 990, Pa	art IX, column (A), line 25)		2		1,481	984.
3	Excess or (deficit) for the year	r. Subtract line 2 from line 1		3		<1	788.
4	Net unrealized gains (losses)	on investments		4			
5	Donated services and use of	facilities		5			
6	Investment expenses			6			
7	Prior period adjustments			7			
8	Other (Describe in Part XIV.)			8			
9	Total adjustments (net). Add	lines 4 through 8		9			0.
10	Excess or (deficit) for the yea	r per audited financial statements Combine lin	es 3 and 9	10	<u> </u>		<u>,788.</u> >
Par	<del></del>	f Revenue per Audited Financial Sta	itements with Re	venue per i	1 1		100
1	=	er support per audited financial statements			1	1,480	196.
2		out not on Form 990, Part VIII, line 12.	1 - 1				
а	Net unrealized gains on inves		2a		-		
b	Donated services and use of		2b	<del></del>	-		
C	Recoveries of prior year gran	ts	2c		-		
d	Other (Describe in Part XIV)		_2d		ا ۵۰ ا		0
e	Add lines 2a through 2d				2e	1,480	106
3	Subtract line 2e from line 1	OO Dest VIII has 40 best ask as has 4.			3	1,400	130.
4		90, Part VIII, line 12, but not on line 1	45				
a	·	luded on Form 990, Part VIII, line 7b	4a   4b	···	-		
b	Other (Describe in Part XIV.)		4D		┥╻╽		0.
C	Add lines 4a and 4b	od 4. Other must accept form 000 Port I line 10	1		4c	1,480	
Pai	rt XIII Reconciliation of	nd 4c. (This must equal Form 990, Part I, line 12 f Expenses per Audited Financial St	tatements With E	xpenses pe			, 130.
1	<del>'</del>	er audited financial statements		<u> </u>	1 1	1,481	.984.
2	•	out not on Form 990, Part IX, line 25					
_	Donated services and use of		2a				
h	Prior year adjustments		2b		7		
	Other losses		2c		7		
q	Other (Describe in Part XIV.)		2d		7 I		
e	Add lines 2a through 2d		<del></del>		2e		0.
3	Subtract line 2e from line 1				3	1,481	,984.
4	Amounts included on Form 9	990, Part IX, line 25, but not on line 1					
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b	4a		_		
b	Other (Describe in Part XIV.)		4b		<b>」</b> │		
	Add lines 4a and 4b				4c		0.
_5_		and <b>4c.</b> (This must equal Form 990, Part I, line 1	(8)		5	1,481	<u>,984.</u>
	rt XIV Supplemental In	· · · · · · · · · · · · · · · · · · ·					
		lescriptions required for Part II, lines 3, 5, and 9					4, Part
X, lın	e 2, Part XI, line 8, Part XII, line	es 2d and 4b; and Part XIII, lines 2d and 4b. Als	so complete this part to	provide any a	dditional	information	
	<u> </u>						
	<u> </u>						
					-		
	<del></del> -						
	<u> </u>			<del></del>			
					Sched	lule D (Form 9	90) 2009

ž Schedule I (Form 990) 2009 Employer identification number 94-0577293 Open to Public OMB No 1545-0047 Inspection (h) Purpose of grant or assistance X Yes recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 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 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ▶ Attach to Form 990. (d) Amount of cash grant LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. GENERAL TEAMSTERS LOCAL #431 (c) IRC section if applicable Enter total number of section 501(c)(3) and government organizations General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? Enter total number of other organizations 1 (a) Name and address of organization or government Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Parti Part

Page 2

(f) Description of non-cash assistance								
(e) Method of valuation (book, FMV, appraisal, other)			additional information					
(d) Amount of non- cash assistance			line 2, and any other					
(c) Amount of cash grant			n required in Part I,					
(b) Number of recipients			de the information					
(a) Type of grant or assistance			Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information					

Schedule I (Form 990) 2009

932102 02-02-10

### **SCHEDULE 0**

Department of the Treasury

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

OMB No 1545-0047
2009
Open to Public Inspection

Internal Revenue Service	Attach to Form 990.	Inspection
Name of the organization	GENERAL TEAMSTERS LOCAL #431	Employer identification number 94-0577293
FORM 990, PAR	RT I, ITEM K, OTHER ORGANIZATION TYPE:	
SUBORDINATE I	IN GROUP RULING	
FORM 990, PAR	RT VI, SECTION A, LINE 7A: ALL EXECUTIVE BOAR	D MEMBERS ARE
ELECTED BY TH	HE LOCAL'S MEMBERSHIP.	
		<u> </u>
FORM 990, PAR	RT VI, SECTION A, LINE 7B: THE EXECUTIVE BOAR	D MAY NOT
TERMINATE OR	MERGE THE ORGANIZATION WITHOUT MEMBERSHIP AP	PROVAL.
FORM 990, PAF	RT VI, SECTION B, LINE 11: THE FORM 990 IS PR	EPARED BY AN
OUTSIDE ACCOU	JNTANT AND PROVIDED TO THE EXECUTIVE BOARD FO	R APPROVAL PRIOR
TO SUBMISSION	N TO THE IRS.	
FORM 990, PAR	RT VI, SECTION C, LINE 19: COPIES OF THE LOCA	L'S GOVERNING
DOCUMENTS ANI	O FINANCIAL STATEMENTS ARE AVAILABLE UPON WRI	TTEN REQUEST SENT
TO THE LOCAL	'S ADMINISTRATIVE OFFICES.	
		1.5
FORM 990, PAR	RT XI, LINE 1	
THE ORGANIZAT	TION USES THE MODIFIED CASH BASIS OF ACCOUNTI	NG
TH_		

2009 Open to Public Inspection **Employer identification number** OMB No 1845-0047 Direct controlling Direct controlling 94-0577293 entity entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) End-of-year assets status (if section Public charity 501(c)(3)) <u>e</u> ► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Total income Exempt Code section € ► See separate instructions. Related Organizations and Unrelated Partnerships Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or Legal domicile (state or foreign country) foreign country) ► Attach to Form 990. GENERAL TEAMSTERS LOCAL #431 Primary activity Primary activity 9 INTERNATIONAL BROTHERHOOD OF TEAMSTERS 53-0215427, 25 LOUISIANA AVE., NW Name, address, and EIN Name, address, and EIN of related organization of disregarded entity WASHINGTON, DC 20001 Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) Part Part II

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

Schedule R (Form 990) 2009

94-0577293

Page 2

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GENERAL TEAMSTERS LOCAL #431 Schedule R (Form 990) 2009 Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year ) Part

General or managing partner? Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)  $\equiv$ ate allocations? Disproportion-Yes No Ξ Share of end-of-year assets 6 Share of total income Predominant income (related, unrelated, excluded from tax under sections 512-514) **e** (d)
I Direct controlling entity Legal domicile (state or foreign country) <u>છ</u> Primary activity Name, address, and EIN of related organization Part IV

Percentage ownership Ξ Share of end-of-year assets <u>6</u> Share of total income Type of entity (C corp, S corp, or trust) ত Direct controlling entity Legal domicile (state or foreign country) ত Primary activity 9 Name, address, and EIN of related organization

932162 02-04-10

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Schedule R (Form 990) 2009

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Yes

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Part V

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

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36)

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?

Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity **b** Gift, grant, or capital contribution to other organization(s)

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

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

Sale of assets to other organization(s)

Purchase of assets from other organization(s)

Exchange of assets

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

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

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

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

m Sharing of facilities, equipment, mailing lists, or other assets

Sharing of paid employees

Reimbursement paid to other organization for expenses

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Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

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

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	ansaction thresholds	
(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved
(1) INTERNATIONAL BROTHERHOOD OF TEAMSTERS	o	300,885.
(2)		
(4)		
(5)		

Schedule R (Form 990) 2009

932163 02-04-10

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94-0577293 Page 4

Schedule R (Form 990) 2009 GENERAL TEAMSTERS LOCAL #431

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

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

General or managing partner? Yes No Ξ Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) <u>6</u> (f)
Disproportionate
allocations? Yes No Share of end-of-year assets <u>e</u> Are all partners section 501(c)(3) organizations? Yes No ਉ (state or foreign Legal domicile country) Primary activity Name, address, and EIN of entity

932164 02-04-10

Schedule R (Form 990) 2009

Form	8868 (Rev. 4-2009)			Page 2						
• if	you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and chec	k this bo		► X						
	. Only complete Part II if you have already been granted an automatic 3-month extension on a previou									
If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).										
	Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).									
_	Name of Exempt Organization									
Туре	16	milproyer raci	ancadon number							
print	GENERAL TEAMSTERS LOCAL #431	94-057	7293							
File by		- 7	For IRS use on							
due di filing t	## OF DAWN M. ROCKES CDA	:4.2.]	. 5. 11.0 000 011	7						
return	See City, town or post office, state, and ZIP code. For a foreign address, see instructions		\$ \frac{1}{2}^{n}	······································						
instru	HOUSE 4100 REDWOOD ROAD, #10-343, OAKLAND, CA	,-(	1 5 1 2 -							
Che	ck type of return to be filed (File a separate application for each return):									
X	Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 104	1-A	Form 5227	Form 8870						
L	Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 472	o [	Form 6069							
STO	Pl Do not complete Part II if you were not already granted an automatic 3-month extension on a	previous	ly filed Form 88	968.						
	DARRELL PRATT									
• T	ne books are in the care of > 1140 WEST OLIVE - FRESNO, CA 93728									
	elephone No. ► (559)486-5414 FAX No. ► (559)441	-1743	}							
	the organization does not have an office or place of business in the United States, check this box			▶ □						
	this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)									
box										
4	I request an additional 3-month extension of time until NOVEMBER 15, 2010.		orradio dio dat	0100110101.						
5	For calendar year 2009, or other tax year beginning, and e	ndina		_						
6	If this tax year is for less than 12 months, check reason: Initial return Final return	· · · ·	Change in	accounting period						
7	State in detail why you need the extension		J	0.						
	TAXPAYER REQUIRES ADDITIONAL TIME TO OBTAIN THIRD	PARTY	DOCUME	NTATION						
	NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.									
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any									
	nonrefundable credits. See instructions.		8a \$							
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimate	rd	- 1							
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid	<u> </u>	<u></u>							
	previously with Form 8868.		8b \$							
C	Balance Due, Subtract line 8b from line 8a. Include your payment with this form, or, if required, deport	sit	ŀ							
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instru	ctions.	8c \$	N/A						
	Signature and Verification									
	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, a ie, correct, and complete, and that I am authorized to prepare this form.	nd to the b	est of my knowled	lge and belief,						
Signat	ure Dan Roc Title CPA		Date > 8-1	3~/0						
				8868 (Rev. 4-2009)						