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EXTENDED TO AUGUST 17, 2015

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

<u>A</u>	For the	e 2014 calendar year, or tax year beginning and	ending						
B Check if applicable C Name of organization D Employer identification number									
	applicabl	* TEAMSTERS, CHAUFFEURS, WAREHOUSEMEN &	1						
Г	Addre chang	SS TIPL DEDG & MEGG TOGET TOTAL TO	533						
F	Name		<del></del>	1 88-0046025					
늗	chang			88-0046825					
⊨	return Final	·	Room/suite	•					
L	Ireturn			775-3	<u>48-6060</u>				
_	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,269,343.				
	Ameno	RENO, NV 89502		H(a) is this a group retu	ırn				
	Applic	F Name and address of principal officer DEBBIE CALKINS		for subordinates?	Yes X No				
	pendir	SAME AS C ABOVE		H(b) Are all subordinates incl					
	Tax-exe	empt status 501(c)(3) _X 501(c) ( 5 ) ◀ (insert no.) 4947(a)(1) empt status 501(c)(3)	or 527	7 ''	st (see instructions)				
_		te: N/A	01 02,	H(c) Group exemption					
			OB L Voor	of formation: 1934 M					
	art I		ORIL Year	oriormadon. 1934 M	State of legal domicile: IN V				
ட	<del></del>	Summary							
ŏ	1	Briefly describe the organization's mission or most significant activities							
Governance		LABOR UNION		···.					
Ë	2	Check this box 🕨 🔲 if the organization discontinued its operations or dispos	sed of more	e than 25% of its net ass	ets				
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	7				
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	0				
Activities &	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	10				
itie	6	Total number of volunteers (estimate if necessary)			0				
:≟	-	· · · · · · · · · · · · · · · · · · ·		6					
¥		Total unrelated business revenue from Part VIII, column (C), line 12	•	7a	0.				
	b	Net unrelated business taxable income from Form 990-T, line 34		7b	<u> </u>				
				Prior Year	Current Year				
9	8	Contributions and grants (Part VIII, line 1h)  Received applies revenue (Part VIII, line 2c)		1,185,236.	<u>1,215,372.</u>				
Ę	9	Program service revenue (Part VIII, line 2g)		46,178.	45,251.				
Revenue	10	Investment income (Part VIII, column (A), liness 4, and 7d)		11,513.	2.				
~	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 126)5		14,252.	8,718.				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line (I/2)		1,257,179.	1,269,343.				
_	13	Grants and similar amounts paid (Part IX, column (A), flines (3))		0.	0.				
				5,326.	28,355.				
		Benefits paid to or for members (Part IX, column (A), line 4)							
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		660,981.	673,430.				
Ë	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
×	b	Total fundraising expenses (Part IX, column (D), line 25)	<u>0.</u>						
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		528,340.	<u>528,482.</u>				
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,194,647.	1,230,267.				
	19	Revenue less expenses Subtract line 18 from line 12		62,532.	39,076.				
5	S		Be	eginning of Current Year	End of Year				
Net Assets or	20	Total assets (Part X, line 16)	1	541,992.	543,518.				
Ass	21	Total liabilities (Part X, line 26)		92,555.	55,004.				
et		·							
	<u>22</u> Part II	Net assets or fund balances. Subtract line 21 from line 20 Signature Block		449,437.	488,514.				
ـــــا					<del></del>				
		lties of perjury, I declare that I have examined this return, including accompanying schedule		•	knowledge and belief, it is				
tru	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	hich preparei	r has any knowledge.					
		Call		7/30	115				
Sig	gn	Signature of officer		Date	( –				
Here DEBBIE CALKINS, SECRETARY-TREASURER									
		Type or print name and title							
_		Print/Type preparer's name	<u> </u>	Date Check X	PTIN				
t to significant to the signific									
Pai		DAWN M. ROGERS, CPA		07/21/15 self-employed	P00383379				
	parer	Firm's name DAWN M. ROGERS, CPA		Firm's EIN	48-1291875				
Us	e Only	Firm's address 3060 EL CERRITO PLAZA, #362							
_		EL CERRITO, CA 94530		Phone no. 510	<u>-990-6443</u>				
Ma	y the If	RS discuss this return with the preparer shown above? (see instructions)			X Yes No				

32002	Form <b>990</b> (2014)
4e	Total program service expenses ▶
4d	
4c	(Code) (Expenses \$
4b	(Code) (Expenses \$
4a	(Code) (Expenses \$
4	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
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X No  If "Yes," describe these changes on Schedule O
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O
1	Briefly describe the organization's mission LABOR ORGANIZATION
•	Check if Schedule O contains a response or note to any line in this Part III
	TEAMSTERS, CHAUFFEURS, WAREHOUSEMEN & 990 (2014) HELPERS & MISC. EE'S LOCAL UNION NO. 533 88-0046825 Page 2 t III Statement of Program Service Accomplishments

•			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	!		
	If "Yes," complete Schedule A	1_1_		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		_X_
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	}		
	public office? If "Yes," complete Schedule C, Part I	3		X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, 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	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		_X_
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	Х	
b	Did the organization report an amount for investments other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> X</u>
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		<u> X</u>
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		_X_
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			3.5
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			v
	Schedule D, Parts XI and XII	12a		X
D	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	40-		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	13		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business.	14a		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	145		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990	(2014)

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Part IV Checklist of Required Schedules (continued)

•			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization 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		1	
	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			1
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1		İ
	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	L	<u> </u>
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		L
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	ļ	X
þ	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	<b></b>	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	<del> </del>	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  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32	<del> </del>	X
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	20		X
24	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		A
34	Part V, line 1	24	X	
250	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
35a b		SSA	<del> </del>	
5	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?	330		
30	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	30		t
<i>31</i>	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?	3,		1
50	Note. All Form 990 filers are required to complete Schedule O	38	X	
	11025	<u>, ~~</u>		

Form **990** (2014)

HELPERS & MISC. EE'S LOCAL UNION NO. 533 88-0046825 Form 990 (2014) Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 12 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 10 filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? Х 4a **b** If "Yes," enter the name of the foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5с Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? Х 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). 7 a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c d If "Yes," indicate the number of Forms 8282 filed during the year 7d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter-Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 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 c Enter the amount of reserves on hand 13c X

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14a

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to 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			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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 0.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 0			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4_		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
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 appoint one or			
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	х	
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 reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
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		Х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c		
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 approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	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 arrangement with a			ļ
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶NV			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 T (Section 501(c)(3)s only) a	vailat	le	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l 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 books and records.			
	DEBBIE CALKINS - 775-348-6060			
	240 GENTRY WAY, RENO, NV 89502			
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated
Employees, and Independent Contractors

- Projecto, and marponaria community	
Check if Schedule O contains a response or note to any I	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 organiz  (A)	(B)				<del></del>			(D)	(E)	(F)		
Name and Title	Average	/ // /	Position (do not check more than one					Reportable	Reportable	Estimated		
	hours per	box	, unle	ss pe	rson	s bot	h an	compensation	compensation	amount of		
	week		cer an	dad	recto	or/trus	tee)	from	from related	other		
	(list any	recto						the	organizations	compensation		
	hours for related	p.o.	<u>a</u>			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the		
	organizations	ruste	Itrus		, a	ngen		(88-2/1099-181130)		organization and related		
	below	dualt	thona	_	l e	st co	<b>.</b>			organizations		
	line)	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Forme			51 <b>9</b> 41114		
(1) GARY WATSON	40.00											
PRESIDENT				Х				85,453.	0.	43,596.		
(2) MICHAEL SEALY	4.50		ļ									
VICE-PRESIDENT			_	X	ļ	ļ		84,453.	0.	43,596.		
(3) DEBBIE CALKINS	45.00											
SECRETARY-TREASURER				X				99,544.	0.	43,596.		
(4) JOHN PATTERSON	4.50	1										
RECORDING SECRETARY		<u> </u>		X		<u> </u>		4,200.	0.	0.		
(5) TIM RENSHAW	4.50	1										
TRUSTEE		_	_	Х				4,200.	0.	0.		
(6) DALEEN SMOTHERS	4.50	-							_	_		
TRUSTEE		—		Х		ļ		6,546.	0.	0.		
(7) JEAN PRINA	4.50	4						4 400				
TRUSTEE	4.50	₩	_	Х				1,400.	0.	0.		
(8) DANA ELWELL	4.50	-							•	_		
TRUSTEE (PAST)		₩	<u> </u>	<u> </u>	ļ —	<del> </del>		2,800.	0.	0.		
		-			ŀ							
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Form 990 (2014)

\$100,000 of compensation from the organization

•		Check if Schedule O cont	ains a resnonse	or note to any lu	ne in this Part VIII			
		GROOK II GGROUDIE G COIT	ams a response	or note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b 1,	215,372.				
S, E	С	Fundraising events	1c	•				
a it	d	Related organizations	1d					
S.E	е	Government grants (contribut	ions) 1e		1			
r i	f	All other contributions, gifts, gran	ts, and					
14 ib		similar amounts not included abo	ve 1f					
Pa	g	Noncash contributions included in lines	1a-1f \$					
38	h	Total. Add lines 1a-1f		<b></b>	1,215,372.			
1				Business Code			•	
စ္ပ	2 a	<b>ADMINISTRATIVE</b>	FEES	900099	45,179.	45,179.		
ه څ	b	SERVICE FEES		900099	72.	72.		
Program Service Revenue	c							
eve eve	d							
<u>6</u>	е							
<u>-</u>	f	All other program service reve	enue					
$\Box$	g	Total. Add lines 2a-2f			45,251.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		<b>&gt;</b>	2.			2.
	4	Income from investment of ta	x-exempt bond p	oroceeds >				
	5	Royalties		<u> </u>			<del> </del>	<u> </u>
			(ı) Real	(II) Personal				
	6 a							
	b	•						
ľ		Rental income or (loss)		<u> </u>				
		Net rental income or (loss)	<u> </u>	<b>_</b> _		-		
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	D	Less, cost or other basis						
	_	and sales expenses			-			
	_	Gain or (loss)		L	-			
	d	Net gain or (loss) Gross income from fundraisin	a avente (not					<del>                                     </del>
Jue	0 4	including \$	of					
ķ		contributions reported on line						
Æ		Part IV, line 18	а					
Other Reven	b	Less: direct expenses	b	<del></del>				
0		Net income or (loss) from fund		<b>D</b>	1			
1		Gross income from gaming ac	_					
		Part IV, line 19	а					
	b	Less direct expenses	b		1			
	С	Net income or (loss) from gan	ning activities		]			
		Gross sales of inventory, less	-					
		and allowances	а					
1	b	Less cost of goods sold	b			•		
L	С	Net income or (loss) from sale	s of inventory	▶				
		Miscellaneous Revenu	ю	Business Code		T		
- 1		FRAUD RECOVERY		900099	7,000.	7,000.		
	b	SALE OF PROMOTI	ONAL IT	900099	1,423.	1,423.	-	
1	С	MAILING LABELS	<del></del>	900099	295.	295.	<del></del>	<u> </u>
		All other revenue						<u> </u>
	_	Total. Add lines 11a 11d			8,718.	F2 262		
432009	12	Total revenue. See instructions.		<b>&gt;</b>	1,269,343.	53,969.	0	Form <b>990</b> (2014)

Sect	ion 501(c)(3) and 501(c)(4) organizations must com			omplete column (A)	
	Check if Schedule O contains a respon			1	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	ındıvıduals See Part IV, line 22	7. 12			
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	28,355.			
5	Compensation of current officers, directors,				
	trustees, and key employees	419,384.			
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	130,059.			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	36,170.	<del></del>		
9	Other employee benefits	51,442.	<del>, </del>		
10	Payroll taxes	36,375.			<del></del>
11	Fees for services (non-employees).				
а	Management	25 225			
b	Legal	35,305.			
C	Accounting	13,700.	<del> </del>		
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	·- <u>-</u> ·	<del></del> -		
g	Other. (If line 11g amount exceeds 10% of line 25,	0 201			
	column (A) amount, list line 11g expenses on Sch 0.)	8,391.			
12	Advertising and promotion	12 600			
13	Office expenses	42,600.			·
14	Information technology		<del>_</del>		
15	Royalties Occupancy	7,224.			
16 17	Travel	28,849.			
18	Payments of travel or entertainment expenses	20,049.			<del></del>
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,129.			
20	Interest	1,811.			
21	Payments to affiliates	305,806.	· · · · · · · · · · · · · · · · · · ·		
22	Depreciation, depletion, and amortization	31,069.	<del></del>		1731
23	Insurance	3,870.			
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	AUTOMOBILE EXPENSES	22,018.			
b	PROMOTIONAL ITEMS FOR M	9,193.			
С	EDUCATION & PUBLICITY	3,689.			
d	COMMUNITY OUTREACH	2,802.			
е	All other expenses	6,026.			
25	Total functional expenses. Add lines 1 through 24e	1,230,267.			
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 I if following SOP 98-2 (ASC 958-720)	}		į l	

Form 990 (2014)
Part X Balance Sheet

Pan		Dalance Sneet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X	<del></del>	<del></del>	
					<b>(A)</b> Beginning of year		(B) End of year
	1	Cash · non-interest-bearing			150.	1	150.
	2	Savings and temporary cash investments	184,143.	2	216,739.		
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and for	ormer of	ficers, directors,			
		trustees, key employees, and highest compensation	ated em	ployees. Complete			
-		Part II of Schedule L				5	·····
	6	Loans and other receivables from other disquali	fied per	sons (as defined under			
i		section 4958(f)(1)), persons described in section	1 4958(	c)(3)(B), and contributing			
		employers and sponsoring organizations of sect	tion 501	(c)(9) voluntary			
ध		employees' beneficiary organizations (see instr)	Compl	ete 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	
	10a	Land, buildings, and equipment cost or other					
İ		basis Complete Part VI of Schedule D	10a	480,889.		1	
1	b	Less: accumulated depreciation	10b	154,260.	357,699.	10c	326,629.
	11	Investments - publicly traded securities			<u> </u>	11	
	12	Investments - other securities. See Part IV, line	11			12	<u></u>
	13	Investments - program-related See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equ	541,992.	16	<u>543,518.</u>		
	17	Accounts payable and accrued expenses			24,741.	17	<u> 26,335.</u>
	18	Grants payable				18	
	19	Deferred revenue				19	<del></del>
	20	Tax-exempt bond liabilities		<u> </u>		20	
	21	Escrow or custodial account liability. Complete		Г		21	
es	22	Loans and other payables to current and former					
<b>E</b>		key employees, highest compensated employee	es, and	disqualified persons			
Liabilities		Complete Part II of Schedule L		-		_22	
-	23	Secured mortgages and notes payable to unrela		· · · · · · · · · · · · · · · · · · ·	67,814.	23	28,669.
	24	Unsecured notes and loans payable to unrelate		r		24	
	25	Other liabilities (including federal income tax, pa	•				
1		parties, and other liabilities not included on lines	s 17·24)	Complete Part X of		_	
		Schedule D		-	00 555	25	FF 004
$\longrightarrow$	<u> 26</u>	Total liabilities. Add lines 17 through 25			92,555.	26	55,004.
		Organizations that follow SFAS 117 (ASC 958		k here ▶ LX and			
Ses		complete lines 27 through 29, and lines 33 and	id 34.		440 437		400 E14
<u>a</u>	27	Unrestricted net assets		}	449,437.	27	488,514.
Ba	28	Temporarily restricted net assets		}		28	
힡	29	Permanently restricted net assets	00 050	<b>.</b>		29	
띤		Organizations that do not follow SFAS 117 (A	SC 958	s), cneck nere			
0	00	and complete lines 30 through 34.		Ì			
set	30	Capital stock or trust principal, or current funds				30	
As	31	Paid-in or capital surplus, or land, building, or ed				31	
<b>-</b> ¥ ∣	32	Retained earnings, endowment, accumulated in	icoine, (	or other lunus	449,437.	32	100 511
-	33	Total net assets or fund balances		}	541,992.	33	488,514. 543,518.
	<u>34</u>	Total liabilities and net assets/fund balances			J#1,JJ4.	34	Form <b>990</b> (2014)

Form **990** (2014)

	1990 (2014) HELPERS & MISC. EE'S LOCAL UNION NO. 533	88-004	6825	Pag	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets	_			
`	Check if Schedule O contains a response or note to any line in this Part XI				$\mathbf{x}$
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,26	9,3	43.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,23	0,2	67.
3	Revenue less expenses Subtract line 2 from line 1	3	3	9,0	76.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	44	9,4	37.
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			1.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	48	8,5	14.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990.  Cash Cash Counting method used to prepare the Form 990.	0			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	<u>X</u>	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs,			
	consolidated basis, or both				
	Separate basis Consolidated basis X Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,	i l		
	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 Scho	edule O			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	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 requ	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		<u> </u>

432012 11-07-14 Form **990** (2014)

### **SCHEDULE 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.

OMB No 1545-0047 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

	Section 501(a)(4) (5) an (6) and an and	tioner Complete Boot III				
	Section 501(c)(4), (5), or (6) organiza ie of organization ጥፑልሐርጥፑ		WADDHOLLCOM	ZNT C	Emple	oyer identification number
		RS, CHAUFFEURS,			Linbid	<u>-</u>
Pa	rt I-A Complete if the org	<u>&amp; MISC. EE'S LO</u> ganization is exempt und	der section 501/c	Nor is a section 5	27 01	88-0046825
	it i A   Complete ii the or	gamzation is exempt and	der section oon (o	or is a section o	27 01	gamzation.
_	Describe a describe at the access					
	Provide a description of the organization	zation's direct and indirect politi	cai campaign activities	sin Part IV		^
	Political expenditures				<b>&gt;</b> \$	0.
3	Volunteer hours					0.
Pa	rt I-B Complete if the org	ganization is exempt un	der section 501(c	)(3).		
1	Enter the amount of any excise tax			K-1	▶\$	<del>-,.</del>
	Enter the amount of any excise tax	•		55		<del>*</del>
	If the organization incurred a section					Yes No
	Was a correction made?	,				Yes No
b	If "Yes," describe in Part IV					
	rt I-C Complete if the org	ganization is exempt un	der section 501(c	), except section	501(	c)(3).
1	Enter the amount directly expende	d by the filing organization for se	ection 527 exempt fun	ction activities	▶\$	
	Enter the amount of the filing organ					
	exempt function activities		ŭ		▶\$	
3	Total exempt function expenditures	Add lines 1 and 2 Enter here	and on Form 1120-PO	L,		
	line 17b				▶\$	
4	Did the filing organization file Form	1120-POL for this year?				Yes No
	Enter the names, addresses and ea		IN) of all section 527 p	political organizations to	which	n the filing organization
	made payments For each organization					
	contributions received that were pr	omptly and directly delivered to	a separate political or	ganization, such as a s	eparat	e segregated fund or a
	political action committee (PAC). If	additional space is needed, pro	vide information in Par	rt IV		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid f	rom	(e) Amount of political
	• •	, ,	(3)	filing organization		contributions received and
				funds. If none, ente	er ∙0∙.	promptly and directly
						delivered to a separate political organization
						If none, enter -0-
			_			-

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

Schedule C (Form 990 or 990-EZ) 2014

Schedule C (Form 990 or 990-EZ) 2014 H Part II-A Complete if the orga	ELPE nizatio	RS & M on is exer	ISC. EE'S I	COCAL UNION I on 501(c)(3) and file	NO. 53 88- ed Form 5768 (	0046825 Page : election under
				n Part IV each affiliated	group member's na	me, address, EIN,
expenses, and share			• •			
B Check ► if the filing organization  Limits  (The term "expendit	on Lob	bying Exper	nditures		(a) Filing organization's totals	(b) Affiliated group totals
4 a Total labburgs augustatives to influe		l.a. a /a				
1a Total lobbying expenditures to influe	•			+		
b Total lobbying expenditures to influe		_	ly (direct lobbying)	<u> </u>		
c Total lobbying expenditures (add line		u 10)		-		
d Other exempt purpose expenditures		o 10 and 1d	١	<u> </u>		
<ul> <li>e Total exempt purpose expenditures</li> <li>f Lobbying nontaxable amount. Enter</li> </ul>	•		•	th columns		
						<del></del>
If the amount on line 1e, column (a) or Not over \$500,000	(0) 18.		bying nontaxable an			
	000		the amount on line 16			
Over \$500,000 but not over \$1,000, Over \$1,000,000 but not over \$1,50			O plus 15% of the ex			•
Over \$1,500,000 but not over \$1,50	·			cess over \$1,000,000.		
	00,000			ess over \$1,500,000		
Over \$17,000,000		\$1,000,0	,00			
Crassroots postavable amount (astr	r 2504 o	f line 1fl	······································			
g Grassroots nontaxable amount (ente		•		<u> </u>	<del></del>	<del></del>
h Subtract line 1g from line 1a. If zero				<u> </u>	<del></del>	<del> </del>
i Subtract line 1f from line 1c. If zero	· ·		luna 4. dud tha aumania	L		
j If there is an amount other than zero reporting section 4911 tax for this year		er line in ori	ine II, did the organiz	zation file Form 4720		Yes N
(Some organizations that	nt made	a section 50		• •	f the five columns	
	Lobi	ying Exper	ditures During 4-Ye	ar Averaging Period	- <del></del>	· • · · · · · · · · · · · · · · · · · ·
Calendar year (or fiscal year beginning in)	(a)	2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))				1		
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 HELPERS & MISC. EE'S LOCAL UNION NO. 53 88-0046825 Page 3

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

of the lo	h "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	<del></del>	a)	· '	b)
	bbying activity	Yes	No	Am	ount
1 D	uring the year, did the filing organization attempt to influence foreign, national, state or				
	cal legislation, including any attempt to influence public opinion on a legislative matter				
or	referendum, through the use of:				
	plunteers?	]			
b Pa	ald staff or management (include compensation in expenses reported on lines 1c through 1))?			1	
	edia advertisements?				
d M	ailings to members, legislators, or the public?				
	ublications, or published or broadcast statements?				
	rants to other organizations for lobbying purposes?				
	rect contact with legislators, their staffs, government officials, or a legislative body?				
-	allies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				_
	ther activities?				
=	otal. Add lines 1c through 1i				
-	id the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	"Yes," enter the amount of any tax incurred under section 4912				
	"Yes," enter the amount of any tax incurred by organization managers under section 4912				
	the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		<del></del>		
	II-A Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c	)(5), or s	ection	
	501(c)(6).		,, -,,		
				Vac	No
				Yes	1
1 W	ere substantially all (90% or more) dues received nondeductible by members?		1	res	+
	ere substantially all (90% or more) dues received nondeductible by members?				+
2 Di 3 Di	id the organization make only in-house lobbying expenditures of \$2,000 or less?  Id the organization agree to carry over lobbying and political expenditures from the prior year?  II-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered		2 3 )(5), or s	X	_X
2 Di 3 Di Part I	d the organization make only in-house lobbying expenditures of \$2,000 or less?  Id the organization agree to carry over lobbying and political expenditures from the prior year?  II-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."		2 3 )(5), or s	X	X
2 Di 3 Di Part I	id the organization make only in-house lobbying expenditures of \$2,000 or less?  Id the organization agree to carry over lobbying and political expenditures from the prior year?  II-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  ues, assessments and similar amounts from members	d "No," O	2 3 )(5), or se R (b) Pa	X	X
2 Di 3 Di Part I 1 Di 2 Se	d the organization make only in-house lobbying expenditures of \$2,000 or less?  Id the organization agree to carry over lobbying and political expenditures from the prior year?  II-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  ues, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	d "No," O	2 3 )(5), or se R (b) Pa	X	X
2 Di 3 Di Part II 1 Di 2 Se	d the organization make only in-house lobbying expenditures of \$2,000 or less?  Id the organization agree to carry over lobbying and political expenditures from the prior year?  II-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  ues, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	d "No," O	2 3 )(5), or s R (b) Pa	X	X
2 Di 3 Di Part I	d the organization make only in-house lobbying expenditures of \$2,000 or less?  Id the organization agree to carry over lobbying and political expenditures from the prior year?  II-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  ues, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	d "No," O	2 3)(5), or so R (b) Pa	X	X
2 Di 3 Di Part II 1 Di 2 Se a Ci b Ci	id the organization make only in-house lobbying expenditures of \$2,000 or less?  Id the organization agree to carry over lobbying and political expenditures from the prior year?  II-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  ues, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  urrent year arryover from last year	d "No," O	2 3 )(5), or so R (b) Pal	X	X
2 Di 3 Di 2 Si 2 Si 6 Ci 5 Ci	id the organization make only in-house lobbying expenditures of \$2,000 or less?  Id the organization agree to carry over lobbying and political expenditures from the prior year?  II-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  ues, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  urrent year arryover from last year ortal.	d "No," O	2 3 )(5), or so R (b) Par 1 2a 2b 2c	X	X
2 Di 3 Di 2 Si 2 Si 6 Ci 5 Ci 3 Ai	id the organization make only in-house lobbying expenditures of \$2,000 or less?  Id the organization agree to carry over lobbying and political expenditures from the prior year?  II-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Lues, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Lurrent year arryover from last year otal  Organization make only in-house lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	d "No," O	2 3 )(5), or so R (b) Pal	X	X
2 Di 3 Di Part II 1 Di 2 Se a Ci b Ci c To 3 Ae 4 If	Id the organization make only in-house lobbying expenditures of \$2,000 or less?  Id the organization agree to carry over lobbying and political expenditures from the prior year?  II-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answ	d "No," O	2 3 )(5), or so R (b) Par 1 2a 2b 2c	X	X
2 Di 3 Di Part II 2 Se 2 Ex a Ci b Ci c To 3 Ae 4 If	Id the organization make only in-house lobbying expenditures of \$2,000 or less?  Id the organization agree to carry over lobbying and political expenditures from the prior year?  II-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B Complete if the organization feither (a) BOTH Part III-A, lines 1 and 2, are answered answered answered answered answered answered "Yes."  III-B Complete if the organization speed to carry over lobbying and political expenditures (do not include answered	d "No," O	2 3 )(5), or s R (b) Pa	X	X
2 Di 3 Di Part II 1 Di 2 Se a Ci b Ci c To 3 Ae 4 If	Id the organization make only in-house lobbying expenditures of \$2,000 or less?  Id the organization agree to carry over lobbying and political expenditures from the prior year?  II-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answ	d "No," O	2 3 )(5), or so R (b) Par 1 2a 2b 2c	X	X

### **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.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

TEAMSTERS, CHAUFFEURS, WAREHOUSEMEN & HELPERS & MISC. EE'S LOCAL UNION NO. 533

**Employer identification number** 88-0046825

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds
•	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	•	
•	for charitable purposes and not for the benefit of the donor of		-
	impermissible private benefit?	or definer devision, or for any other purpose	Yes No
Pai		ganization answered "Yes" to Form 990. F	
1	Purpose(s) of conservation easements held by the organizat		art (v, mio)
•	Preservation of land for public use (e.g., recreation or e		corically important land area
	Protection of natural habitat	<del></del>	tified historic structure
	Preservation of open space		and victorio or dotalo
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	ned conservation contribution in the form	of a conservation easement on the last
	day of the tax your		Held at the End of the Tax Year
9	Total number of conservation easements		2a
h	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic sti	ricture included in (a)	2c
4	Number of conservation easements included in (c) acquired	` '	
u	listed in the National Register	arter of 17700, and not off a mistoric struct	2d
3	Number of conservation easements modified, transferred, re	leased extinguished or terminated by the	·····
ŭ	year	icasca, extinguished, or terminated by the	e organization during the tax
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe		
Ū	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) above		· · · · · · · · · · · · · · · · · · ·
Ŭ	and section 170(h)(4)(B)(ii)?	To dation and requirements or decisin 170	Yes No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense	
Ŭ	include, if applicable, the text of the footnote to the organiza		
	conservation easements	mon s manolal statements that describes	the organization s accounting for
Pai	t III Organizations Maintaining Collections o	f Art. Historical Treasures, or C	Other Similar Assets.
L	Complete if the organization answered "Yes" to Form		
	If the organization elected, as permitted under SFAS 116 (As	SC 958), not to report in its revenue state	ment 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 descr		,
b	If the organization elected, as permitted under SFAS 116 (AS		t and balance sheet works of art, historical
•	treasures, or other similar assets held for public exhibition, e	•, •	·
	relating to these items	dadation, or rescaron in farther and or pu	iblic service, provide the following amounts
	(i) Revenue included in Form 990, Part VIII, line 1		<b>▶</b> ¢
	(ii) Assets included in Form 990, Part X		► \$ ► \$
•	If the organization received or held works of art, historical tre	pactures or other similar assets for francis	
2	the following amounts required to be reported under SFAS 1		a gair, provide
_	Revenue included in Form 990, Part VIII, line 1	TO (100 300) relating to these items	<b>~</b> •
a	Assets included in Form 990, Part X		► \$ ► \$
IJ	naseta indiuded irri orini aad, Fart A		Ψ Ψ

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

Schedule D (Form 990) 2014

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Sche <b>Par</b>		& MISC. E								
<u> </u>										
3	Using the organization's acquisition, accessi (check all that apply)	on, and other record	is, cneci	cany or the	tollowing tha	it are a si	gnificant	use of its	collection	tems
а	Public exhibition		. —	l oan or ovo	hange progra	ame.				
-	Scholarly research	ď		Coan or exc Other	nange progra	ams				
b	Preservation for future generations	е	,	Other						
1	Provide a description of the organization's co	alloctions and avala	n how th	ov further t	ho organizati	on's over	nnt nurn	oso in Bar	+ VIII	
5	During the year, did the organization solicit of			=	_			USE III Fai	t Alli.	
3	to be sold to raise funds rather than to be m					ei siiililai	assets		Yes	☐ No
Par	t IV Escrow and Custodial Arran					"Ves" to i	Form 990	) Part IV		<u> </u>
	reported an amount on Form 990, Pa		eto ii tile	organizatio	ii aiisweied	163 (0)	01111 330	), r art iv,	iiic 0, 0i	
1a	Is the organization an agent, trustee, custod		diary for	contribution	ns or other as	sets not	included		~	
	on Form 990, Part X?							Г	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	able				1	00	
_		and complete are							Amount	
С	Beginning balance						1c		, , , , , , , , , , , , , , , , , , , ,	
	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for e	escrow or c	ustodial acco	unt liabili	ty?		Yes	No
	If "Yes," explain the arrangement in Part XIII									
Par							0.			
	•	(a) Current year	<b>(b)</b> P	rior year	(c) Two year	rs back	(d) Three	years back	(e) Four y	ears 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 cur	rent year end baland	ce (line 1	g, column (a	a)) held as					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%								
За	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	ınd admınıste	red for th	ne organi	zation	_	<del></del>
	by <sup>.</sup>								_ Y	es No
	(i) unrelated organizations								3a(ı)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(II), are the related organization	•							_3b	
4	Describe in Part XIII the intended uses of the		owment :	funds						
Pai	t VI Land, Buildings, and Equipn									
	Complete if the organization answere									
	Description of property	(a) Cost or of basis (investi		, , ,	t or other (other)		cumulat reciation	I .	(d) Book	value
1a	Land				7,453.		•		87	,453.
	Buildings				0,302.		85,9	35.		,367.
	Leasehold improvements									
	Equipment			11	0,728.		29,5	24.	81	,204.
	Other				2,406.		38,8			,605.
	. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	X, colun							,629.

Schedule D (Form 990) 2014

HELPERS & MISC.

EE'S LOCAL UNION NO.

533

88-0046825 Page 3

Part VII Investments - Other Securities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11b See Form 990, Part X, line 12 (a) Description of security or category (including name of security) (b) Book value (c) Method of valuation Cost or end-of-year market value (1) Financial derivatives (2) Closely-held equity interests Other (B) (C) (D) (E) (F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related. Complete if the organization answered "Yes" 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. 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)(2)(3)(4) (5) (6) (7) (8)(9)Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25 (a) Description of liability (b) Book value (1) Federal income taxes (2) (3)(4) (5) (6) (7)(8) (9)Total. (Column (b) must equal Form 990, Part X, col (B) line 25)  $\triangleright$ 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 D (Form 990) 2014

TEAMSTERS, CHAUFFEURS, WAREHOUSEMEN & HELPERS & MISC. EE'S LOCAL UNION NO. 533 Schedule D (Form 990) 2014 88-0046825 Page 4 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total revenue, gains, and other support per audited financial statements 1 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments 2a Donated services and use of facilities 2b b Recoveries of prior year grants 2c Other (Describe in Part XIII) 2d А Add lines 2a through 2d Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIII) Add lines 4a and 4b 4c Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990. Part IX, line 25: Donated services and use of facilities 2a 2b Prior year adjustments b Other losses 2c Other (Describe in Part XIII) 2d Add lines 2a through 2d е Subtract line 2e from line 1 3 3 Amounts included on Form 990, Part IX, line 25, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII) c Add lines 4a and 4b 4c Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

432054 10-01-14

### **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.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

TEAMSTERS, CHAUFFEURS, WAREHOUSEMEN & HELPERS & MISC. EE'S LOCAL UNION NO.

**Employer identification number** 88-0046825

FORM 990, ITEM K, OTHER FORM OF ORGANIZATION: LABOR ORGANIZATION FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION IS A LABOR UNION REPRESENTING MEMBERS COVERED BY COLLECTIVE BARGAINING AGREEMENTS NEGOTIATED BY THE UNION. FORM 990, PART VI, SECTION A, LINE 7A: ALL EXECUTIVE BOARD MEMBERS ARE ELECTED BY THE LOCAL'S MEMBERSHIP. FORM 990, PART VI, SECTION A, LINE 7B: THE EXECUTIVE BOARD MAY NOT TERMINATE OR MERGE THE ORGANIZATION WITHOUT MEMBERSHIP APPROVAL. FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTANT AND PROVIDED TO THE EXECUTIVE BOARD FOR APPROVAL PRIOR TO SUBMISSION TO THE IRS. FORM 990, PART VI, SECTION B, LINE 15: OFFICERS' AND KEY EMPLOYEES' WAGES ARE BASED ON HOURLY RATES STATED IN A COLLECTIVE BARGAINING AGREEMENT. FORM 990, PART VI, SECTION C, LINE 19: COPIES OF THE LOCAL'S GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE UPON WRITTEN REQUEST SENT TO THE LOCAL'S ADMINISTRATIVE OFFICES.

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

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

SCHEDULE R

(Form 990)

Complete if the organization answered "Y.

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 Open to Public

Inspection

OMB No 1545-0047

▶Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. TEAMSTERS, CHAUFFEURS, WAREHOUSEMEN &

HELPERS & MISC. EE'S LOCAL UNION NO. 533

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 88-0046825

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

(g) Section 512(b)(13) ٥ × controlled entity? Direct controlling Yes entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year Direct controlling entity End-of-year assets status (if section Public charity 501(c)(3)) Total income Exempt Code section ਉ DISTRICT OF COLUMBIA 501(C) Legal domicile (state or Legal domicile (state or foreign country) foreign country) Primary activity Primary activity LABOR ORGANIZATION INTERNATIONAL BROTHERHOOD OF TEAMSTERS Name, address, and EIN (if applicable) 53-0215427, 25 LOUISIANA AVE., NW Name, address, and EIN of related organization of disregarded entity WASHINGTON DC 20001 Part II

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

432161 08-14-14 LHA

Schedule R (Form 990) 2014

성 CHAUFFEURS, WAREHOUSEMEN TEAMSTERS, Schedule R (Form 990) 2014

533 HELPERS & MISC. EE'S LOCAL UNION NO.

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

Page 2

88-0046825

ما ا		1			ı					l		
(j) (k) General or Percentage managing ownership	-											
Perc						 					 	
(j) neral or maging	Yes No		 			 	 	 			 	
<u> </u>	•೮ ೯					 	 	 			 -	
·UBI	106 106											
ode (	Sch Form											
	20 of Schedule 15 K-1 (Form 1065) <b>Y</b>					 		 			 	
(h) Disproportonate	Yes No											
	•											
(g) nare of -of-vea	sets											
(g) Share of end-of-vear	as											
(f) Share of total												
(f) are of												
ome ted.	under 14)											
s) ant inc	m tax 512-5			i								
(e) ominan	ed fro tions											
Pred (rel	excluded from tax under sections 512-514)											
(d) Direct controlling entity												
(d) contro												
ect co	i											
ļ			 			 		 		_		
CC) Legal domicile	state or oreign ountry)											
	<u> </u>									_		
(b) Primary activity												
(b)												
Prima												
			 	I		ı		1	I			
EIN												
(a) Name, address, and EIN of related organization								<u> </u>				
(a) ddres	; }											
me, a												
N E	5											

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. Part IV

_				_						
	tion (13) olled ty?	Yes No								
ح ا	Section 512(b)(13) controlled entity?	Yes								
3	e o									
(6)	of ear	433613								
	Share of total income							•		
(e)	(Y)	or tradely								
(p)	olling									
(0)	Legal domicile (state or foreign	country)								
(q)	Primary activity									
(a)	Name, address, and EIN of related organization									

Schedule R (Form 990) 2014

432162 08-14-14

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

Note Complete line 1 if any entity is listed in Darts II III or IV of this schedule				Yes	Ž
Total Duning the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	lated organizations listed	in Parts II-IV?	3	-
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	>			1a	×
<b>b</b> Gift, grant, or capital contribution to related organization(s)				1b	×
c Gift, grant, or capital contribution from related organization(s)				10	×
<b>d</b> Loans or loan guarantees to or for related organization(s)				1d	×
e Loans or loan guarantees by related organization(s)				10	×
1 Durind company of topical programme (A)				7	>
ב היווספווטא ווסוו יפומנפט סוטמו ווגמנוסווא)				= .	4
				19	×
h Purchase of assets from related organization(s)				£	×
i Exchange of assets with related organization(s)				<b>;</b> =	×
j Lease of facilities, equipment, or other assets to related organization(s)				į-	×
k Lease of facilities, equipment, or other assets from related organization(s)				¥	×
I Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			=	×
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			ŧ	×
n Shanng of facilities, equipment, mailing lists, or other assets with related organization(s)	(s)uoi			ŧ	×
o Sharing of paid employees with related organization(s)				9	×
<ul> <li>Reimbursement paid to related organization(s) for expenses</li> </ul>				₽	×
				14	×
r Other transfer of cash or property to related organization(s)				1r X	
s Other transfer of cash or property from related organization(s)				1s	×
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	is line, including covered	relationships and transaction thresholds		
(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved	olved	
(1) INTERNATIONAL BROTHERHOOD OF TEAMSTERS	R	268,473.PER	PER CAPITA FEE		
(2)					
(3)					
(4)					
(5)					
(9)					
432163 08-14-14	24		Schedule R	Schedule R (Form 990) 2014	2014

88-0046825

TEAMSTERS, CHAUFFEURS, WAREHOUSEMEN & HELPERS & MISC. EE'S LOCAL UNION NO. 533

Schedule R (Form 990) 2014

Page 4

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

tage					
(k) ercent owners					
aging C	2			 	
Genera Manag Dartne	3				
Dispupor- Dispupor- Code V-UBI Seneral or Percentage amount in box 20 managing ownership Ase No. (Form 1055)					
Orspropor- tonate allocations?	2				
Osb S	<u> </u>	 			
(g) Share of end-of-year assets					
(f) Share of total income					
Are all partners sec 501(c)(3) orgs 7	3				
(d) Predominant income in (related, unrelated, excluded from tax under sections, 512-514)					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					
(a) (b) (c) (d) (d)  Name, address, and EIN Primary activity Legal domicile (related, unrelated, of entity country) sections 512-514)					

		TEAMSTE	RS,	CHAU	FFEURS	, WAR	EHOUSEI	MEN 8	E		
Schedule R	(Form 990) 2014	HELPERS	&	MISC.	EE'S	LOCAL	UNION	NO.	53388-	0046825	Page 5
Part VII	Supplemental Infor	mation									
	Provide additional informa	tion for respons	es to	questions	on Schedule	e R (see in	structions).			· · · · · · · · · · · · · · · · · · ·	
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### Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.lrs.gov/form8868 .

OMB No 1545-1709

	are filing for an Automatic 3-Month Extension, comple				<b>!</b>	▶ X
<ul><li>If you</li></ul>	ı are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of t	his form)		
Do not	complete Part II unless you have already been granted	an automa	itic 3-month extension on a previous	ly filed Fo	rm 8868	
Electro	nic filing (e-file) . You can electronically file Form 8868 if	you need a	a 3-month automatic extension of tim	ne to file (I	6 months for a c	orporation
required	to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically fil	le Form 8	868 to request a	an extension
of time	to file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for T	ransfers .	Associated With	ı Certain
Persona	al Benefit Contracts, which must be sent to the IRS in pag	er format	(see instructions) For more details of	n the elec	ctronic filing of t	his form,
	w irs gov/efile and click on e-file for Charities & Nonprofits		· · · · · · · · · · · · · · · · · · ·			
Part	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies nee	eded).		
A corpo	ration required to file Form 990-T and requesting an auto	matic 6-mo	onth extension - check this box and o	complete		
Part I o	nly					▶ □
	r corporations (including 1120-C filers), partnerships, REN come tax returns	fiCs, and t	rusts must use Form 7004 to reques	_	sion of time er's identifying	number
Type or	Name of exempt organization or other filer, see instru	ictions			r identification n	
print	TEAMSTERS, CHAUFFEURS, WAR		EMEN &	' '		` ,
	HELPERS & MISC. EE'S LOCAL				88-0046	825
File by the due date f	Number desired and account to the BOL			Social se	curity number (	
filing your return Sec	C/O DAWN M. ROGERS CPA -	4100	REDWOOD RD #10-343		,	,
instruction		oreign add	ress, see instructions		·	
	January, Cit 94019		1 3k t 200 0 0 t 1 0 0 0			
Enter th	e Return code for the return that this application is for (file	e a separa	te application for each return)			0 1
Applica	tion	Return	Application			Return
Is For		Code	Is For			Code
Form 99	90 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 99	90-BL	02	Form 1041-A			08
Form 47	720 (ındıvıdual)	03	Form 4720 (other than individual)			09
Form 99	90-PF	04	Form 5227			10
Form 99	90-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	90-T (trust other than above)	06	Form 8870			12
	DEBBIE CALKINS					
• The	books are in the care of > 240 GENTRY WAY	- RE	NO. NV 89502			
	phone No ► 775-348-6060		Fax No ▶			
	organization does not have an office or place of busines	s in the Ur				
	s is for a Group Return, enter the organization's four digit			this is fo	r the whole grou	in, check this
box 🕨	. If it is for part of the group, check this box	- ·			-	• •
	request an automatic 3-month (6 months for a corporation	_			OIO LIIO OXIOIIOI	<u> </u>
•			tion return for the organization name		The extension	
- IS	for the organization's return for:	. organiza	tion rotati for the organization name	G GDOVO	THE EXTENSION	
	X calendar year 2014 or					
	tax year beginning	an	d ending			
	tax your bogining	, a			<u> </u>	
2 If	the tax year entered in line 1 is for less than 12 months, o	heck reas	on Initial return I	nal retur	n	
	Change in accounting period				r <del></del>	
3a If	this application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any			
_	onrefundable credits. See instructions			3a	\$	0.
	this application is for Forms 990-PF, 990-T, 4720, or 6069					
<u>e</u> :	stimated tax payments made. Include any prior year over	payment a	lowed as a credit	3b	\$	0.
с В	alance due. Subtract line 3b from line 3a. Include your pa	ayment wit	h this form, if required,			
	y using EFTPS (Electronic Federal Tax Payment System)			3c	\$	0.
Caution Instruct	<ul> <li>If you are going to make an electronic funds withdrawal ions</li> </ul>	(direct de	bit) with this Form 8868, see Form 8	453-EO a	nd Form 8879-E	O for payment
LHA	For Privacy Act and Paperwork Reduction Act Notice,	see instr	uctions.		Form <b>886</b>	B (Rev 1-2014)