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DLN: 93493131003131

Form **990** 

# **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)

OMB No 1545-0047

Department of the Treasury

nternal	Revenue	Service	► The organization may hav	e to use a copy of this return to satisfy s	tate reporti	ng requireme	ents	Insp	ection
A Fo	r the 2	2010 ca		ning 01-01-2010 and ending 12-31-2010	)	D F'		idontif	. p.,
_		pplicable	C Name of organization INTERNATIONAL BROTHERHOOD (	DF TEAMSTERS LOCAL UNION 71			•	identification	number
_	lress ch	_	Doing Business As			56-0	276	491	
_	ne char	_	-			E Teleph	one	number	
_	ıal retur		Number and street (or P O box if P O BOX 669006	f mail is not delivered to street address)	Room/suite	(704)	59	6-2475	
_	mınated					— <b>G</b> Gross	recei	pts \$ 3,269,42:	1
_	ended r		City or town, state or country, and CHARLOTTE, NC 28266	d ZIP + 4		2 3,333		pto \$ 3,203, 12.	-
App	lication	pending							
			<b>F</b> Name and address of p TED RUSSELL	rincipal officer	H(a) Is th	nis a group return f	or affi	liates? Yes	l✓ <sub>No</sub>
			PO BOX 669006 CHARLOTTE, NC 28266		<b>H(b)</b> Are	all affiliates inc	ludeo	ı, L	Yes No
			CHARLOTTE, NC 28200			'No," attach			uctions)
Tax	x-exem	pt status	「 501(c)(3)	◀ (insert no )	H(c) Gr	oup exempti	on r	iumber 🟲	
w	ebsit e	: <b>-</b> N/A							
<b>C</b> Form	n of ora	nanization	Corporation Trust Associa	tion Other be	I Year of	formation 194	ın T	M State of lea	al domicile NC
	rt I		mary	tion; other P	E real of	Torritation 194	10	14 State of leg	ar doffficile 140
			<u> </u>	sion or most significant activities					
v	1		DRGANIZATION						
ACUVINES & GOVERNANCE	-								
Ĭ	_								
ž	2 (	Check th	nis box দ if the organization	discontinued its operations or disposed o	f more thar	1 25% of its	net	assets	
) ර	3 1	Number	of voting members of the gove	rning body (Part VI, line 1a)			3		7
Č	4 1	Number	of independent voting member	s of the governing body (Part VI, line 1b)		.	4		0
ļ.	5 T	Γotal nur	mber of individuals employed i	n calendar year 2010 (Part V, line 2a) .			5		34
3	1		mber of volunteers (estimate if			-	6		0
•				Part VIII, column (C), line 12		-	7a		0
	ЬN	Net unre	lated business taxable income	from Form 990-T, line 34			7b		
					Pi	rior Year		Curren	
ō	8		butions and grants (Part VIII,			1 6 4 6 0	47		0
Revenue	9		m service revenue (Part VIII,	1,646,0	$\overline{}$		1,608,792		
H <sub>2</sub> V	10 11		ment income (Part VIII, colur	47,4	-		733,260		
	12			), lines 5, 6d, 8c, 9c, 10c, and 11e) 1 (must equal Part VIII, column (A), line	<u> </u>	85,2	/ 8		107,966
	12			· · · · · · · · · · · · · · · · · · ·		1,778,7	49		2,450,018
	13	Grants	and similar amounts paid (Pa	rt IX, column (A), lines 1–3)		4,4	00		6,400
	14	Benefit	ts paid to or for members (Part	t IX, column (A), line 4)		5,0	00		8,750
Ø	15		es, other compensation, emplo	yee benefits (Part IX, column (A), lines 5	:-	953,6	4.8		904,724
Expenses	16a	10) Profes	sional fundraising fees (Part I)	X, column (A), line 11e)					0
⊕ ⊕	ь		ndraising expenses (Part IX, column (	-			$\neg$		
Ω	17			), lines 11a-11d, 11f-24f)		783,0	59		805,165
	18			nust equal Part IX, column (A), line 25)		1,746,1	-		1,725,039
	19			e 18 from line 12		32,6	-		724,979
8 %					Beginn	ing of Curren	ıt	End of	·
net Assets or Fund Balances						Year		LIIG OI	
88 18a	20		essets (Part X, line 16)			1,666,5	_		2,924,625
<u> </u>	21 22			t line 21 from line 20		253,7 1,412,8	-		794,613
	t III		ature Block	time 21 nom me 20		1,412,0	19		2,130,012
Jnder Gnowl	· penal	ties of pe	erjury, I declare that I have exam	ined this return, including accompanying so e. Declaration of preparer (other than office					
		****	**			2011-05-09			
Sign		Signa	ture of officer			Date			
dere	• 	Туре	ST K WRENN SECRETARY TREASURE or print name and title	ER .					
		Print/Typ preparer's	JOELLEN LA BORE ORA	Preparer's signature  JOELLEN V POPE CPA	ate	Check if self employed		PTIN	
Paid	}	<u> </u>	me F THE POPE CPA FIRM PA	1		,,	,	Fırm's EIN	<b>)</b>
orep		Fırm's ad	dress F 5108 MONROE RD						(704) 568-
Jse	Only		CHARLOTTE, NC 282058000				7960	(,01) 300-	

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . . . . .

┌Yes ┌No

1 0111	1330 (2010)				raye Z
Par		ement of Program Service and If Schedule Occontains a response			
1	Briefly descr	ibe the organization's mission			
LAB	OR ORGANIZ <i>A</i>	ATION			
2		nization undertake any significant p		hich were not listed on	┌ Yes ┌ No
	If "Yes," desc	ribe these new services on Schedi	ıle O		
3	_	nization cease conducting, or make		lucts, any program	┌ Yes ┌ No
	If "Yes," desc	ribe these changes on Schedule O			
4	Section 501(	exempt purpose achievements for c)(3) and 501(c)(4) organizations oothers, the total expenses, and re	and section 4947(a)(1) trusts are	required to report the an	
	(Code	) (Expenses \$	ıncludıng grants of \$	) (Revenue \$	)
Ta	•	RKERS, SECURE & IMPROVE WAGES, HOU			H ORGANIZATION, NEGOTIATIONS
	& COLLECTIVE	BARGAINING - 2,773 MEMBERS	,		,
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	-				
	Other progr	am services (Describe in Schedul	20)		
4u	(Expenses \$	· ·	g grants of \$	) (Revenue \$	)
			, g. aco or ψ	, (πονοπαο φ	/
4e	i otal progra	ım service expenses►\$			

	Part IV	Checklist	of Rec	uired	Schedule
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		Νo
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2		Νο
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		Νo
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts 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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
	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? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

1 01111	990 (2010)			Page •
Par	t IV Checklist of Required Schedules (continued)			
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		Νo
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		Νο
23	Did the organization answer "Yes" to Part VII, Section A, questions 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		No
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-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) 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		Νο
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		No
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		No
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		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		Νo
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
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		Νo
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		Νο
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		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes Vo			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νο
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	Yes	

Form 990 (	2010)		
Part V	Statements Regarding Ot	her IRS Filings and	l Tax Compliance

(e)	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 9			
)	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this return			
•	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2ь	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
,	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
_	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Νο
•	If "Yes," enter the name of the foreign country ▶			
	See mistractions for ming requirements for Form 1 D F 30-22 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		Νo
,	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
:	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
		5с		
	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?	6a	Yes	
)	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		N c
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
ı	If "Yes," indicate the number of Forms 8282 filed during the year	70		140
:	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
1	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did	· · ·		
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
•	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
1	Initiation fees and capital contributions included on Part VIII, line 12 10a			
•	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
•	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
•	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
•	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
)	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
:	Enter the amount of reserves on hand			
	13c			
1	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
_	If "Vac " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schodule O	146		

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

Check if Schedule O contains a response to any question in this Part VI										. F	7
---	--	--	--	--	--	--	--	--	--	-----	---

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the			
	year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8b		Νο
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο
	<b>ction B. Policies</b> (This Section B requests information about policies not required by the Internal venue Code.)			
	Tonias estasi,		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
		11a		Νο
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		Νο
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
c	to conflicts?	12b		
	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		Νο
14	Does the organization have a written document retention and destruction policy?	14		Νο
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Νο
b	Other officers or key employees of the organization	15b		Νο
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions )			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			
	(3)s only) available for public inspection. Indicate how you make these available. Check all that apply  Own website. Another's website. Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of			

- interest policy, and financial statements available to the public. See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 ERNEST K WRENN 2529 BELTWAY BLVD

CHARLOTTE, NC 28214 (704) 596-2475

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

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

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

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

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

Check this box if neither the organiz	atıon nor any re	lated or	ganı	zatio	nco	mpen	sate	d any current office	r, director, or trust	e e			
(A) Name and Title	(B) A verage hours	Posi	(C) Position (c			<b>(C)</b> Position (check all that apply)					<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Rey employee Officer Institutional Trustee Individual trustee or director		Key employee	Former Highest compensated employee		from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations			
(1) STEVEN T BESS TRUSTEE	60 00			х				92,951	0	30,485			
(2) RUBY M CROSBY TRUSTEE	4 50			х				4,770	0	0			
(3) JOSEPH R EASON JR TRUSTEE	60 00			х				94,737	0	30,485			
(4) TED H RUSSELL PRESIDENT	60 00			х				98,013	0	30,485			
(5) ALEX E SPANGENBERG VICE PRESIDENT	4 50			х				3,673	0	0			
(6) ERNEST K WRENN SEC TREAS	60 00			х				97,229	0	30,485			
(7) HARRY F FERRELL RECORDING SEC	4 50			х				4,021	0	0			

\$100,000 in compensation from the organization 🕨

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	<b>(A)</b> Name and Title	(B) Average hours	I	tion ( that a	(che		П		( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensatior from related		(F) Estima amount o	ated of other
		per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)		compen: from rganizat relat organiza	the ion and ed
											$\perp$		
											+		
											+		
											+		
											$\dagger$		
											_		
.b	Sub-Total		<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>			+		
С	Total from continuation sheet						Þ						
d	Total (add lines 1b and 1c) .							Þ	395,394				121,940
	Total number of individuals (ind \$100,000 in reportable compe	•				ted	above	) who	received more tha	n		_	
												Yes	No
	Did the organization list any <b>fo</b> on line 1a? <i>If</i> "Yes," complete So						mploy •	ee, o	r highest compens	ated employee	3		l No
	For any individual listed on line organization and related organi												
	Did any person listed on line 1	a receive or accri	re comp	• oensa	• ition	• fror	n any	• unrel	ated organization o	r individual for	4		No
	services rendered to the organ	ızatıon? <i>If</i> "Yes,"	complet	e Sch	edul	e J fo	or suct	n pers	son	•	5		No
Se	ction B. Independent Co	ntractors											
	Complete this table for your fiv \$100,000 of compensation fro			ndep	ende	nt c	ontra	ctors	that received more	e than			
	Na	( <b>A)</b> ame and business ad	dress						Descr	(B) iption of services		(C Comper	:) nsation
											$\dashv$		
_											#		

Part \		O10)	10				P	age <b>9</b>
Parts	<b>VIII</b>	Statement of Revenu	16		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	excluded from tax under sections
								512, 513, or 514
Contributions, gifts, grants and other similar amounts	<b>b</b> N	Federated campaigns Membership dues Fundraising events	. 1c					
ontributions, nd other sim	f A s	Government grants (contributions) All other contributions, gifts, grants similar amounts not included above Noncash contributions included in li	nes 1a-1f \$					
	h 1	Fotal. Add lines 1a-1f	· · · · · · · · · · · · · · · · · · ·	Business Code				
Program Service Revenue	2a <u>№</u> b –	MEMBERSHIP DUES FEES & ASSESS	SMENTS	900099	1,608,792			
егисе	c d							
ran S	e _ f A	All other program service re	venue					
Prog	g T	<b>Fotal.</b> Add lines 2a-2f			1,608,792			
	а	investment income (includin and other similar amounts) income from investment of tax-ex			41,719			41,719
	_	Royalties		(II) Personal				
	<b>b</b> L e	Gross Rents Less rental expenses Rental income or (loss)	6,175 6,175					
		Net rental income or (loss)			6,175			6,175
	f a	Gross amount from sales of assets other han inventory	(1) Securities 635,944	(II) O ther 875,000				
	c G	ess cost or other basis and sales expenses Gain or (loss)	-7,979	175,480 699,520				
nne	<b>8a</b> (	Net gain or (loss)  Gross income from fundraisii not including			691,541			691,541
Other Revenue	d	of contributions reported on See Part IV, line 18						
O.	c N 9a G		ctivities See Part IV, line 19 . a					
		less direct expenses Net income or (loss) from ga	ming activities	b				
	r	Gross sales of inventory, les eturns and allowances .	a					
	c N	Less cost of goods sold .  Net income or (loss) from sa  Miscellaneous Revenue	les of inventory 🟲	Business Code	100 856	100,856		
	<b>b</b> 9	REIMBURSEMENTS REFUN SALES ORGANIZATIONAL SUPPLIES		900099	935	935		
	c _	All other revenue	<del></del>					
		Fotal. Add lines 11a-11d			101,791			
	12 Т	<b>Fotal revenue.</b> See Instructi	ons		2,450,018	1,710,583		739,435

Form 990 (2010) Page <b>10</b>							
Part	Section F01(s)(3) and F01(s)(4) organizations mus	t commist = =!! -	- Alumna				
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.  All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).							
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	( <b>A</b> ) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses		
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	3,050					
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	3,350					
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16						
4	Benefits paid to or for members	8,750					
5	Compensation of current officers, directors, trustees, and key employees	509,860					
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$						
7	Other salaries and wages	228,837					
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	60,180					
9	Other employee benefits	55,610					
10	Payroll taxes	50,237					
а	Fees for services (non-employees) Management						
ь	Legal	81,912					
с	Accounting	13,601					
d	Lobbying				_		
e	Professional fundraising services See Part IV, line 17						
f	Investment management fees						
g	Other	15,057					
12	Advertising and promotion						
13	Office expenses	63,219					
14	Information technology	3,409					
15	Royalties						
16	Occupancy	31,777					
17	Travel	39,973					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				-		
19	Conferences, conventions, and meetings	19,814					
20	Interest						
21	Payments to affiliates	395,420					
22	Depreciation, depletion, and amortization	11,711					
23	Insurance						
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)						
а	AUTO EXPENSE	73,240					
ь	INSURANCE	13,086					
c	STEWARD EXPENSES	4,530					
d	ELECTION EXPENSE	15,065					
e	INTEREST	3,338					
f	All other expenses	20,013					
25	Total functional expenses. Add lines 1 through 24f	1,725,039					
26	<b>Joint costs.</b> Check here ▶ ☐ If following						
	SOP 98-2 (ASC 958-720) Complete this line only if the						
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				000 (2010)		

Part X Balance Sheet (B) (A) Beginning of year End of year 52.540 1 36,942 301.040 2 707.014 2 Savings and temporary cash investments . . . . . . . 3 3 9.694 4 4,192 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L . . . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) **A**ssets 6 7 379,167 8 8 Prepaid expenses and deferred charges . . . . 8.355 9 5,026 10a Land, buildings, and equipment cost or other basis Complete 1.417.422 10a Part VI of Schedule D 193.563 ь Less accumulated depreciation . . . . . 10b 403.173 10c 1,223,859 862.783 532.944 11 11 12 12 Investments—other securities See Part IV, line 11 . . . . . . 13 13 Investments—program-related See Part IV, line 11 . . 14 14 28,972 35,481 15 15 16 1,666,557 16 2,924,625 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 80.748 17 212.222 17 Accounts payable and accrued expenses . 18 18 130,987 119.902 19 19 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 399.124 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties . . . . 25 53.088 25 52.280 Other liabilities Complete Part X of Schedule D . . . . . 26 253.738 26 794.613 **Total liabilities.** Add lines 17 through 25 . . . . Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets . . . . 1,186,116 1,210,879 Temporarily restricted net assets . . . . . 226,703 919,133 28 28 Fund 29 29 Permanently restricted net assets . . . . . Organizations that do not follow SFAS 117, check here 🕨 🥅 and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds . . . . . Assets 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 1,412,819 2,130,012 33 Total net assets or fund balances . . . . 33 34 Total liabilities and net assets/fund balances . . . . . 1,666,557 2.924.625 34

I.C.	Check if Schedule O contains a response to any question in this Part XI	•		. [고	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2.4	150,01
2	Total expenses (must equal Part IX, column (A), line 25)	2			725,03
3	Revenue less expenses Subtract line 2 from line 1	3		7	724,97
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,4	112,81
5	Other changes in net assets or fund balances (explain in Schedule O)	5			-7,78
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		2,1	130,01
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			৮	•
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of to audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c		No
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separated basis	ssued			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

DLN: 93493131003131

# OMB No 1545-0047

Inspection

# **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

Political Campaign and Lobbying Activities

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

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities),

- 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) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization Employer identification number

TIN 1	ERNATIONAL BROTHERHOOD OF TEAMS	STERS LOCAL UNION /I		56-0276491	
Par	t I-A Complete if the or	ganization is exempt und	ler section 501(		organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect p	olitical campaign act	ivities in Part IV	
2	Political expenditures			<b>.</b>	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt und	ler section 501(	c)(3).	
1		tax incurred by the organization			\$
2	Enter the amount of any excise	e tax incurred by organization ma	nagers under sectio	n 4955 🕨	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form	4720 for this year?		☐ Yes ☐ No
4a	Was a correction made?				☐ Yes ☐ No
ь	If "Yes," describe in Part IV				
Par		ganization is exempt und	ler section 501(	c) except section 501	.(c)(3).
1	Enter the amount directly expe	ended by the filing organization fo	or section 527 exemp	pt function activities 🕨	\$
2	Enter the amount of the filing o	organization's funds contributed t	o other organizations	s for section 527 ▶	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter h	ere and on Form 112	0-POL, line 17b	\$
4	Did the filing organization file <b>I</b>	Form 1120-POL for this year?			┌ Yes ┌ No
	amount of political contribution separate segregated fund or a	For each organization listed, entens received that were promptly a political action committee (PAC  (b) Address	nd directly delivered	to a separate political orga is needed, provide informat	nızatıon, such as a
	(a) Name	( <b>b</b> ) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
	Danarwark Reduction Act Notice se	no the Instructions for Ferry 200 co	1 000 F7		

Sc	hedule C (Form 990 or 990-EZ) 2010						Page <b>2</b>
P	art II-A Complete if the organization under section 501(h)).	is ex	cempt under	section 501(c	)(3) and fi	led Form 5768	
A B	Check   If the filing organization belongs to a Check   If the filing organization checked bo			" provisions apply	/		
	Limits on Lobbying E (The term "expenditures" means a			)		<b>(a)</b> Filing Organization's Totals	<b>(b)</b> Affiliated Group Totals
<u>1</u> a	Total lobbying expenditures to influence public o	pinion	(grass roots lob	oyıng)			
b	Total lobbying expenditures to influence a legisl	atıve b	ody (direct lobby	ıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1	c and :	Ld)				
f	Lobbying nontaxable amount Enter the amount columns	from th	e following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The	lobbying nontaxa	ble amount is:			
	Not over \$500,000	e 1e					
	Over \$500,000 but not over \$1,000,000	\$100	,000 plus 15% of the	excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175	,000 plus 10% of the	excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225	,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,00	00,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1 f)					
_	Subtract line 1g from line 1a If zero or less, ent	-					
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h d	or line 11, did the	organization file F	orm 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t	secti	on 501(h) ele		havè to co		ne five
	Lobbying Exp	endit	ures During 4	l-Year Averag	jing Period		
	Calendar year (or fiscal year						

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	<b>(d)</b> 2010	<b>(e)</b> Total			
2a	Lobbying non-taxable amount								
b	Lobbying ceiling amount (150% of line 2a, column(e))								
С	Total lobbying expenditures								
d	Grassroots non-taxable amount								
e	Grassroots ceiling amount (150% of line 2d, column (e))								
f	Grassroots lobbying expenditures								

Sch	edule C (Form 990 or 990-EZ) 2010			Р	age <b>3</b>				
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has (election under section 501(h)).	NOT fi	led Fo						
		(a)		(a)		(a)		(b)	
		Yes	No	A mour	nt				
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)?								
c	Media advertisements?								
d	Mailings to members, legislators, or the public?								
e	Publications, or published or broadcast statements?								
f	Grants to other organizations for lobbying purposes?								
g	Direct contact with legislators, their staffs, government officials, or a legislative body?								
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?								
i	Other activities? If "Yes," describe in Part IV								
j	Total lines 1c through 1i								
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?								
b	If "Yes," enter the amount of any tax incurred under section 4912								
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		Γ						
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?								
Pai	t IIII-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c	)(5), o	r sectio	n				
				Yes	No				
1	Were substantially all (90% or more) dues received nondeductible by members?			1 Yes					
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	Νo				
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	No				

Par	t III-B	Complete if the organization is exempt under section $501(c)(4)$ , section $50$	<b>01(c</b> )	(5), or section
		501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part II	I-A,	line 3 is
		answered "Yes".		
1	Dues. ass	sessments and similar amounts from members	1	·

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

### Part IV Supplemental Information

Complete 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 1i Also, complete this part for any additional information

Identifier Return Reference Explanation

DLN: 93493131003131

OMB No 1545-0047

Open to Public Inspection

### **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.

Name of the organization

Employer identification number

	NATIONAL BROTHERHOOD OF TEAMSTERS LOCAL UNION 71			<b>,</b>		
2 5	I Organizations Maintaining Donor A	duised Eunds or Other Simil		0276491	c Complete i	f the
aп	Organizations Maintaining Donor A organization answered "Yes" to Form 9		iar Fullus	or Account	<b>s.</b> Complete i	ı uı
	organization answered res to form 5	(a) Donor advised funds		( <b>b)</b> Funds and	other accounts	
7	otal number at end of year			-		
	ggregate contributions to (during year)					
	ggregate grants from (during year)					
	ggregate value at end of year					
	Old the organization inform all donors and donor adv	usors in writing that the assets held	ın donor advı	IS A d		
	unds are the organization's property, subject to the			Jeu	☐ Yes ☐	No
	Old the organization inform all grantees, donors, and ised only for charitable purposes and not for the beconferring impermissible private benefit				┌ Yes ┌	No
	Conservation Easements. Complete	e if the organization answered "\	es" to Forn	n 990 Part I	V line 7	
] ] ]	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreated Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qua	tion or pleasure)	n of a certifie	d historic stru		
•	easement on the last day of the tax year			Held at the	e End of the Yea	 ar
-	Total number of conservation easements		2a			
-	Total acreage restricted by conservation easement:	s	2b			
ſ	Number of conservation easements on a certified hi	storic structure included in (a)	2c			
ſ	Number of conservation easements included in (c) a	acquired after 8/17/06	2d			
1	Number of conservation easements modified, transfine taxable year 🛌			ne organizatior	n during	
	Number of states where property subject to conserv					
	Does the organization have a written policy regarding inforcement of the conservation easements it holds		n, handling of	violations, an		No
!	Staff and volunteer hours devoted to monitoring, ins	specting and enforcing conservation	easements d	uring the year	<b>-</b>	
,	Amount of expenses incurred in monitoring, inspect	ing, and enforcing conservation ease	ements durin	g the year ► \$		
	Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements	ofsection		┌ Yes ┌	No
-	n Part XIV, describe how the organization reports of palance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's fin				
rt	Organizations Maintaining Collection Complete if the organization answered			her Similar	Assets.	
		<u>"Yes" to Form 9</u> 90, Part IV, line		_		
i	rtne organization elected, as permitted under SFA: art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fi	S 116, not to report in its revenue st d for public exhibition, education or r	esearch in fu			
; ; ;	art, historical treasures, or other similar assets held	S 116, not to report in its revenue st d for public exhibition, education or r inancial statements that describes tl S 116, to report in its revenue stater public exhibition, education, or rese	esearch in fu hese items ment and bala	rtherance of p ance sheet wo	ublic service, rks of art,	
; ] ]	art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fi If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for	S 116, not to report in its revenue st d for public exhibition, education or r inancial statements that describes th S 116, to report in its revenue state public exhibition, education, or rese	esearch in fu hese items ment and bala	rtherance of p ance sheet wo erance of publi	ublic service, rks of art,	
; ] ]	art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fi of the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item	S 116, not to report in its revenue st d for public exhibition, education or r inancial statements that describes th S 116, to report in its revenue state public exhibition, education, or rese	esearch in fu hese items ment and bala	rtherance of p ance sheet wo erance of publi	ublic service, rks of art, c service,	

Revenues included in Form 990, Part VIII, line 1

**b** Assets included in Form 990, Part X

Раг	Control of the Contro	liections of Ar	t, His	stori	<u>cai i</u>	reasu	res, or C	tne	r Similar A	sse	t <b>s</b> (co	<u>ntınued)</u>
3	Using the organization's accession and othe items (check all that apply)	r records, check ar	ny of tl	he fol	lowing	that ar	e a significa	ant u	se of its colle	ction		
а	Public exhibition		d	Γ	Loan	orexcl	hange prog	rams				
b	Scholarly research		e	$\vdash$	O the	r						
С	Preservation for future generations											
4	Provide a description of the organization's co	allections and eval	ain ho	w the	v furth	ar tha c	raanizatior	'c av	emnt nurnos	s in		
4	Part XIV	·					-			= 111		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,					nılar	Г \	es.	□No
Pa	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an an	<b>ements.</b> Compl	ete ıf	the	orgar	nızatıor			es" to Form	•		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						or other ass	ets	not	Γ <b>ν</b>	'es	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follov	ving t	able		_					
									A	mour	nt	
C	Beginning balance							1c				
d	Additions during the year							1d				
е	Distributions during the year							1e				
f	Ending balance							<b>1</b> f				
2a	Did the organization include an amount on Fo	orm 990, Part X, lır	ne 21?	,			_				'es	
b	If "Yes," explain the arrangement in Part XIV	,										
Pa	rt V Endowment Funds. Complete		n ans	swer	ed "Ye	es" to	Form 990,	Par	t IV, line 10			
		(a)Current Year	(b	<b>)</b> Prior	Year	(c)Tw	o Years Back	(d)	Three Years Bacl	(e)	Four Ye	ears Back
1a	Beginning of year balance											
b	Contributions											
c	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held	as			<u> </u>		<u> </u>				
а	Board designated or quasi-endowment											
ь	Permanent endowment 🕨											
С	Term endowment ►											
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	ation	that	are hel	ld and a	dmınıstere	d for	the	F	Yes	No
	(i) unrelated organizations								3	a(i)		
	(ii) related organizations			•						a(ii)		
Ь	If "Yes" to 3a(II), are the related organization									3ь		
4	Describe in Part XIV the intended uses of th	e organızatıon's en	dowm	ent fu	ınds				<u></u>			
Pai	rt VI Investments—Land, Buildings	s, and Equipme	nt. S	ee F	orm (	990, Pa	art X, line	10.				
	Description of investment					or other stment)	( <b>b)</b> Cost or o		(c) Accumulat depreciation		<b>(d)</b> Bo	ok value
1a	Land						181	L,437		$\neg$		181,437
ь	Buildings											
	Leasehold improvements									$\dashv$		
	Equipment						219	9,838	193,	563		26,275
	Other							5,147	·	+		1,016,147
	al. Add lines 1a-1e (Column (d) should equal Fo		mn (B	), line	10(c)	)	<u> </u>	<u> </u>	1	$\dashv$		1,223,859
	The state of the s	zzzy raze zy coru	( )	,,		, · ·	· · ·	•	Schedule	D/F		

Part VII Investments—Other Securities. See  (a) Description of security or category		2. (c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)  Part VIIII Investments—Program Related. See		13
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )		
Part IX Other Assets. See Form 990, Part X, In		
(a) Descrip		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)	
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
PER CAPITA PAYABLE	33,852	
CAPITAL LEASE PAYABLE	18,428	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 )	52,280	

-01	text Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	1115	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,450,018
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,725,039
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	724,979
4	Net unrealized gains (losses) on investments	4	-7,786
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 - 8	9	-7,786
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	717,193
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		,
1	Total revenue, gains, and other support per audited financial statements	1	2,450,018
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines <b>2a</b> through <b>2d</b>	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	2,450,018
4	A mounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
С	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12 )	5	2,450,018
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	<b> </b>	1,732,825
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
- а	Donated services and use of facilities		
ь	Prior year adjustments	1	
С	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines <b>2a</b> through <b>2d</b>	2e	7,786
3	Subtract line <b>2e</b> from line <b>1</b>	3	1,725,039
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
ь	Other (Describe in Part XIV) 4b	1	
с	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	1,725,039
Pai	t XIV Supplemental Information		
<u></u>	and the same to any old the decountions are used for Doub II, land 2, E, and 0, Doub III, land 1, and 4, D	+ I\/	lines thend th

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier Return Reference | Explanation

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493131003131

OMB No 1545-0047

2010

Open to Public Inspection

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Name of the organization INTERNATIONAL BROTHERHOOD OF TEAMSTERS LOCAL UNION 71 Employer identification number

56-0276491

ldentifier	Return Reference	Explanation
Pt VI-A, Line 6		THE LOCAL HAD 2,773 DUES PAYING MEMBERS AT 12/31/10, CONSISTING

ldentifier	Return Reference	Explanation
	OF ACTIVE MEMBERS, OFFICERS, EXECUTIVE BOARD, AND STEWARDS	

ldentifier	Return Reference	Explanation
Pt VI-A, Line 7a		ALL OF THE DUES PAYING MEMBERS MAY ELECT ONE OR MORE

ldentifier	Return Reference	Explanation
		MEMBERS OF THE GOVERNING BODY

ldentifier	Return Reference	Explanation
Pt VI-A, Line 7b		MEMBERS APPROVE MAJOR PROPERTY AND ASSET PURCHASES

ldentifier	Return Reference	Explanation
		& SALES

ldentifier	Return Reference	Explanation
Pt VI-A, Line 8a		WRITTEN MINUTES OF EXECUTIVE BOARD MEETINGS ARE MAINTAINED

ldentifier	Return Reference	Explanation
		AND ARE PRESENTED TO THE MEMBERSHIP AT REGULARLLY

ldentifier	Return Reference	Explanation
		SCHEDULED MEMBERSHIP MEETINGS

ldentifier	Return Reference	Explanation
Pt VI-A, Line 8b		NONE OF THE LOCAL STANDING COMMITTES MET DURING 2010

Identifier	Return Reference	Explanation
		SO THERE WAS NO NEED TO RECORD COMMITTE MEETINGS

ldentifier	Return Reference	Explanation
		DURING 2010

ldentifier	Return Reference	Explanation
Pt VI-B, Line 11a		FORM 990 IS PREPARED BY THE LOCAL'S AUDITOR & IS

Identifier	Return Reference	Explanation
		SUBMITTED TO THE LOCAL'S SECRETARY-TREASURER FOR

ldentifier	Return Reference	Explanation
		REVIEW & FILING

ldentifier	Return Reference	Explanation
Pt VI-C, Line 19		MADE AVAILABLE UPON REQUEST

ldentifier	Return Reference	Explanation
Pt XII, Line 2c		THE EXECUTIVE BOARD CHOOSES THE AUDITOR AND THE AUDIT

ldentifier	Return Reference	Explanation
		REPORT IS RECEIVED AND REVIEWED BY THE PRESIDENT

ldentifier	Return Reference	Explanation
		AND SECRETARY TREASURER

ldentifier	Return Reference	Explanation
Pt XI		LINE 5 - OTHER CHANGES IN NET ASSETS - DECREASE IN

	ldentifier	Return Reference	Explanation
I			THE AMOUNT OF \$ 7,786 FROM DECREASE IN MARKET VALUE

ldentifier	Return Reference	Explanation
		OF SECURITIES

ldentifier	Return Reference	Explanation
Form 990, Part IX, Line 24f		STATE WITHHOLDING PENALTY PAYROLL EXPENSE EDUCATION & PUBLICITY STEWAED EXPENSE OVERPAYMENT ON CHECKOFF INTEREST - CAPITAL LEASE DISCHARGE/ GRIEVANCE LESS ALLOCATED TO RENTAL ORGANIZING