

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



SCANNED DEC 0 9 2015

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

► Do not enter social security numbers on this form as it may be made public Information about Form 990 and its instructions is at www.irs.gov/form990.

<u>A</u>	For the 2	014 calend	dar year, or tax year beginning , 2014, and ending	ng			,	
В	Check if app	licable	C		D Employ	er identi	fication number	
	Address	s change	INTERNATIONAL BROTHERHOOD OF TEAMSTERS		13-	56038	397	
	Name o	hange	LOCAL 813	1	E Teleph			
	Initial re	eturn	45-18 COURT SQUARE, 6TH FLOOR	i	(71	8) 93	37-7010	
	Final retu	rn/terminated	LONG ISLAND CITY, NY 11101	t		<u> </u>		
	Н	ed return		1	G Gross	eceints S	1,640,9	30
	\vdash	ition pending	F Name and address of principal officer SEAN CAMPBELL	H(a) Is this a				X No
		nton pending	Same As C Above	H(b) Are all	_		— — ····	No
$\overline{}$	Tax-exem	int status	501(c)(3) X 501(c) (5) (insert no) 4947(a)(1) or 527	If 'No,' a	attach a list	(see inst	ructions)	
÷	Website	 -		H(c) Group e	vemption n	umbor 🛌	0320	
K		rganization	Corporation Trust Association X Other UNION L Year of format				egal domicile NY	
-		Summar		1931	Lin :	state of le	egal domiche IVI	
il a C	1 Brie	efly descri	y be the organization's mission or most significant activities. $ t DUES$, $ t IN$	TTT 7 TTT	ONC EE	EC	ACCECCMENTE	
	וו או	וא אל סידי רוו	SFER_CARDS ARE COLLECTED FROM APPROXIMATELY 2,	7 7 7 7 7	TON WI	ED L	ROSESSMENTS	~-
ည			OTE THE INTERESTS OF LABOR IN CONNECTION WITH			FINDERE	2 10 TVOIE	<u>-</u> −
īa,	7,77	D LION	OIL THE INTERCEPTS OF PROOF IN COMMENTAL	_rrar nor	MELLI .			
Governance	2 Che	eck this bo	if the organization discontinued its operations or disposed of mo	ore than 25	5% of its	net ass	 sets.	
	3 Nur		ting members of the governing body (Part VI, line 1a)	.,		3		7
ං ජ ග	4 Nur	mber of in	dependent voting members of the governing body (Part VI, line 1b)			4		0_
ë	5 Tot		of individuals employed in calendar year 2014 (Part V, line 2a)			5		21
Activities &	6 Tot		of volunteers (estimate if necessary)	• •		6		0
¥			ed business revenue from Part VIII, column (C), line 12	•	٠	7a		<u>0.</u>
	b Net	unrelated	business taxable income from Form 990-T-line-34			7b		<u>0.</u>
	0 00-		INCEIVED	Pı	rior Year		Current Year	<u></u>
ē	1		and grants (Part VIII, line 1h) rice revenue (Part VIII, line 2g) ricome (Part VIII, column (A), lines 3,4, and 7d) V 1 8 2015	-	600	- 20 +	1 (40 4	<u> </u>
Ē	9 Pro	gram serv estment in	come (Part VIII, line 2g)	<u> </u>	,699,6 1,1		1,648,4	105.
Revenue	11 Oth	esillelli il	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			286.	-8,4	
			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) - add lines 8 through 11 (must equal Part MIL, continue (A), tine 12)	ļ <u>1</u>	,704,0		1,640,9	
			milar amounts paid (Part IX, column (A), lines 1-3)	- 	17,5			250.
			to or for members (Part IX, column (A), line 4)	ļ		,,,,	1,2	.50.
	1		er compensation, employee benefits (Part IX, column (A), lines 5-10)		694	770	681,3	262
es			fundraising fees (Part IX, column (A), line 11e)	}	694,778.		001,3	102.
Expenses	į.						Sec. 1	-95.6
ង្គ	1		sing expenses (Part IX, column (D), line 25)					
_	4		es (Part IX, column (A), lines 11a-11d, 11f-24e)		909,1		957,8	
		="	es Add lines 13-17 (must equal Part IX, column (A), line 25).	1	,621,4		1,646,4	
8 8		venue less	expenses Subtract line 18 from line 12		82,6		-5,5	
Balance	20 Tot	ماممما	(Dort V. Long 16)	Beginnin	g of Currer		End of Year	
			(Part X, line 16). s (Part X, line 26)		573,3		567,8	
Fet /				ļ		0.		0.
	22 1460		fund balances. Subtract line 21 from line 20	<u>.</u>	573,3	3/8.	567,8	172.
		Signatur						
Com	er penalties o plete Decl <i>ari</i>	of perjury, I de ation of prepa	eclare that I have examined this return, including accompanying schedules and statements, and to irer (other than officer) is based on all information of which preparer has any knowledge	the best of my	y knowledge	and belie	ef, it is true, correct, ar	br
		I R	and Boness		11/12	110		
Sic	n	Signatu	re of officer	Da	te	-11-2		
Sig He	re	RAIT	L BORRERO	Vice	Presi	dent		
			print name and title.	7100	11001	<u>acric</u>		
_		Print/Type p	oreparer's name Date		Check	ıf	PTIN	
Pa	id	MICHAE	EL STECKLER HICHARUSTEKLER 11/12	/15	self-employ	ed :	P00777647	
	eparer	Firm's name						
	e Only	Firm's addri			Firm's EIN	1 3-	-2665700	
	_		NEW YORK, NY 10018-7606		Phone no	(212		
Ma	y the IRS	discuss th	is return with the preparer shown above? (see instructions)	<u></u>				No
			<u> </u>	EA0113L 05/2	28/14		Form 990 (2014)

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

	INTERNATIONAL BROTH		13~560)3897 Page 2
	ment of Program Service	•		
		ise or note to any line in this Part III		
 Briefly describ 	be the organization's mission:			
DUES, IN	ITIATIONS FEES, ASSE	SSMENTS AND TRANSFER CAR	DS ARE COLLECTED FRO)M
APPROXIM	ATELY 2,182 UNION ME	MBERS TO PROTECT AND PRO	MOTE THE INTERESTS C	F LABOR IN
CONNECTI	ON WITH EMPLOYMENT.			
2 Did the organiz	zation undertake any significant pr	ogram services during the year which wer	e not listed on the prior	
Form 990 or 9	990-EZ?			Yes X No
If 'Yes,' descr	ribe these new services on Sche	dule O		<u> </u>
3 Did the organ	iization cease conducting, or ma	ke significant changes in how it condu	cts, any program services?	Yes X No
If 'Yes,' descr	ribe these changes on Schedule	0.		
4 Describe the Section 501 (c	organization's program service a c)(3) and 501(c)(4) organizations	accomplishments for each of its three large required to report the amount of g	argest program services, as meagrants and allocations to others,	asured by expenses the total expenses,
and revenue,	if any, for each program service	reported		
A = (Cada) (Funnance 6 1 C)	C 426 maluding grants of \$	7,250.)(Revenue \$	
4a (Code		6,436. including grants of \$		
		SSMENTS AND TRANSFER CAR		
		MBERS TO PROTECT AND PRO	MOTE THE INTERESTS C	TABOK IN
CONNECTI	ON WITH EMPLOYMENT.			
4 b (Code) (Expenses \$	including grants of \$) (Revenue \$)
				 -
4 c (Code) (Expenses \$	including grants of \$) (Revenue \$)
				
4d Other program	m services (Describe in Schedul	90)		
(Expenses		e O) Iding grants of \$) (Revenue \$)
		1,646,436.	, ,	
AA		TEEA0102L 05/28/14		Form 990 (2014)

4. 3.			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete		103	X
2	Schedule A Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		<u>X</u>
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, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		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		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8	_	Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	****	X
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, line 10° If 'Yes,' complete Schedule D, Part VI	11 a	_x	
	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	11 b		X
	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	11 c		X
	I 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	11 d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	_	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 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	Х	
	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	_X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		X
-	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		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
	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		X
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		_X
t	olf 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b	<u> </u>	

_	m 990 (2014) INTERNATIONAL BROTHERHOOD OF TEAMSTERS	13-5603897	F	'age 4
Pa	成以(人) Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization of domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	or 21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals o column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	on Part IX,		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's c and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	current 23	Х	
	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 at the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d complete Schedule K. If 'No, 'go to line 25a.	s of and 24 a		Х
	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 defe any tax-exempt bonds?	ease 24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess bene transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	fit 25 a		
	b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' compli- Schedule L, Part I	r, and lete 25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current of former officers, directors, trustees, key employees, highest compensated employees, or disqualified person of the schedule L, Part II	or ons?		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family mem of any of these persons? If 'Yes,' complete Schedule L, Part III	ber 27	54°F 36.	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)		14	
	a 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		Х
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was 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		X
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N	N, Part I 31		_ <u> </u>
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33 33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, I and Part V, line 1	34		X
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	ļ <u>.</u> .	X
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a contentity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	ntrolled 35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable relations are supported in the complete organization? If 'Yes,' complete Schedule R, Part V, line 2	ated 36		

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 **Note.** All Form 990 filers are required to complete Schedule O BAA

38

Х

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

Form 990 (2014) INTERNATIONAL BROTHERHOOD OF TEAMSTERS Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V

					Yes	No
	1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 a 1	۱3F.	ㅋ	- * · · · ·	Fred?
	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	<u></u>	.	7 4 -	-
		Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	7	2	٠, .	
		(gambling) winnings to prize winners?		1 c	X	Ĺ
	2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-			. J.	
			21	[-,	
		If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	-	2 b	X	<u> </u>
		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			الله م	-,
		Did the organization have unrelated business gross income of \$1,000 or more during the year?		3 a		<u>X</u>
	Ь	If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	<u> </u>	3Ь		
		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		<u>x</u>
		If 'Yes,' enter the name of the foreign country	<u> </u>	;		ا اجرا · ا
		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			·	
		Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u> </u>	5 a		X
		Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u> </u>	5 b		X
	С	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5c		<u> </u>
	6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	L	6a		Х
		If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6 b		
	7	Organizations that may receive deductible contributions under section 170(c).	Ţ.,		21 A	4:
	а	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?	عقد ا	1	<u>'``</u> .'.'	لحنا
	b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b		
		Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7 c		
	d	If 'Yes,' indicate the number of Forms 8282 filed during the year 7d	7		<u>.::</u>	·
	е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7 e		
	f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7 f		
	g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7 g		
		If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7 h		
		Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	-	8	ar - ben	
	9	Sponsoring organizations maintaining donor advised funds.			a-ra	
	а	Did the sponsoring organization make any taxable distributions under section 4966?		9 a		
	b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9 b		
	10	Section 501(c)(7) organizations. Enter		.]	* 3	-
		Initiation fees and capital contributions included on Part VIII, line 12		.	4 ,4	
	b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		,	·	1
		Section 501(c)(12) organizations. Enter:	'-	-		
	_	Gross income from members or shareholders		1	4	
		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?	[1	12 a		<u> </u>
		If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	_	٠,	• .	
		Section 501(c)(29) qualified nonprofit health insurance issuers.	_		I. v.	
		Is the organization licensed to issue qualified health plans in more than one state?	1	13 a		ļ
		Note. See the instructions for additional information the organization must report on Schedule O),4	6 . j	7. A. T.	5 , 7 ,
	b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	1,4			18 7 to 1
		Enter the amount of reserves on hand	─ '_'		2	en Para
	_	Did the organization receive any payments for indoor tanning services during the tax year?	-	14 a		X
		olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	-	14 b		
E	BAA	TEEA0105L 05/28/14			990	(2014)

Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to līne 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members 1 a of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents 4 since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? See Schedule O 6 X Did the organization have members or stockholders? 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х members of the governing body? See Schedule O 7 a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, See Sch O X 7 b stockholders, or persons other than the governing body? 1 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X 8 a a The governing body? X 8 b **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a X 10 a Did the organization have local chapters, branches, or affiliates? b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b X 11 a 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule 0 12a 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 120 Schedule O how this was done 13 13 Did the organization have a written whistleblower policy? 14 14 Did the organization have a written document retention and destruction policy? 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? 15 a a The organization's CEO, Executive Director, or top management official 15_b $\overline{\mathbf{X}}$ b Other officers or key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions) 16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х 16 a taxable entity during the year? b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16_b organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Other (explain in Schedule O) Own website Another's website X Upon request Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records LONG ISLAND CITY NY 11101-4347 (718) 937-7010 PRESIDENT 45-18 COURT SQUARE, 6TH FLOOR

BAA

Form 990 (2014)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee										
(A)		(B) Position (do not check more than one box, unless person				eck mo	re	(D)	(E)	(F)
Name and Title	Average hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)			i	Reportable compensation from	Reportable compensation from	Estimated amount of other compensation		
	per week (list any hours for related organiza- tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099 MISC)	from the organization and related organizations
(1) RICHARD LAECCA	11									
Trustee	0		Ш			<u> </u>		2,200.	0.	0.
(2) DANIEL WRIGHT	1_	.,						2 200	0.	0
REC. SECRETARY (3) JOHN SHEHA	40	Х	Н			├─┤		3,300.	<u> </u>	0.
Trustee	1-40-	X				1		33,500.	0.	14,223.
(4) JOHN ZUILKOWSKI	1	7.								
SEC. TREASURER	0	_x						3,300.	0.	0.
(5) RAUL BARRERO	40									
Vice President	0	ļ		X		11		69,900.	0.	28,356.
(6) SEAN CAMPBELL	<u>40</u>	•		v				121 210	0.	28,356.
President (7) RAYMOND WOODS	0 1	-	-	Х		┼─┤		131,310.	U .	20,330.
Trustee	 	•		Х				4,210.	0.	0.
(8)								1/210.		
(9)		-								
(10)										
(11)										
(12)		-			-		_			
(13)		-								
(14)	 	 							 	

TEEA0107L 02/27/14

c Total from continuation sheets to Part VII, Section A 0. 0. 0. 70,935. 247,720. d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

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

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of

 compensation from the organization. Report compensation for the calendar year ending v	with or within the organizations tax	year.
 (A) Name and business address	(B) Description of services	(C) Compensation

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

0.

Form 990 (2014)

Par	VIII Statement of Revenue				
-	Check if Schedule O contains a response or note to a	ny line in this Part V (A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax
}			function revenue	revenue	under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns 1 a		j	÷	.
ran	b Membership dues 1 b				-
s, G	c Fundraising events 1 c			,	
Gift Iar /	d Related organizations 1 d				,
ns.	e Government grants (contributions) 1 e	-, .		•	
rtio er S	f All other contributions, gifts, grants, and similar amounts not included above				
trib Oth	g Noncash contributions included in lines 1a-1f \$	-	· .	, , , , , , , , , , , , , , , , , , ,	
Som	h Total. Add lines 1a-1f	>			1
	Business Code	4.,			
<u>~</u>	2a DUES AND ASSESSMENTS 562000	1,518,350.	1,518,350.		
e Re	b INITIATION FEES 562000	129,918.	129,918.		
Σįς	c <u>WITHDRAWAL AND TRANSFERS</u> 562000	137.	137.		
3	d				
Program Service Revenue	f All other program service revenue				
P. Š	g Total. Add lines 2a-2f	1,648,405.	, , ,	12	
	3 Investment income (including dividends, interest and other similar amounts).				0.45
		945.			945.
	4 Income from investment of tax-exempt bond proceeds.5 Royalties	•			
	5 Royalties (i) Real (ii) Personal	1.5			
	6 a Gross rents				
	b Less. rental expenses		and the second	3 - 1 - 1 (1) n	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	c Rental income or (loss)		ثست للساسسات		
	d Net rental income or (loss)	<u> </u>		3.7.	37,
	7 a Gross amount from sales of assets other than inventory		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 to	
	b Less cost or other basis				
	and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)				
Ę	8 a Gross income from fundraising events			,	
Other Revenue	(not including \$ of contributions reported on line 1c)		, , , , ,		,
Re	See Part IV, line 18				
Ē	b Less [,] direct expenses b				
ᅙ	c Net income or (loss) from fundraising events.	•			
	9a Gross income from gaming activities See Part IV, line 19 a				,
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities		 	 	
	10 a Gross sales of inventory, less returns and allowances a				
	b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code				
	11a LEGAL SETTLEMENT	3,181.	3,181.		
	b SALE OF SUPPLIES	736.	736.		
	c SUBPOENA FEES	15.	. 15.	 	
	d All other revenue WKS	-12,352		ļ	1 1 6
	e Total. Add lines 11a-11d	<u>−8,420</u>		0.	
	12 Total revenue. See instructions	1,640,930	. 1,639,985.	<u> </u>	343.

Pärt IX Statement of Functional Expenses

Seci	tion 501(c)(3) and 501(c)(4) organizations must cor	nplete all columns. All ot	her organizations must c	omplete column (A).	
	Check if Schedule O contains a				
Do 1 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments			J. G. 1971.	
	See Part IV, line 21	7,250.		1000	
2	Grants and other assistance to domestic	.,,250.		3-1 4	***
_	individuals See Part IV, line 22			1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	San St. Tales of the
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members			^ - ;	, , , , , , , , , , , , , , , , , , , ,
5	Compensation of current officers, directors, trustees, and key employees	247,720.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.:			
7	Other salaries and wages	248,635.			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	58,076.			
9	Other employee benefits	86,640.			
10	Payroll taxes	40,291.			
11	Fees for services (non-employees).	10/2521			
	Management	:			
ь	Legal	112,132.			
c	: Accounting	31,946.			
d	Lobbying	32/310.			
е	Professional fundraising services See Part IV, line 17		La Mariantes principalità	人好 超 经净钱	
f	Investment management fees				
_	Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) Advertising and promotion	56,026.			
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	113,589.			
17	Travel	88,042.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0070121			
19	Conferences, conventions, and meetings	7,747.			
20	Interest	109.			
21	Payments to affiliates	431,245.			
22	Depreciation, depletion, and amortization	2,747.			
23	Insurance	16,735.			
24	Other expenses, Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e.				1,4
	expenses on Schedule O)	, ,	<u> </u>		* *
a	REIMB. PAYROL, BENFEFITS & TAX	21,404.			
t;	Postage and Shipping	18,735.			
C		11,538.			
d	1000000	10,822.			
	All other expenses	35,007.			
25	Total functional expenses Add lines 1 through 24e	1,646,436.			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 999 (2014) INTERNATIONAL BROTHERHOOD OF TEAMSTERS 13-5603897 Page 11 Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X **(B)** End of year (A) Beginning of year Cash - non-interest-bearing 365,462 1 362,105 2 2 Savings and temporary cash investments Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 7 Notes and loans receivable, net Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 309,085 b Less, accumulated depreciation 10b 183 308 649 10 c

_	1,42 300,103.	0,040.		, , , , , ,
11	Investments – publicly traded securities	188,324.	11	188,922
12	Investments - other securities See Part IV, line 11		12	
13	Investments - program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11	15,943.	15	15,943
16	Total assets. Add lines 1 through 15 (must equal line 34)	573,378.	16	567,872
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	A STATE
23			23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third parties,		25	

X and complete

or Fund Balances 27 Unrestricted net assets 573,378 27 Temporarily restricted net assets 28 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34.

Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 573,378

Total liabilities and net assets/fund balances 34 BAA

Total liabilities. Add lines 17 through 25

lines 27 through 29, and lines 33 and 34.

Organizations that follow SFAS 117 (ASC 958), check here >

Liabilities

26

30

31

32

33

Net Assets

Form 990 (2014)

567,872.

567,872.

567,87

0 26

34

573,378

		<u> 13-56038</u>	<u>97</u>	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				\Box
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,6	40,9	30.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,6	46,4	136.
3	Revenue less expenses Subtract line 2 from line 1	3		-5,5	06.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5	73,3	<u> 378.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities .	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	5	67,8	372.
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		_ []		£ 1
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			· ·	;
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reseparate basis, consolidated basis, or both. Separate basis Consolidated basis Both consolidated and separate basis	viewed on a	t	, r \ 	- ",
Ŀ	Were the organization's financial statements audited by an independent accountant?		2ь	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a so basis, consolidated basis, or both. X Separate basis Consolidated basis Both consolidated and separate basis	eparate	, ,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7 E
c	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit,	2 c		Х
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				14
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin Audit Act and OMB Circular A-133?	gle	3 a		Х
t ——	olf 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits	d audit	3 b		
BAA			Form	990 ((2014)

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

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and it instructions is at www.irs.gov/form990.

If the organization answered	l 'Yes,' to Form 9	90, Part IV, line 3, or	r Form 990-EZ, Par	rt V, line 46 (Political	Campaign Activities), then
------------------------------	--------------------	-------------------------	--------------------	--------------------------	----------------------------

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

If the organization answered 'Yes,' 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) (see instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see instructions), then

• 5	Section 501(c)(4), (5), or (6) or	rganizations Complete Part III			
Name	of organization			Employer identifica	ation number
IN.	<u> </u>	HOOD OF TEAMSTERS		13-560389	
	ED 3-4-214-	ganization is exempt under section			zation.
	· ·	organization's direct and indirect political c	ampaign activities in		
	Political expenditures			► \$	
	Volunteer hours			<u> </u>	
-	~ C12 . 3-4	ganization is exempt under section			
	<u> </u>	ise tax incurred by the organization under		▶ \$	
		ise tax incurred by organization managers		▶\$	
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year?		∐ Yes ∐ No
4 8	a Was a correction made?				Yes No
ŀ	b If 'Yes,' describe in Part IV				
. 4.7	CTP TWO TORKS AND TO THE TORKS AND THE TORKS	rganization is exempt under section	• • •		
1	Enter the amount directly exp	pended by the filing organization for section	n 527 exempt functio	n activities > \$	
2	Enter the amount of the filing of function activities	organization's funds contributed to other organ	izations for section 527	7 exempt ►\$	
3	Total exempt function expendine 17b	ditures Add lines 1 and 2 Enter here and	on Form 1120-POL,	► \$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes X No
5	organization made payments amount of political contribution	and employer identification number (EIN) s. For each organization listed, enter the ar s received that were promptly and directly del il action committee (PAC) If additional spa	mount paid from the fivered to a separate po	filing organization's fund olitical organization, such	ds Also enter the as a separate
	(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 of none, enter -0-
(1)		72-0 6TH AVENUE LYNDHURST, NJ 07071		500.	
(2)					
(3)	•				
(4)					
(5)	· · · · · · · · · · · · · · · · · · ·				
(6)					

	the organization	L BROTHERHOOD OF is exempt under se		13-560 I filed Form 5768 (6	
	ng organization belongs	to an affiliated group (and		ated group member's nan	ne,
		ed box A and 'limited co	•		
(The term	Limits on Lobbyin 'expenditures' mean	ng Expenditures s amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendit	•	• •			
b Total lobbying expendit		, ,	oying)		
c Total lobbying expendit	•	d (b)			
 d Other exempt purpose e e Total exempt purpose e 	•	s 1c and 1d)			
		•	· t		
f Lobbying nontaxable an both columns	nount Enter the amou	ant from the following tal	ole in		
If the amount on line 1e, col	lumn (a) or (b) is	he lobbying nontaxable	amount is		· · · · · · · · · · · · · · · · · · ·
Not over \$500,000		0% of the amount on line 1e		14 小脚 ()	
Over \$500,000 but not over \$1	,000,000 \$	100,000 plus 15% of the excess	over \$500,000	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Over \$1,000,000 but not over \$	\$1,500,000 \$	175,000 plus 10% of the excess	over \$1,000,000		The same of the sa
Over \$1,500,000 but not over \$	\$17,000,000 \$2	225,000 plus 5% of the excess (over \$1,500,000	land to the	
Over \$17,000,000		1,000,000		第二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十	4、持续探导的1960
g Grassroots nontaxable	•	· · · · · · · · · · · · · · · · · · ·			
h Subtract line 1g from li					
i Subtract line 1f from lin	•				<u> </u>
j If there is an amount othe section 4911 tax for this	er than zero on either lii s year?	ne 1h or line 1i, did the org	ganization file Form 4720	reporting	Yes No
(Som	ne organizations that	Year Averaging Period I made a section 501(h) el below. See the instructi	lection do not have to		
	Lobbyi	ng Expenditures During	4-Year Averaging Per	iod	
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))		,			
f Grassroots lobbying expenditures					000 000 F7\ 001
BAA				Schedule C (Fo	rm 990 or 990-EZ) 2014

(election under section 501(h)).		a)		b)	
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No		ount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of. a Volunteers?			1972 Jan	, -	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?					,
f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	- No - Mark				
b If 'Yes,' enter the amount of any tax incurred under section 4912 c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	. Or		2 1 Spe 7	٠.,
section 501(c)(6).					, <u> </u>
1 Warra and sharehally all (000) an array disast and all shall be array as and			Г-	Yes	No
Were substantially all (90% or more) dues received nondeductible by members?Did the organization make only in-house lobbying expenditures of \$2,000 or less?			1 2	Х	X
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		•	3		X
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) answered 'Yes.'	(c)(5) Part I	, or s III-A,	ection 50 line 3, is)1(c)	
1 Dues, assessments and similar amounts from members	_	1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a Current year		2 a			
b Carryover from last year		2 b			
c Total		2 c			
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?					0
5 Taxable amount of lobbying and political expenditures (see instructions).		5			0
Part IV Supplemental Information					
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.	ıp list);	Part	II-A, lines	and	

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

INTERNATIONAL BROTHERHOOD OF TEAMSTERS

	LOCAL 813		13-5603897
Par	TI Organizations Maintaining Dono	or Advised Funds or Other Similar Funds or Other Similar Funds wered 'Yes' to Form 990, Part IV, line	unds or Accounts.
	Complete if the organization ans	, — . —	
1	Total number at end of year	(a) Donor advised funds	(b) Funds and other accounts
_	Aggregate value of contributions to (during year)		
2 3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
_	,		
5	Did the organization inform all donors and doi are the organization's property, subject to the	organization's exclusive legal control?	∐Yes ∐ No
_ 6 _	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writing that grant fu of the donor or donor advisor, or for any oth	inds can be used only er purpose conferring Yes No
Par	Conservation Easements.		_
		wered 'Yes' to Form 990, Part IV, line	e 7.
1	Purpose(s) of conservation easements held by		
	Preservation of land for public use (e g , r	· L	of a historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization last day of the tax year	neld a qualified conservation contribution in the fo	orm of a conservation easement on the
	Total number of concernation accoments		2a
	a Total number of conservation easements o Total acreage restricted by conservation ease	monte	2b
	Number of conservation easements on a certi		2c
		• •	
	Number of conservation easements included in structure listed in the National Register		[2d]
3	Number of conservation easements modified, trar tax year ►	isterred, released, extinguished, or terminated by	the organization during the
4	Number of states where property subject to conse		
5	Does the organization have a written policy re		nandling of violations,
6	and enforcement of the conservation easemer Staff and volunteer hours devoted to monitoring,		
•	Stan and volunteer riburs devoted to morntoring,	rispecting, and emorcing conservation easement	s during the year
7	Amount of expenses incurred in monitoring, insper	ecting, and enforcing conservation easements dur	ring the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(II)?	n line 2(d) above satisfy the requirements of s	section 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote		
Pai	conservation easements till: Organizations Maintaining Colle Complete if the organization ans	ctions of Art, Historical Treasures, o	or Other Similar Assets.
			
1 8	a If the organization elected, as permitted unde art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its final	eld for public exhibition, education, or research in	renue statement and balance sneet works of furtherance of public service, provide,
ı	of the organization elected, as permitted unde historical treasures, or other similar assets held following amounts relating to these items	r SFAS 116 (ASC 958), to report in its revenuor public exhibition, education, or research in furt	e statement and balance sheet works of art, herance of public service, provide the
	(i) Revenue included in Form 990, Part VIII,	line 1	▶ \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art, hamounts required to be reported under SFAS	nistorical treasures, or other similar assets for final 116 (ASC 958) relating to these items	ancial gain, provide the following
í	a Revenue included in Form 990, Part VIII, line		▶\$
1	Assets included in Form 990 Part X		►\$

Schedule, D (Form 990) 2014 INTER Part III Organizations Maintai				13-560	
					
 Using the organization's acquisition, items (check all that apply) Public exhibition 	accession, and ou	 -	or exchange programs	ire a signilicant use of its o	conection
b Scholarly research		e Othe	•		
c Preservation for future genera	ations				
4 Provide a description of the organiza Part XIII	ation's collections a	ind explain how the	y further the organization	's exempt purpose in	
5 During the year, did the organizat to be sold to raise funds rather th	ion solicit or rece	ive donations of a	rt, historical treasures,	or other similar assets	Yes No
Part IV Escrow and Custodial					
line 9, or reported an a	amount on For	m 990, Part X,	line 21.	15176764 166 167 67	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
1a Is the organization an agent, trus on Form 990, Part X?	tee, custodian, or	other intermediar	y for contributions or ot	her assets not included	Yes No
b If 'Yes,' explain the arrangement					
					Amount
c Beginning balance				1 c	
d Additions during the year				1 d	
e Distributions during the year				1 e	
f Ending balance2a Did the organization include an ai	mount on Form 99	n Part X line 21	for escrow or custodia		Yes No
b If 'Yes,' explain the arrangement					→ '*° H'''
or roo, orpian the analygement		THE THE THE			لسما
Pärt V Endowment Funds. Co	omplete if the	organization a	nswered 'Yes' to Fo	orm 990, Part IV, Iin	e 10.
	(a) Current year	(b) Prior year	ar (c) Two years bac	k (d) Three years back	(e) Four years back
1 a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance 2 Provide the estimated percentage	of the current we	or and balance (le	no la column (a)) hold	25	<u> </u>
a Board designated or quasi-endowme	-	ar end balance (ii	ne rg, column (a)) nelo	as	
b Permanent endowment					
c Temporarily restricted endowmen	<u> </u>	%			
The percentages in lines 2a, 2b, a		al 100%			
3 a Are there endowment funds not in the			are held and administered	d for the	
organization by	ie possession or thi	s organization that	are neid and administered	a for the	Yes No
(i) unrelated organizations					3a(i)
(ii) related organizations	•				3a(ii)
b If 'Yes' to 3a(II), are the related o	-	<u>-</u> "			3b
4 Describe in Part XIII the intended		ization's endowm	ent funds	·	
Part VI Land, Buildings, and E		-l IVl +	000 David IV/ Ivra	11- 0 5 000) David V June 10
Complete if the organization					
Description of property		ost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land	ļ			The state of the state of	
b Buildings	ļ		4 010	4 010	
c Leasehold improvementsd Equipment	ļ.——		4,210.	4,210.	0.
e Other	 		204 075	302 072	902.
Total. Add lines 1a through 1e (Columi	n (d) must equal F	orm 990 Part Y	304,875.	303,973.	902.
BAA	. (a) must equal t	Jan 330, Falt A,	23.2 (D), mic 100 /	Schedu	ule D (Form 990) 2014

Part VII Investments - Other Securities.		N/A	000 5
Complete if the organization answered			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C) (D)			
(E)			
(F)			
<u>(G)</u>			
(H)			
(I)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)		,	,
Part VIII Investments — Program Related.		N/A	200 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Complete if the organization answered			
(a) Description of investment type	(b) Book value	(c) Method of valuation. Cost or en	id-or-year market value
(1)			
(2) (3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13)	N/A		
Part IX Other Assets. Complete if the organization answered	Yes' to Form 990	, Part IV, line 11d. See Form 9	990, Part X, line 15.
	scription		(b) Book value
(2)			
(3)	·····		
(5)			
(6)			
(7)			
(8)			
(9)			
(10)	3. / 15.1		>
Total. (Column (b) must equal Form 990, Part X, column (E	3), line 15)		
Other Liabilities. Complete if the organization answered 'Yes' to Fo	orm 990 Part IV June 11	e or 11f See Form 990 Part X. line 2	5
(a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2)			
(3)			
(4)		 '	п
(6)			
(7)		,	· · · · · · · · · · · · · · · · · · ·
(8)			
(9)		*	*
(10)			, , , , , , , , , , , , , , , , , , ,
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25) 2. Liability for uncertain tax positions in Part XIII, provide the text of the form	etacte to the organization's fun	appropriate that records the green state of	la liability for unandain
• CIADINO TO DICEITAIN TAX DOSTITORS IN PART ATH, DEOVIGE THE TEXT OF THE TO	omote to the broadZation's NO	iancial statements that reports the broadlization	ו א וומטווונץ וטו עווככולמווו

Schedule D (Form 990) 2014 INTERNATIONAL BROTHERHOOD OF THE	EAMSTERS	13-5603897	Page 4
PartiXI Reconciliation of Revenue per Audited Financial State		nue per Return.	
Complete if the organization answered 'Yes' to Form 99			
1 Total revenue, gains, and other support per audited financial statements		1 1	,640,930.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		5	·
a Net unrealized gains (losses) on investments	2 a	7 10	
b Donated services and use of facilities	2 b		
c Recoveries of prior year grants	2 c	3562	
d Other (Describe in Part XIII)	2 d		
e Add lines 2a through 2d	.	2 e	
3 Subtract line 2e from line 1		3 1	,640,930.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		100	
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a	1233	
b Other (Describe in Part XIII)	4 b		
c Add lines 4a and 4b	h	. 4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line	: 12)	5 1	,640,930.
Part XII. Reconciliation of Expenses per Audited Financial Stat	tements With Expe	enses per Return.	
Complete if the organization answered 'Yes' to Form 99			
1 Total expenses and losses per audited financial statements		1 1	,646,436.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		3/4	
a Donated services and use of facilities	2 a		
b Prior year adjustments	2 b		
c Other losses	2 c		
d Other (Describe in Part XIII)	2 d		

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

Part X - FIN 48 Footnote

Part XIII Supplemental Information.

e Add lines 2a through 2d

c Add lines 4a and 4b.

3 Subtract line 2e from line 1

b Other (Describe in Part XIII)

4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE
UNION MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE UNION AND RECOGNIZE A TAX
LIABILITY (OR ASSET) IF IT HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT
WOULD NOT BE SUSTAINED UPON EXAMINATION BY THE INTERNAL REVENUE SERVICE. THE UNION
IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS; HOWEVER, THERE ARE CURRENTLY
NO AUDITS FOR ANY TAX PERIODS IN PROGRESS. THE UNION BELIEVES IT IS NO LONGER
SUBJECT TO INCOME TAX EXAMINATIONS FOR YEARS PRIOR TO 2011.

4 a

4 b

Schedule **D** (Form 990) 2014

2 e

3

4 c

1,646,436.

1,646,436

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered Yes' on Form 990, Part IV, line 23.

Attach to Form 990.

OMB No 1545-0047

Open to Püblic Inspection

Department of the Treasury Internal Revenue Service

► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Employer identification number 13-5603897

Pa	rt I Questions Regarding Compensation			
L			Yes	No
1 :	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		,	
	First-class or charter travel Housing allowance or residence for personal use		:	1
	Travel for companions Payments for business use of personal residence			•
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	[;]		1 . 1
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)	, i	18 4 4 1	
I	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain	1 b		3
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?		1	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III	ا د گو د گو		
	Compensation committee Written employment contract	- 	3,	y. 4.
	Independent compensation consultant Compensation survey or study	3.56		37
	Form 990 of other organizations Approval by the board or compensation committee	. #š. /		113
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
	a Receive a severance payment or change-of-control payment?	4 a		X
	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4 b		X
•	c Participate in, or receive payment from, an equity-based compensation arrangement?	4 c		X
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	1 1	· 英雄的	
	Only section 501(c)(3) 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			4
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of	,	177.5	
	a The organization?	5 a		1 '
ı	h Any related organization?	5 b		
	If 'Yes' to line 5a or 5b, describe in Part III		, 1	
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	-	, ,.	
	confingent on the net earnings of			
	a The organization?	6 a		
ı	h Any related organization?	6 b		┼
	If 'Yes' to line 6a or 6b, describe in Part III		•	1
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If 'Yes,' describe in Part III	8		
9	If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9_		

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

Schedule J (Form 990) 2014

13-5603897

INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Danial Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Schedule J (Form 990) 2014

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

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

		(B) Breakdown of	Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement	(D) Nontaxable	(E) Total of	(F) Compensation
(A) Name and Title	<u> </u>	(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	and other deferred compensation	Silipo	(a)-(l)(a)si ii isooo	reported as deferred in prior Form 990
SEAN CAMPRELL	€	117,540.	0	13,770.	10,988.		159, 666.	126,200.
1 President	<u> </u>	0	0	0	0.	0.		!
	Θ					 		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2	€							
	ε		 				1 1 1 1	1 1 1 1 1 1 1
3	€							
	<u></u>		1 1 1	1 1 1 1	1 1 1 1 1 1 1	 		
4	E							
	ε	1 1 1 .	1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1	 		1 1 1 1 1 1 1
2	(E)							
	Ξ	 	 	1 1		1 1 1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
9	⊜							
	ε	1 1 1			1 1 1			
7	€							
	Ξ		 	 	 	 		1 1 1 1
8	€	ļ						
	Ξ	 	 	1 1	1 1 1			1 1 1
6	€							
	€	 	 	1 1 1	 	1 1 1		1 1 1 1 1
10	Θ							
	<u>e</u>		1 1 1	1 1 1 1 1 1 1	 - - - - -	 	 	! ! ! !
11	<u>(ii)</u>							
	Ξ	- 	 	1 1 1	 	1 1 1		
12	Œ							
	Ξ	- - 	 	 	 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	 	
13	€							
	Θ	1 1	 	! ! ! !			1 1 1	
14	<u>(i)</u>							
	Θ		 	1 1 1		1 1 1 1		
15	€							
	<u>e</u>		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1 1		! ! ! ! !
16	€						1	000 000
ВАА			TEEA4102L 06/19/14	3/14			Schedule	Schedule J (Form 330) 2014

Pare III Supplemental Information

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

Schedule J (Form 990) 2014

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is

2014
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

LOCAL 813

at www.irs.gov/form990.

INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Employer identification number

13-5603897

Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder

INTERNATIONAL BROTHERHOOD OF TEAMSTERS LOCAL 813 HAS APPROXIMATELY 2,182 UNION MEMBERS.

Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body

THE LOCAL UNION MEMBERS ELECT OFFICERS & TRUSTEES EVERY 3 YEARS

Form 990, Part VI, Line 7b - Decisions of Governing Body Approval by Members or Shareholders

SOME DECISIONS ARE SUBJECT TO MEMBERS' APPROVAL BASED ON EACH LOCAL UNION'S BY-LAWS

Form 990, Part VI, Line 11b - Form 990 Review Process

THE RETURN PREPARER MAILS A COPY OF THE FINAL VERSION OF FORM 990 TO THE SECRETARY

TREASURER WHO GIVES THE FILING TO EACH OFFICER AND TRUSTEE BEFORE IT IS FILED. EACH

OFFICER AND TRUSTEE HAS AN OPPORTUNITY TO MAKE INQUIRES BEFORE AND AFTER FILING.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

NO OTHER DOCUMENTS AVAILABLE TO THE PUBLIC.