

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



Form **990**

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.

Department of the Treasury Internal Revenue Service

▶ Information about Form 990 and its instructions is at www.lrs.gov/form990.

2014
Open to Public Inspection

<u>A</u>	For th	e 2014 calendar year, or tax year beginning and	ending		
В	Check if	C Name of organization		D Employer identific	ation number
	applicab	I INTERNATIONAL BROTHERHOOD OF TEAMSTER	S		
	Addre	SS LOCAL 90			
	Name chang			42-05	559240
	Initial		Room/suite		
	Final	2425 DELAWADE AVENUE		1	262-3194
	termii			G Gross receipts \$	712,669.
	Amen	ded DDG MOTHER THE FORES		H(a) Is this a group re	
F	Appli			for subordinates	
-	pend	SAME AS C ABOVE		1	
_		empt status	or 527	H(b) Are all subordinates in	
		te: $\triangleright N/A$	JI L J21	⊣	ist (see instructions)
		forganization: Corporation X Trust Association Other	I Voor	H(c) Group exemption	
_	art I	Summary	L TEAL	OF IOI III ALION. 1303 M	State of legal domicile: IA
_	T .	Briefly describe the organization's mission or most significant activities: LABOI	D ITNITC)NT	
Governance	'	briefly describe the organization's mission of most significant activities.	V ONIC	<u> </u>	
nar	2	Check this box if the organization discontinued its operations or dispose	and of more	than 25% of its not say	
Ver	~		sea or more	i	sets
ဇ္ဗ	3	Number of voting members of the governing body (Part VI, line 1a)		3	
		Number of independent voting members of the governing body (Part VI, line 1b)		4	0
ţį	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	•	5	9
Activities &	6	Total number of volunteers (estimate if necessary)		6	0
Ac		Total unrelated business revenue from Part VIII, column (C) line 12		7a	0.
_	b	Net unrelated business taxable income from Form 990-15-time 34-3-1	1	7b	0.
		Contributions and grants (Part VIII, line 17)2 APR 0 9 2015	-	Prior Year	Current Year
<u>r</u>	8	Contributions and grants (Part VIII, line 11) APR 0 9 2015		0.	0.
Ven	9	Program service revenue (Part VIII, line 2g)		687,551.	710,024.
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		526.	0.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8e, 9d, 16c, and 11e)		5,000.	2,645.
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		693,077.	712,669.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,315.	2,887.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		1,150.	500.
ë	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u> </u>	378,457.	<u>317,770.</u>
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	_	0.	0.
Ž.X	b	Total fundraising expenses (Part IX, column (D), line 25)	<u>0.</u>		
щ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		300,430.	<u>299,048.</u>
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		681,352.	620,205.
	19	Revenue less expenses. Subtract line 18 from line 12		11,725.	92,464.
SOC	[Be	ginning of Current Year	End of Year
Set	20	Total assets (Part X, line 16)		252,486.	<u>337,498.</u>
Net Assets or	21	Total liabilities (Part X, line 26)		6,817.	1,578.
	22	Net assets or fund balances. Subtract line 21 from line 20		245,669.	<u>335,920.</u>
P	art II	Signature Block			
	•	alties of perjury, I declare that I have examined this return, including accompanying schedules		•	knowledge and belief, it is
true	, corre	ct, and complete. Dealaration of preparer (other than officer) is based on all information of wh	ich preparer	has any knowledge.	
		- Clarks /=		<u> </u>	015
Sig	n	Signature of officer		Date	
He	re	Claudia Pettit. Secretary - Treasurer			
		Type or print name and title		Data	TI DIN
		Print/Type preparer's name Preparer's signature		Date Check C	PTIN
Pai		ERIC C. BAERTSCH ERIC C. BAERTSCH	H L	Sell-elliptoyet	
	parer	Firm's name LEGACY PROFESSIONALS LLP		Firm's EIN	32-0043599
Use	Only	Firm's address 6800 FRANCE AVENUE SO., SUITE 55	5 0		
		EDINA, MN 55435		Phone no. (9 5	52)841-3950
		RS discuss this return with the preparer shown above? (see instructions)			X Yes No
4326	101 11-0	17-14 LHA For Paperwork Reduction Act Notice, see the separate instruction	nns.	_	Form 990 (2014)

INTERNATIONAL BROTHERHOOD OF TEAMSTERS Form 990 (2014) 42-0559240 LOCAL 90 Page 2 Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission TO ORGANIZE ALL WORKERS FOR THE ECONOMIC, MORAL AND SOCIAL ADVANCEMENT OF THEIR CONDITION AND STATUS. Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.) (Expenses \$ including grants of \$) (Revenue \$ TO UNITE INTO ONE LABOR ORGANIZATION ALL WORKERS ELIGIBLE FOR MEMBERSHIP, REGARDLESS OF RELIGION, RACE, CREED, COLOR, NATIONAL ORIGIN, AGE, PHYSICAL DISABILITY, SEX, OR SEXUAL ORIENTATION; TO ENGAGE IN ORGANIZING WORKERS TO PROVIDE THE BENEFIT OF UNIONISM TO ALL WORKERS AND TO PROTECT AND PRESERVE THE BENEFITS OBTAINED FOR MEMBERS OF THIS ORGANIZATION; TO SECURE IMPROVED WAGES, HOURS, WORKING CONDITIONS AND OTHER ECONOMIC ADVANTAGES THROUGH ORGANIZATION, NEGOTIATIONS AND COLLECTIVE BARGAINING, THROUGH LEGAL AND ECONOMIC MEANS, AND OTHER LAWFUL METHODS; TO PROVIDE EDUCATIONAL ADVANCEMENT AND TRAINING FOR EMPLOYEES, MEMBERS AND OFFICERS; TO SAFEGUARD, ADVANCE, AND PROMOTE THE PRINCIPLE OF FREE COLLECTIVE BARGAINING. (Code) (Expenses \$ including grants of \$ ___) (Expenses \$ Revenue \$ (Code including grants of \$

4d Other program services (Describe in Schedule O)

xpenses \$ including grants of \$

) (Revenue \$

4e Total program service expenses ▶

Form 990 (2014)

LOCAL 90

42-0559240 Page 3

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			110
-	If "Yes," complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	_	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	<u> </u>		_ _
•	public office? If "Yes," complete Schedule C, Part I	3	х	
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			
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
Ŭ	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		х
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		х
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	11a	X	
h	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		х
. с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	1.12		
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	1 1f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		X
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		_X_
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	17_		<u> </u>
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		X
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		<u>X</u>
2 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
		Form	990	(2014)

orm 9 <u>90 (2014)</u>	LOCAL 90	42-0559240	Page
Part IV Che	ecklist of Required Schedules (continued)		

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		_X_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		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 member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		_X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	,	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		_X_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990	(201

Page 5

orm 9	990 (2014) LOCAL 90		42-0559	240	P	age 5
Part						
	Check if Schedule O contains a response or note to any line in this Part V					
	·				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	23			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportal	ole gaming			
	(gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	9			
	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)				
	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other		•		i	
	financial account in a foreign country (such as a bank account, securities account, or other financial	accour	nt)?	4a		X
	If "Yes," enter the name of the foreign country		·			ĺ
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccount	ts (FBAR)			l
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_		5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	action?		5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne orga	nization solicit	_	.,	
	any contributions that were not tax deductible as charitable contributions?			6a	X	-
	If "Yes," did the organization include with every solicitation an express statement that such contribu-	tions or	gifts		v	
	were not tax deductible?			6b	X	
	Organizations that may receive deductible contributions under section 170(c).	rueec n	rouded to the payor?	7-		x
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se If "Yes," did the organization notify the donor of the value of the goods or services provided?	i vices h	Tovided to the payor	7a 7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	Se roai	urad	70		
	to file Form 8282?	as requ	in e a	7c		x
	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		t2	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont		••	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file F		99 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz			7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained					
	sponsoring organization have excess business holdings at any time during the year?	,		8		
	Sponsoring organizations maintaining donor advised funds.					
	Did the sponsoring organization make any taxable distributions under section 4966?			9a		ļ
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
	Section 501(c)(7) organizations. Enter					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				l
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				İ
11	Section 501(c)(12) organizations. Enter.		-			
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year .	12b				
	Section 501(c)(29) qualified nonprofit health insurance issuers.					ļ
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O.					
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	13b				
-	Enter the amount of reserves on hand	13c	· · · · · ·			
	Did the organization receive any payments for indoor tanning services during the tax year?		•	14a		X
b_	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O		14b	000	(0011
				Form	990	(2014)

INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Form 990 (2014)

42-0559240

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

	Check if Schedule O contains a response or note to any line in this Part VI					LX
<u>Sec</u>	tion A. Governing Body and Management					
			i		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		7]
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b		0		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	p with	any other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form	990 wa	s filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		Х
6	Did the organization have members or stockholders?			6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or			
	more members of the governing body?			7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or			
	persons other than the governing body?			7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following:			
а	The governing body?			_8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ached	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Fi	evenu	e Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapter	s, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ly befo	re filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	e to con	flicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	⁄es," d	escribe			
	in Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13		X
14	Did the organization have a written document retention and destruction policy?			14		X
15	Did the process for determining compensation of the following persons include a review and approve	al by ır	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•				
а	The organization's CEO, Executive Director, or top management official			15a		X
þ	Other officers or key employees of the organization .			15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a			
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ite its p	participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nızatıo	n's			
_	exempt status with respect to such arrangements?			16b		L
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed NONE					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	୮ (Sect	ion 501(c)(3)s only	avaılat	le	
	for public inspection. Indicate how you made these available. Check all that apply.					
	Own website Another's website X Upon request Other (explain		•			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	nflict o	of interest policy, ai	id finan	cıal	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks ar	nd records: -			
	CLAUDIA PETTIT - 515-262-3194					.
	2425 DELAWARE AVENUE, DES MOINES, IA 50317					

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 r	or any related	orga	ınıza	tion	cor	nper	nsat	ated any current officer, director, or trustee				
(A)	(B)	(B) (C)						(D)	(E)	(F)		
Name and Title	Average	(do		Posi		than	опе	Reportable	Reportable	Estimated		
	hours per	Бох	unle	ss pe	rson	s bot	han	compensation	compensation	amount of		
	week	-	ceran	aaa	recto	rrus	tee)	from	from related	other		
	(list any	ecte						the	organizations	compensation		
	hours for related	5	g			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the		
	organizations	ruste	l trus		, 193	E .		(88-2/1099-181130)		organization and related		
	below	T T T	tona	_	를	3 st				organizations		
	line)	Individual trustee or director	Institutional trustee	Officer	Keye	Highest compensated employee	ğ			0.9420.010		
(1) CLAUDIA PETTIT	40.00											
SECRETARY TREASURER				X		<u> </u>		79,443.	0.	34,957.		
(2) MATTHEW BALLARD	40.00		İ									
PRESIDENT				X				40,351.	0.	17,974.		
(3) PAT NAVIN	40.00											
VICE PRESIDENT				X	-	<u> </u>	<u> </u>	77,284.	0.	34,956.		
(4) JAMIE HINES	2.00					İ			_	_		
RECORDING SECRETARY		ļ.,	ļ	X		├	<u> </u>	2,075.	0.	0.		
(5) NICHOLAS MEYERS	2.00											
TRUSTEE - PAST			_	X				0.	0.	0.		
(6) SUZANNE OVERTON	2.00					Ì		0 151		•		
TRUSTEE				X				2,151.	0.	0.		
(7) MARK SHINSKI	2.00			٠,,		i		2 075		•		
TRUSTEE	2 00		_	X		<u> </u>	<u> </u>	2,075.	0.	0.		
(8) JAMES CARR	2.00			Ţ		l		2,075.	0.	0		
TRUSTEE				X		<u> </u>		2,075.	V •	0.		
						ļ						
						<u> </u>						
					ŀ							
			_	_	<u> </u>							
		-										
		l										
				_	\vdash		 					
						<u> </u>						
		1										
		L		L	L	<u> </u>		<u> </u>				
										Earm 990 (2014)		

HOCKH 3		LO	CAL	9	C
---------	--	----	-----	---	---

	t VII Section A. Officers, Directors, Trus (A)	(B)	رر. ا		((C)		<u> </u>	(D)	(E)			(F)	
	Name and title	Average hours per week	box	Position (do not check more than one look, unless person is both an officer and a director/trustee)				h an	Reportable compensation from	Reportable compensation from related		amo o	mated ount o ther	f
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		orga	m the nization relate	on ed
			-	_		×	1 0							
	100000000000000000000000000000000000000													
_														
_														
							}							
	Sub-total	11 O A							205,454.		0.	87	,88	$\frac{37.}{0.}$
	Total from continuation sheets to Part V Total (add lines 1b and 1c)	II, Section A							205,454.		0.	87	, 88	
2	Total number of individuals (including but i	not limited to th	nose	liste	ed a	bov	e) wl	no r		,000 of reportable	•			
	compensation from the organization											1,	V	0
3	Did the organization list any former officer			e, ke	ey er	mple	oyee	, or	highest compensated e	mployee on			Yes	No
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the s			omp	ens	atioi	n and	d ot	her compensation from	the organization		3	+	<u> </u>
5	and related organizations greater than \$15 Did any person listed on line 1a receive or									dual for services		4		X
	rendered to the organization? If "Yes," con							- Ciai				5		Х
	tion B. Independent Contractors									# 4.00.000 · f · · · · ·				
1	Complete this table for your five highest countries the organization. Report compensation for										pens	ation ire	וווכ	
	(A) Name and business			ON					(B) Description of s		С	(C) ompen)
		·- ·- ·							~ <u></u>					
2	Total number of independent contractors (\$100,000 of compensation from the organ	·	not l	mite	ed to		ose li O	sted	d above) who received n	nore than				
	w 100,000 of compensation from the organ	- Lation					<u> </u>					Form 9	90 (2	014)

Form 990 (2014)
Part VIII LOCAL 90
Statement of Revenue 42-0559240 Page 9

b CHECKS WRITTEN OFF c TELEPHONE REIMBURSEMEN d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions. 900099 736. 900099 388. 900099 266. 266. 2712,669. 710,024. 0. 2,645.			Check if Schedule O cont	aıns a response	or note to any line	e in this Part VIII		·	
1		·				(A)	Related or exempt function	Unrelated business	Revenue excluded from tax under
2 a MEMBER DUES & INITIATI 900099 685, 285. 685, 285.	इ इ	1 a	Federated campaigns	1a			•		
2 a MEMBER DUES & INITIATI 900099 685, 285. 685, 285.	on o		, •						
2 a MEMBER DUES & INITIATI 900099 685, 285. 685, 285.	ا څي	C	•	1c					
2 a MEMBER DUES & INITIATI 900099 685, 285. 685, 285.	a it	d		1d					
2 a MEMBER DUES & INITIATI 900099 685, 285. 685, 285.	S, C	е	Government grants (contribut	ions) 1e					
2 a MEMBER DUES & INITIATI 900099 685, 285. 685, 285.	rois I	f	All other contributions, gifts, gran	ts, and					
2 a MEMBER DUES & INITIATI 900099 685, 285. 685, 285.			similar amounts not included abo	ve 1f					
2 a MEMBER DUES & INITIATI 900099 685, 285. 685, 285.	E G	g	Noncash contributions included in lines	1a-1f \$					
2 a MEMBER DUES & INITIATI 900099 685, 285. 685, 285. b MEMBER ASSESSMENTS 900099 24,739. 24,739. c d	<u>8</u> 8	h	Total. Add lines 1a-1f		•				
Name									
Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 18-28-287 To	9	2 a							
Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 18-28-287 To	e Z	b	MEMBER ASSESSME	ENTS	900099	24,739.	24,739.		
Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 18-28-287 To	en S	C							ļ
Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 18-28-287 To	Ze Ja	d							
Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 28-287 Total, Add lines 18-28-287 To	5 _	е							
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) 4 Net gain or (loss) 6 a Gross income from fundraising events (not including \$	۵	f		enue		710 001			
other similar amounts) Income from investment of tax-exempt bond proceeds Royalties G a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) T a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss) d Net gain or (loss) b Less: direct expenses c Gain or (loss) T a Gross income from fundraising events (in) Other including \$\frac{1}{2}\$ of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses 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 c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a REFUNDS b CHECKS WRITTEN OFF c TELEPHONE REIMBURSEMEN d All other revenue e Total. Add lines 11a-11d t Tatle revenue, See instructions.	_	g				710,024.			
4 Income from investment of tax exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gann or (loss) d Net gain or (loss) d Net gain or (loss) for contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less cost or goods sold c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Miscellaneous Revenue Miscellaneous Revenue Miscellaneous Revenue Miscellaneous Revenue Miscellaneous Revenue Miscellaneous Revenue Business Code 11 a REFUNDS b CHECKS WRITTEN OFF c TELIFPHONE REIMBURSEMEN d All other revenue e Total. Add lines 11a-11d		3		dividends, inter	est, and	:			
Section Comparison Compar			•		. •				
(i) Real (ii) Personal (iii) Personal Personal (iii) Personal Personal (iii) Personal Personal (iii) Personal				x-exempt bond (proceeds				+
6 a Gross rents b Less rental expenses c Rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) 4 Net gain or (loss) 6 Net gain or (loss) 7 a Gross ancome from fundraising events (not including \$	ĺ	5	Royalties	() 51	() 5				+
b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less: direct expenses c Net income or (loss) from fundraising events 9 a Cross income from gaming activities. See Part IV, line 19 a b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross ales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a REFUNDS 900099 1, 255. TELEPHONE REIMBURSEMEN d All other revenue e Total. Add lines 11a-11d 12 Total revenue, See instructions.		•	0	(I) Real	(ii) Personai				
C Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gan or (loss) d Net gan or (loss) d Net gan or (loss) d Net gan or (loss) d Net gan or (loss) d Net gan or (loss) d Net gan or (loss) 8 a Gross income from fundraising events (not including \$		ьа			 				
d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less' cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$		D	•	····					
7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss) s a Gross income from fundraising events (not including \$	ł	ن س	· ·						
assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a REFUNDS b CHECKS WRITTEN OFF c TELEPHONE REIMBURSEMEN d All other revenue e Total. Add lines 11a-11d total revenue, See instructions. Verification Verificati			• •	(i) Securities	(u) Other				
b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$		/ a		(I) Gecurities	(ii) Other				
and sales expenses c Gain or (loss) Net gain or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses 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 c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a REFUNDS b CHECKS WRITTEN OFF c TELEPHONE REIMBURSEMEN d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions. Net income or (loss) from fundraising events Dess: direct expenses Dess: direct ex		h	•						
Refunds of loss) Comparison of loss	1	b							
d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses	Ì	c	•						
8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses		d			•				
Including \$.	8 a	• • •	g events (not					
contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses 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 c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a REFUNDS b CHECKS WRITTEN OFF c TELEPHONE REIMBURSEMEN d All other revenue e Total. Add lines 11a-11d 2,645. 712,669. 710,024. 0. 2,645.	ğ	-		-					
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a REFUNDS b CHECKS WRITTEN OFF c TELEPHONE REIMBURSEMEN d All other revenue e Total. Add lines 11a-11d	- Š			1c) See					
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a REFUNDS b CHECKS WRITTEN OFF c TELEPHONE REIMBURSEMEN d All other revenue e Total. Add lines 11a-11d	<u>بر</u>		Part IV, line 18	а					
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a REFUNDS b CHECKS WRITTEN OFF c TELEPHONE REIMBURSEMEN d All other revenue e Total. Add lines 11a-11d	흁	b	Less: direct expenses	b					
Part IV, line 19	١	С	Net income or (loss) from fund	draising events					
b Less direct expenses 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 c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a REFUNDS b CHECKS WRITTEN OFF c TELEPHONE REIMBURSEMEN d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions. b Checks written of the properties of		9 a	Gross income from gaming ad	ctivities. See					
c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a REFUNDS b CHECKS WRITTEN OFF c TELEPHONE REIMBURSEMEN d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions.			Part IV, line 19	а					
10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code		b	Less: direct expenses	b					
and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a REFUNDS b CHECKS WRITTEN OFF c TELEPHONE REIMBURSEMEN d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions. a		c	Net income or (loss) from gan	ning activities	>				
b Less cost of goods sold continuous process of the latest continuous process of the latest continuous process of the latest continuous process of the latest continuous process of the latest continuous process of the latest continuous process of the latest continuous process of the latest continuous process of the latest continuous process of the latest continuous process of the latest continuous process of the latest continuous process of the latest continuous process of the latest continuous process process of the latest continuous process p	- 1	10 a		returns					
C Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a REFUNDS 900099 1,255. b CHECKS WRITTEN OFF 900099 736. 736. c TELEPHONE REIMBURSEMEN 900099 388. 388. d All other revenue 900099 266. 266. e Total. Add lines 11a-11d 2,645. 712,669. 710,024. 0. 2,645.				а	-				
Miscellaneous Revenue Business Code 11 a REFUNDS 900099 1,255. b CHECKS WRITTEN OFF 900099 736. c TELEPHONE REIMBURSEMEN 900099 388. d All other revenue 900099 266. e Total. Add lines 11a-11d ≥ 2,645. 12 Total revenue. See instructions. > 712,669. 710,024. 0. 2,645.				•	· L				
11 a REFUNDS 900099 1,255. 1,255. b CHECKS WRITTEN OFF 900099 736. 736. c TELEPHONE REIMBURSEMEN 900099 388. 388. d All other revenue 900099 266. 266. e Total. Add lines 11a-11d 2,645. 712,669. 710,024. 0. 2,645.	}	С				-			
b CHECKS WRITTEN OFF c TELEPHONE REIMBURSEMEN d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions. 900099 388. 266. 266. 736. 736. 900099 388. 266. 712,669. 710,024. 0. 2,645.	}			ie		1 255			1 255
c TELEPHONE REIMBURSEMEN 900099 388. 388. d All other revenue 900099 266. 266. e Total. Add lines 11a-11d ▶ 2,645. 2,645. 12 Total revenue. See instructions. ▶ 712,669. 710,024. 0. 2,645.				OFF					
d All other revenue 900099 266. 266. e Total. Add lines 11a-11d ► 2,645. 12 Total revenue. See instructions. ► 712,669. 710,024. 0 2,645.		b							
e Total. Add lines 11a-11d 12 Total revenue. See instructions. 13 Total revenue. See instructions. 14 Total revenue. See instructions. 15 Total revenue. See instructions.		C		OKPEMEN					
12 Total revenue. See instructions. > 712,669. 710,024. 0. 2,645.		d		•	200033				200.
		40 40					710 024	n	2 645
11-0/-14	43200 11-07		(VIA) ICYCHUC. OCC IIISH UCHONS.		<u></u>	, , , ,	, _ 0 , 0 4 = 1		Form 990 (2014)

42-0559240 Page 10

Form 990 (2014) LOCAL 90

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	er organizations must c	omplete column (A)	
	Check if Schedule O contains a respon	se or note to any line in	this Part IX	•	
-	ot include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	2,375.			
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22	512.			
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	500.			
5	Compensation of current officers, directors,				
	trustees, and key employees	293,341.			
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	6,150.		<u> </u>	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	18,279.			
11	Fees for services (non-employees)				
а	Management				
b	Legal	17,744.			
С	Accounting	<u> </u>			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				<u> </u>
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	2 004			
12	Advertising and promotion	2,904. 17,515.			
13	Office expenses	17,515.			
14	Information technology				
15	Royalties	21,536.			
16	Occupancy	23,962.			
17	Travel Payments of travel or entertainment expenses	23,302.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,266.			
20	Interest	_,			
21	Payments to affiliates	178,752.			
22	Depreciation, depletion, and amortization	577.			
23	Insurance	3,215.			
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	STEWARDS EXPENSE	26,097.			
b	EDUCATION AND PUBLICITY	3,644.			
С	DUES REFUNDS	836.			
d	All II				
e	All other expenses	620,205.			
25	Total functional expenses. Add lines 1 through 24e	040,405.			
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 990 (2014)
Part X Balance Sheet LOCAL 90

Par		Chapter & Sabadula O contains a recommo ar not					
		Check if Schedule O contains a response or not	te to any line	e in this Part X	(A)		(B)
					Beginning of year		End of year
$\neg \lnot$	1	Cash - non-interest-bearing			65,406.	1	152,185
	2	Savings and temporary cash investments			81,128.	2	80,953
	3	Pledges and grants receivable, net				3	 -
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and fo	ormer officer	rs, directors,			 -
		trustees, key employees, and highest compensi	ated employ	rees Complete			
		Part II of Schedule L				5	_
	6	Loans and other receivables from other disquali	fied persons	s (as defined under			
		section 4958(f)(1)), persons described in section	n 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sec	tion 501(c)(9	9) voluntary			
2		employees' beneficiary organizations (see instr)	Complete F	Part II of Sch L		6	
Assets	7	Notes and loans receivable, net				7	
₹	8	Inventories for sale or use		. [8	
	9	Prepaid expenses and deferred charges				9	
	10 a	Land, buildings, and equipment: cost or other					
		basis Complete Part VI of Schedule D	10a	46,606.		:	
	b	Less accumulated depreciation	10b	45,659.	326.	10c	947
	11	Investments - publicly traded securities			11	,	
	12	Investments - other securities See Part IV, line			12		
ļ	13	Investments - program-related. See Part IV, line			13		
Ì	14	Intangible assets			14		
Ì	15	Other assets. See Part IV, line 11	105,626.	15	103,413		
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)		252,486.	16	337,498
	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 So	chedule D		21	
Se	22	Loans and other payables to current and forme	r officers, di	rectors, trustees,			
		key employees, highest compensated employee	es, and disq	ualified persons.			
Liabilities		Complete Part II of Schedule L		Į <u>.</u>		22	
_	23	Secured mortgages and notes payable to unrela	ated third pa	arties		23	
	24	Unsecured notes and loans payable to unrelate	d third parti	es		24	
	25	Other liabilities (including federal income tax, pa	ayables to re	elated third			
		parties, and other liabilities not included on lines	s 17-24) Co	mplete Part X of			
		Schedule D			6,817.	25	1,578
	26	Total liabilities. Add lines 17 through 25			6,817.	26	1,578
		Organizations that follow SFAS 117 (ASC 958	3), check he	ere 🕨 💹 and		i	
es		complete lines 27 through 29, and lines 33 ar	nd 34.				
anc	27	Unrestricted net assets		_	<u>245,669.</u>	27	335,920
pa	28	Temporarily restricted net assets				28	
<u> </u>	29	Permanently restricted net assets		. — }		29	
ru		Organizations that do not follow SFAS 117 (A	NSC 958), cl	heck here			
0.		and complete lines 30 through 34.					
Set!	30	Capital stock or trust principal, or current funds		<u> </u>		30	
AS	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	ncome, or ot	her funds .	0.45 665	32	205 055
~	33	Total net assets or fund balances		}	<u>245,669.</u>	33	335,920
	34	Total liabilities and net assets/fund balances			<u>252,486.</u>	34	337,498 Form 990 (2014

INTERNATIONAL BROTHERHOOD OF TEAMSTERS

	990 (2014) LOCAL 90	42-05	59240	Pag	_{je} 12
Pai	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>		X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,6	
2	Total expenses (must equal Part IX, column (A), line 25)	2			05.
3	Revenue less expenses. Subtract line 2 from line 1	3			<u>64.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	24	5,6	69.
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		2,2	13.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	33!	<u>5,9</u>	<u> 20.</u>
Pa	t XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both.			1	
	Separate basis Consolidated basis Both consolidated and separate basis			ļ	
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basıs,			
	consolidated basis, or both.		1 1		
	X Separate basis Consolidated basis Both consolidated and separate basis			į	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			•
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			_
	Act and OMB Circular A-133?		3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ııred audıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990 ((2014)

11-07-14

SCHEDULÈ C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

► 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 its instructions is at www.lrs.gov/form990.

2014

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part 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 separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	04 504(-)(4) (5)(0)	tones Committee Book III			
	Section 501(c)(4), (5), or (6) organization TNTERNA	TIONAL BROTHERHO	OD OF BEAMS	MED C F	mployer identification number
. 1011			OD OF LEWIS	LEVO	-
Ď,	LOCAL 9 art I-A Complete if the org	janization is exempt und	dor coction 501(c)	or is a spetion 50	42-0559240
ГС	on piete ii the org	gamzation is exempt und	der section sorto	or is a section sz	organization.
1	Provide a description of the organiz	zation's direct and indirect politic	cal campaign activities		_
2	Political expenditures				\$
3	Volunteer hours				
Ps	art I-B Complete if the ord	ganization is exempt und	der section 501(c))(3)	
	Enter the amount of any excise tax				> \$
	Enter the amount of any excise tax	• •			\$
	If the organization incurred a section				Yes No
	Was a correction made?	THE TOTAL TO	ror and your.		Yes No
	of "Yes," describe in Part IV.				L les L No
		ganization is exempt und	der section 501(c)	, except section 5	i01(c)(3).
1	Enter the amount directly expended	d by the filing organization for se	ection 527 exempt fund	ction activities	> \$
2	Enter the amount of the filing organ	ization's funds contributed to o	ther organizations for s		
	exempt function activities				> \$
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here	and on Form 1120-POL		
	line 17b				▶ \$
4	Did the filing organization file Form	1120-POL for this year?			Yes No
5			IN) of all section 527 p	olitical organizations to	which the filing organization
	made payments For each organiza			-	
	contributions received that were pre-	omptly and directly delivered to	a separate political org	ganization, such as a se	parate segregated fund or a
	political action committee (PAC) If	additional space is needed, pro	vide information in Par	t IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro	om (e) Amount of political
	(2)	(0)	(-)	filing organization	's contributions received and
				funds If none, enter	
				i	delivered to a separate political organization
				1	If none, enter -0
	•		•	· -	

		1			

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

Schedule C (Form 990 or 990-EZ) 2014

INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Schedule C (Form 990 or 990-EZ) 2014 LC Part II-A Complete if the organ	CAL nization	90 is exempt under sec	tion 501(c)(3) and file	42- ed Form 5768(0559240 Page 2 election under
section 501(h)).					
-	-	to an affiliated group (and lis	st in Part IV each affiliated	group member's na	me, address, EIN,
. —		lobbying expenditures).			
Limits of	on Lobby	box A and "limited control" ing Expenditures ans amounts paid or incurre		(a) Filing organization's totals	(b) Affiliated group totals
4 - Tatal labbuma ayaanditiyaa ta mfii oo		anguan (grana roota labhun	۵)		
1a Total lobbying expenditures to influen	•		9)		
b Total lobbying expenditures to influen	_	• •	<u> </u>	 	
c Total lobbying expenditures (add lines	s ra and	(6)	-		
d Other exempt purpose expenditures			<u> </u>		
e Total exempt purpose expenditures (a					-
f Lobbying nontaxable amount. Enter the					
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable	1 (
Not over \$500,000		20% of the amount on line			
Over \$500,000 but not over \$1,000,0		\$100,000 plus 15% of the			
Over \$1,000,000 but not over \$1,500	,000	\$175,000 plus 10% of the			
Over \$1,500,000 but not over \$17,000	0,000	\$225,000 plus 5% of the e	xcess over \$1,500,000.		
Over \$17,000,000		\$1,000,000.			
g Grassroots nontaxable amount (enter	25% of I	ine 1f)			
h Subtract line 1g from line 1a. If zero o					1
i Subtract line 1f from line 1c. If zero or					
j If there is an amount other than zero	· ·	· ·	nızatıon file Form 4720		
reporting section 4911 tax for this year		, ,			Yes No
	4 made a	-Year Averaging Period Uno section 501(h) election do r he separate instructions fo	not have to complete all o	of the five columns	below.
	Lobby	ing Expenditures During 4-	Year Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 20	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount				·	
(150% of line 2a, column(e))					
c Total lobbying expenditures				· · · · · · · · · · · · · · · · · · ·	
d Grassroots nontaxable amount					
e Grassroots ceiling amount				,	
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2014

Schedule C (Form 990 or 990 EZ) 2014 LOCAL 90

Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
of the lobbying activity.	Yes	No	An	nount
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			1	
a Volunteers?			4	
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?		ļ		
g Direct contact with legislators, their staffs, government officials, or a legislative body?		 		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	<u> </u>	<u> </u>	_	
i Other activities?	1			
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)?	-	 	 	
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	<u> </u>			
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), sec	tion 501/c)(5) or	section	
501(c)(6).		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			X	
• • •				
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		1 2	X	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), sec)(5), or	section	X
3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes.")(5), or R (b) P	section art III-A,	
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members	ed "No," O)(5), or	section art III-A,	
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures).	ed "No," O)(5), or R (b) P	section art III-A,	
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polespenses for which the section 527(f) tax was paid).	ed "No," O)(5), or R (b) P	section art III-A,	
 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polespenses for which the section 527(f) tax was paid). a Current year 	ed "No," O)(5), or R (b) P	section art III-A,	
 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexies for which the section 527(f) tax was paid). a Current year b Carryover from last year 	ed "No," O)(5), or R (b) P	section art III-A,	
 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pole expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 	ed "No," O	2 2 2	section art III-A,	
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexies for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	ed "No," O)(5), or R (b) P	section art III-A,	
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexies for which the section 527(f) tax was paid). Current year Carryover from last year Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	ed "No," O	2 2 2	section art III-A,	
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pole expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	ed "No," O	2 2 2	section art III-A,	
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poleximate political expenditures (do not include amounts of poleximate political expenditures (do not include amounts of poleximate political expenditures (do not include amounts of poleximate for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year?	ed "No," O	2 2 2	section art III-A,	
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexies for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions)	ed "No," O	2 2 2	section art III-A,	
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexies for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions)	ed "No," O litical excess d political	2 2 2	section art III-A,	ine 3, is
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pole expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information	ed "No," O litical excess d political	2 2 2	section art III-A,	ine 3, is
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexies for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated grainstructions), and Part II-B, line 1. Also, complete this part for any additional information.	ed "No," O	2 2 2 3	section art III-A,	ine 3, is
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pole expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 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 groinstructions), and Part II-B, line 1. Also, complete this part for any additional information. PART I-A, LINE 1:	ed "No," O litical excess d political oup list), Part	2 2 2 3 II-A, lines	section art III-A, I	ine 3, is
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1	ed "No," O litical excess d political oup list), Part	(5), or R (b) P	section art III-A, I	ine 3, is

Schedule C (Form 990 or 990-EZ) 2014

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" to Form 990,
Part IV, line 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.lrs.gov/form990.

Open to Public

OMB No 1545-0047

Inspection

Name of the organization

INTERNATIONAL BROTHERHOOD OF TEAMSTERS LOCAL 90

Employer identification number 42-0559240

Par			or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		(L) Friede and other accounts
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	ed funds
	are the organization's property, subject to the organization's	exclusive legal control?	└── Yes └── No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or	education) Preservation of a hist	orically important land area
	Protection of natural habitat	Preservation of a cert	ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic sti	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	* *	ure
	listed in the National Register	·	2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	
•	year ▶	,g,	
4	Number of states where property subject to conservation ea	asement is located >	
5	Does the organization have a written policy regarding the pe		
•	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting.	• •	
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo		
Ū	and section 170(h)(4)(B)(II)?		Yes No
9	In Part XIII, describe how the organization reports conservat	non easements in its revenue and expense	
•	include, if applicable, the text of the footnote to the organiza		
	conservation easements		
Pai	t III Organizations Maintaining Collections	of Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A		nent and balance sheet works of art.
	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that descri		
h	If the organization elected, as permitted under SFAS 116 (A)		and halance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		
		ducation, or research in furtherance of pu	bile service, provide the following amounts
	relating to these items:		▶ ¢
	(i) Revenue included in Form 990, Part VIII, line 1		► \$ ► \$
_	(ii) Assets included in Form 990, Part X	Decuree or other similar assets for financia	
2	If the organization received or held works of art, historical tre		ii gairi, provide
	the following amounts required to be reported under SFAS 1	i to (ASC 936) relating to these items.	• •
a	Revenue included in Form 990, Part VIII, line 1		S
b	Assets included in Form 990, Part X		> \$

432051 10-01-14

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

INTERNATIONAL BROTHERHOOD OF TEAMSTERS

	dule D (Form 990) 2014 LOCAL 9									Page 2
Par	- Jongannzationio inalitizationi									
3	Using the organization's acquisition, accessi	on, and other records	s, check	any of the	following tha	t are a s	ignificant	use of its	collection	ıtems
	(check all that apply)									
а	Public exhibition	d	ı	_oan or exc	hange progra	ıms				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	llections and explain	n how th	ey further tl	ne organizatio	on's exe	mpt purp	ose in Par	t XIII	
5	During the year, did the organization solicit o	r receive donations o	of art, his	storical trea	sures, or othe	er sımıla	r assets		_	_
	to be sold to raise funds rather than to be ma							L	Yes	No_
Par	t IV Escrow and Custodial Arrange reported an amount on Form 990, Par		te if the	organizatio	n answered "	'Yes" to	Form 99	0, Part IV,	line 9, or	
1a	Is the organization an agent, trustee, custodi	an or other intermed	ary for	contribution	s or other as	sets not	tincluded	j		
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing t	able [.]						
		·	•	,					Amount	
С	Beginning balance						1c			
	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for e	escrow or cu	ustodial acco	unt liab	ılıty?		Yes	No No
b	If "Yes," explain the arrangement in Part XIII	Check here if the ex	planatio	n has been	provided in F	art XIII	-			
Par	t V Endowment Funds. Complete r	f the organization an	swered	"Yes" to Fo	rm 990, Part	IV, line	10			
		(a) Current year	(b) P	rior year	(c) Two year	s back	(d) Three	years back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		%							
	Permanent endowment	%	_							
С	Temporarily restricted endowment ▶	~~~								
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%								
За	Are there endowment funds not in the posse	•	ation tha	at are held a	nd administe	red for t	the organ	ization		
	by.	•					_		Į,	Yes No
	(i) unrelated organizations		_						3a(i)	
	(ii) related organizations		•						3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Sched	dule R?					3b	
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipm								-	
	Complete if the organization answere	d "Yes" to Form 990.	, Part IV	, line 11a S	ee Form 990	, Part X,	line 10			
	Description of property	(a) Cost or of			or other		ccumula	ted	(d) Book	value
		basis (investr			(other)		preciatio			
1a	Land									
	Buildings									
	Leasehold improvements		_							
	Equipment		7.1	4	6,606.		45,6	559.		947.
	Other									
	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colun	nn (B), line	10c.)			🕨		947.

Schedule D (Form 990) 2014

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ► Part VIII Investments - Program Related.

Complete if the organization answered "Yes	s" to Form 990, Part IV, line	11c. See Form 990, Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	>	

Part IX Other Assets.

(F) (G) (H)

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description		(b) Book value
(1) EQUITY IN DES MOINES TEAMSTERS BUILDING CORP		103,413.
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total (Column (b) must equal Form 990, Part X, col. (R) line 15.)	▶	103.413.

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) PAYROLL LIABILITIES	1,578.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total, (Column (b) must equal Form 990, Part X, col. (B) line 25.)	▶ 1,578.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2014

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

➤ Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990. Open to Public Inspection

OMB No 1545-0047

Name of the organization

INTERNATIONAL BROTHERHOOD OF TEAMSTERS TINCAT, 90

Employer identification number 42-0559240

FORM 990, PART VI, SECTION A, LINE 6:
THE LOCAL IS COMPRISED OF ACTIVE MEMBERS. ACTIVE MEMBERS HAVE SATISFIED
THE REQUIREMENTS FOR MEMBERSHIP AND ARE EMPLOYED UNDER THE JURISDICTION OF
THE LOCAL UNION.
FORM 990, PART VI, SECTION A, LINE 7A:
PER THE BYLAWS, EVERY MEMBER WHOSE DUES ARE PAID UP THROUGH THE MONTH WHICH
IS PRIOR TO THE MONTH IN WHICH THE NOMINATIONS OR ELECTION IS HELD SHALL
HAVE THE RIGHT TO NOMINATE, VOTE FOR, OR OTHERWISE SUPPORT THE CANDIDATE OF
THEIR CHOICE.
FORM 990, PART VI, SECTION A, LINE 7B:
PER THE BYLAWS, MEMBERS HAVE THE RIGHT TO NOMINATE CANDIDATES OR VOTE IN
ELECTIONS OR REFERENDUMS OF THE UNION AND THE RIGHT TO ATTEND MEMBERSHIP
MEETINGS, AND TO PARTICIPATE IN THE DELIBERATIONS AND VOTING UPON THE
BUSINESS OF SUCH MEETINGS. AT THE MEETINGS, THE FINANCIAL INFORMATION OF
THE LOCAL IS DISCLOSED TO THE MEMBERS. IN ADDITION, ANY SINGLE EXPENDITURE
OVER \$10,000 MUST BE APPROVED BY THE MEMBERSHIP.
FORM 990, PART VI, SECTION B, LINE 11:
FORM 990 IS PROVIDED TO THE ENTIRE EXECUTIVE BOARD FOR REVIEW PRIOR TO
FILING THE FORM.
FORM 990, PART VI, SECTION B, LINE 12C:
THE EXECUTIVE BOARD ANNUALLY REVIEWS AND ADOPTS THE CONFLICT OF INTEREST

THE POLICY STATES THAT NON-COMPLIANCE WITH THE POLICY SHOULD BE

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

POLICY.

432211 08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

Schedule O (Form 990 or 990-EZ) (2014)	Page 2
Name of the organization INTERNATIONAL BROTHERHOOD OF TEAMSTERS LOCAL 90	Employer identification number 42-0559240
REPORTED TO THE PRINCIPAL OFFICER OF THE LOCAL.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE LOCAL UNION MAKES ITS GOVERNING DOCUMENTS, CONFLICT C	
AND FINANCIAL STATEMENTS AVAILABLE TO MEMBERS UPON REQUES	T AT THE LOCAL
UNION'S OFFICE. THESE DOCUMENTS ARE NOT AVAILABLE FOR PU	JBLIC INSPECTION.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
DECREASE IN EQUITY OF DES MOINES TEAMSTERS BUILDING	
CORPORATION	-2,213.
	· · · · · · · · · · · · · · · · · · ·

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

Partl

Related Organizations and Unrelated Partnerships

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

2014

OMB No 1545-0047

Open to Public Inspection

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

INTERNATIONAL BROTHERHOOD OF TEAMSTERS

LOCAL 90

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

Employer identification number 42-0559240

(g) Section 512(b)(13) controlled Schedule R (Form 990) 2014 ž × entity? Direct controlling Yes entity Identification of Related Tax-Exempt Organizations Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Direct controlling End-of-year assets **e** status (if section Public charity 501(c)(3)) Total income Exempt Code ਉ section 527 Legal domicile (state or Legal domicile (state or foreign country) foreign country) HOWA POLITICAL ACTION COMMITTEE Primary activity Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. TEAMSTERS LOCAL 90 D.R.I.V.E - 42-0559240 Name, address, and EIN (if applicable) Name, address, and EIN of related organization of disregarded entity DES MOINES, IA 50317 2425 DELAWARE AVENUE Part

432161 08-14-14 LHA

INTERNATIONAL BROTHERHOOD OF TEAMSTERS LOCAL 90

Schedule R (Form 990) 2014

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

Page 2

42-0559240

organizations treated as a partitership during the tax year	rmersrip during me ta	x year		-							
(e)	(q)	<u>©</u>	<u>©</u>			Œ	(6)	E	€	9	₹
Name, address, and EIN of related organization	Primary activity	Legai domicile (state or foreign country)	Direct controlling entity	Predomin (related, excluded fre sections	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disproportionate allocations? Yes No	ate Code V-UBI amount in box 20 of Schedule 6 K-1 (Form 1065)	ox managing partner? Ule partner? 65) Yes No	General or Percentage managing ownership partner?
Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	ganizations Taxable a rporation or trust durin	is a Corp	oration or Trust Co year.	omplete if th	e organization	answered "Yes	" on Form 990	, Part IV, line	34 because it ha	d one or mo	re related
(a) Name, address, and EIN of related organization	Z. c	Prim	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)		(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 5.12(b)(13) controlled entity?
432162 08-14-14				23					Scher	dule R (Forr	Schedule R (Form 990) 2014

INTERNATIONAL BROTHERHOOD OF TEAMSTERS Schedule R (Form 990) 2014 LOCAL 90

42-0559240 Page 3

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	å
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ns with one or more re	lated organizations listed	ın Parts II-IV?		\dashv	`
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	Ç			19		×
b Gift, grant, or capital contribution to related organization(s)				đ		×
c Gift, grant, or capital contribution from related organization(s)				10		×
d Loans or loan guarantees to or for related organization(s)				19		×
e Loans or loan guarantees by related organization(s)				1		×
f Dividends from related organization(s)				#		×
g Sale of assets to related organization(s)			•	19		×
h Purchase of assets from related organization(s)				4		×
i Exchange of assets with related organization(s)				1;		×
j Lease of facilities, equipment, or other assets to related organization(s)				1;		×
k Lease of facilities, equipment, or other assets from related organization(s)				*		×
	anization(s)			=		×
	anization(s)			Ę		×
Sharing of facilities, equipment, mailing lists, or other assets with relati	tion(s)			두		×
				9		×
p Reimbursement paid to related organization(s) for expenses	٠			10		×
q Reimbursement paid by related organization(s) for expenses				5		×
r Other transfer of cash or property to related organization(s)				+		×
				15		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete the	ils line, including covered	relationships and transaction thresholds			
(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amount involved	volved		
(1)						
(2)						
(3)						
(4)						
. (9)		i :				
(9)						
77 77 00 001001	7.7		- Cl. bodes		2000	}

42-0559240

Page 4

INTERNATIONAL BROTHERHOOD OF TEAMSTERS

LOCAL 90

Schedule R (Form 990) 2014

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

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

	Sim The Company								
(e)	(g)	(O)	(d)		(6) (7)	£	(i)	s ,	(
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	redominant income pariners sec (related, unrelated, 501(c)(3)	•	share or end-of-year	tonate allocations?	tong to be very solution to the control of schedule (amount in box 20 managing ownership allocations) of Schedule K-1 partner?	General of managing partner?	ownership
		country)	sections 512-514) Yes No	No income	assets	Yes No	(Form 1065)	Yes No	
								·	
									_
									
						_			
									
								_	
			:						
									
			_						
								_	
				-					
				-					

Schedule R (Form 990) 2014

INTERNATIONAL BROTHERHOOD OF TEAMSTERS Schedule R (Form 990) 2014 42-0559240 Page 5 LOCAL 90 Part VII | Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions)