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Form 990



Department of the Treasury  
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

▶ Information about Form 990 and its instructions is at [www IRS gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

2015

Open to Public Inspection

**A** For the 2015 calendar year, or tax year beginning 01-01-2015 , and ending 12-31-2015

**B** Check if applicable  
☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return/terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization  
INTERNATIONAL BROTHERHOOD OF TEAMSTERS  
  
Doing business as  
  
Number and street (or P O box if mail is not delivered to street address) Room/suite  
25 LOUISIANA AVE NW  
  
City or town, state or province, country, and ZIP or foreign postal code  
WASHINGTON, DC 200012198  
  
**F** Name and address of principal officer  
ken hall  
25 LOUISIANA AVE NW  
WASHINGTON, DC 200012198

**D** Employer identification number  
  
53-0215427  
  
**E** Telephone number  
  
(202) 624-6800  
  
**G** Gross receipts \$ 187,989,402

**H(a)** Is this a group return for subordinates? ☐ Yes ☒ No  
**H(b)** Are all subordinates included? ☐ Yes ☐ No  
If "No," attach a list (see instructions)  
**H(c)** Group exemption number ▶ 0320

**I** Tax-exempt status ☐ 501(c)(3) ☒ 501(c) ( 5 ) ◀(insert no ) ☐ 4947(a)(1) or ☐ 527

**J** Website: ▶ WWW TEAMSTER ORG

**K** Form of organization ☐ Corporation ☐ Trust ☒ Association ☐ Other ▶  
**L** Year of formation 1903 **M** State of legal domicile DC

Part I Summary

Activities & Governance

**1** Briefly describe the organization's mission or most significant activities  
The objects of this International Union are to organize under one banner all workers engaged in industry, to educate them to cooperate in every movement which tends to benefit the organization, and to impress upon our membership, employers, and the public that it is to the advantage of all concerned that workers be organized The organization of our industry requires honest and intelligent membership, adapted to the business We teach our membership the advantage, benefits, and importance of their industrial position, and we endeavor to build-up and perfect a labor organization in conformity with the highest standards of our American and Canadian citizenship We seek to ensure that the contributions made by our members to improve their industries are recognized and that workers receive the benefits derived from their labors in the form of reasonable hours, fair wages, improved working conditions, and respectful treatment by their employers

**2** Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	28
<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	0
<b>5</b> Total number of individuals employed in calendar year 2015 (Part V, line 2a)	<b>5</b>	545
<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	0
<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	0

Revenue

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h)	3,432,864	3,549,374
<b>9</b> Program service revenue (Part VIII, line 2g)	167,597,967	171,101,859
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d )	5,674,374	7,566,020
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	145,803	379,454
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	176,851,008	182,596,707

Expenses

<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3 )	2,687,633	1,995,456
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	11,126,012	9,749,232
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	71,268,776	69,076,768
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0	0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <sup>0</sup>		
<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	66,539,166	66,865,334
<b>18</b> Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	151,621,587	147,686,790
<b>19</b> Revenue less expenses Subtract line 18 from line 12	25,229,421	34,909,917

Net Assets or Fund Balances

	Beginning of Current Year	End of Year
<b>20</b> Total assets (Part X, line 16)	256,531,166	270,376,279
<b>21</b> Total liabilities (Part X, line 26)	54,179,633	44,527,499
<b>22</b> Net assets or fund balances Subtract line 21 from line 20	202,351,533	225,848,780

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

\*\*\*\*\*  
Signature of officer

2016-11-03  
Date

KEN HALL GENERAL SECRETARY-TREASURER  
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name  
Louis Verzella CPA

Preparer's signature  
Louis Verzella CPA

Date  
2016-11-02

Check ☐ if self-employed

PTIN  
P00360279

Firm's name ▶ NOVAK FRANCELLE LLC

Firm's EIN ▶ 61-1436956

Firm's address ▶ ONE PRESIDENTIAL BLVD SUITE 330  
BALA CYNWYD, PA 19004

Phone no (610) 668-9400

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990(2015)

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

The objectives of this International Union are to organize under one banner all workers engaged in industry, to educate them to cooperate in every movement which tends to benefit the organization, and to impress upon our membership, employers, and the public that it is to the advantage of all concerned that workers be organized. The organization of our industry requires honest and intelligent membership, adapted to the business. We teach our membership the advantage, benefits, and importance of their industrial position, and we endeavor to build-up and perfect a labor organization in conformity with the highest standards of our American and Canadian citizenship. We seek to ensure that the contributions made by our members to improve their industries are recognized and that workers receive the benefits derived from their labors in the form of reasonable hours, fair wages, improved working conditions, and respectful treatment by their employers.

If "Yes," describe these new services on Schedule O

If "Yes," describe these changes on Schedule O

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.














4a	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	INTERNATIONAL BROTHERHOOD OF TEAMSTERS-TO ORGANIZE ALL WORKERS AND SECURE IMPROVED WAGES, HOURS, WORKING CONDITIONS & OTHER ADVANTAGES THROUGH ORGANIZING & COLLECTIVE BARGAINING				

[illegible][illegible]

<b>4d</b>	Other program services (Describe in Schedule O )			
	(Expenses \$	including grants of \$	) (Revenue \$	)

**4e Total program service expenses ▶**

**Part IV** Checklist of Required Schedules

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> . . . . .	<b>1</b>	No
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?  . . . . .	<b>2</b> Yes	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>  . . . . .	<b>3</b> Yes	
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> . . . . .	<b>4</b>	
<b>5</b> 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? <i>If "Yes," complete Schedule C, Part III</i>  . . . . .	<b>5</b> Yes	
<b>6</b> 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? <i>If "Yes," complete Schedule D, Part I</i>  . . . . .	<b>6</b>	No
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>  . . . . .	<b>7</b>	No
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>  . . . . .	<b>8</b>	No
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV</i>  . . . . .	<b>9</b>	No
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>  . . . . .	<b>10</b>	No
<b>11</b> 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		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>  . . . . .	<b>11a</b> Yes	
<b>b</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? <i>If "Yes," complete Schedule D, Part VII</i>  . . . . .	<b>11b</b>	No
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII</i>  . . . . .	<b>11c</b>	No
<b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX</i>  . . . . .	<b>11d</b>	No
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>  . . . . .	<b>11e</b> Yes	
<b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X</i>  . . . . .	<b>11f</b> Yes	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>  . . . . .	<b>12a</b>	No
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>  . . . . .	<b>12b</b> Yes	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> . . . . .	<b>13</b>	No
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	<b>14a</b> Yes	
<b>b</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? <i>If "Yes," complete Schedule F, Parts I and IV</i> . . . . .	<b>14b</b>	No
<b>15</b> 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? <i>If "Yes," complete Schedule F, Parts II and IV</i> . . . . .	<b>15</b>	No
<b>16</b> 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? <i>If "Yes," complete Schedule F, Parts III and IV</i> . . . . .	<b>16</b>	No
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions) . . . . .	<b>17</b>	No
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> . . . . .	<b>18</b>	No
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> . . . . .	<b>19</b>	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> . . . . .	<b>20a</b>	No
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .	<b>20b</b>	

**Part IV** Checklist of Required Schedules (continued)

<b>21</b>	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? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	<b>21</b>	Yes	
<b>22</b>	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? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	<b>22</b>		No
<b>23</b>	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? <i>If "Yes," complete Schedule J</i> . . . . .	<b>23</b>	Yes	
<b>24a</b>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .	<b>24a</b>		No
<b>b</b>	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .	<b>24b</b>		
<b>c</b>	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	<b>24c</b>		
<b>d</b>	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	<b>24d</b>		
<b>25a</b>	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	<b>25a</b>		
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	<b>25b</b>		
<b>26</b>	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? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	<b>26</b>		No
<b>27</b>	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? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	<b>27</b>		No
<b>28</b>	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) <b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28a</b>		No
<b>b</b>	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28b</b>		No
<b>c</b>	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? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28c</b>		No
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . .	<b>29</b>		No
<b>30</b>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	<b>30</b>		No
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	<b>31</b>		No
<b>32</b>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	<b>32</b>		No
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	<b>33</b>		No
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	<b>34</b>	Yes	
<b>35a</b>	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<b>35a</b>		No
<b>b</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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	<b>35b</b>		
<b>36</b>	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	<b>36</b>		
<b>37</b>	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? <i>If "Yes," complete Schedule R, Part VI</i>	<b>37</b>		No
<b>38</b>	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	<b>38</b>	Yes	

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
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	812
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 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, filed for the calendar year ending with or within the year covered by this return.	2a	545
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No
b	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)?	4a	Yes
b	If "Yes," enter the name of the foreign country: CA 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	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
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	
c	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	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	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	
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter		
a	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	
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.	13a	
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	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

**Part VI Governance, Management, and Disclosure**

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	28	
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent	0	
<b>2</b>	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?		No
<b>3</b>	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?		No
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
<b>6</b>	Did the organization have members or stockholders?	Yes	
<b>7a</b>	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?	Yes	
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
<b>a</b>	The governing body?	Yes	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	Yes	
<b>9</b>	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		No

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?	Yes	
<b>b</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?	Yes	
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
<b>13</b>	Did the organization have a written whistleblower policy?	Yes	
<b>14</b>	Did the organization have a written document retention and destruction policy?	Yes	
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official		No
<b>b</b>	Other officers or key employees of the organization		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
<b>b</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?		

**Section C. Disclosure**

**17** List the States with which a copy of this Form 990 is required to be filed

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**18** Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☐ Own website ☐ Another's website ☒ 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 financial 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  
 INTERNATIONAL BROTHERHOOD OF TEAMSTERS 25 LOUISIANA AVE NW WASHINGTON, DC 20001 (202) 624-6800

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

Form **990** (2015)



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

[illegible]

<b>1b</b>	<b>Sub-Total</b>			
<b>c</b>	<b>Total from continuation sheets to Part VII, Section A</b>			
<b>d</b>	<b>Total (add lines 1b and 1c)</b>	8,175,853	3,998,444	2,721,184

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 126

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

## Section B. Independent Contractors

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation
JONES DAY 222 EAST 41ST STREET NEW YORK, NY 10017	IRB	1,371,781
BARKAN MEIZLISH HANDLEMAN 250 EAST BROAD ST 10TH FLR COLUMBUS, OH 43215	LEGAL SERVICES	407,028
BAPTISTE & WILDER PC 1150 CONNECTICUT AVENUE NW SUITE WASHINGTON, DC 20036	LEGAL SERVICES	404,541
BRADLEY T RAYMOND PC 32300 NORTHWESTERN HWY STE 200 FARMINGTON HILLS, MI 48334	LEGAL SERVICES	325,926
DECHERT LLP PO BOX 7247-6643 PHILADELPHIA, PA 19170	LEGAL SERVICES	316,171

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 33

**Part VIII**   **Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII . . . . . ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1a</b>	Federated campaigns . . . . .	<b>1a</b> _____	3,549,374				
	<b>b</b>	Membership dues . . . . .	<b>1b</b> _____					
	<b>c</b>	Fundraising events . . . . .	<b>1c</b> _____					
	<b>d</b>	Related organizations . . . . .	<b>1d</b> 85,703					
	<b>e</b>	Government grants (contributions)	<b>1e</b> 3,463,021					
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b> 650					
	<b>g</b>	Noncash contributions included in lines 1a-1f \$	_____					
	<b>h</b>	<b>Total.</b> Add lines 1a-1f . . . . . ▶						
Program Service Revenue	<b>2a</b>	PER CAPITA TAXES AND I	Business Code 900099	171,101,859	171,101,859			
	<b>b</b>	_____						
	<b>c</b>	_____						
	<b>d</b>	_____						
	<b>e</b>	_____						
	<b>f</b>	All other program service revenue						
	<b>g</b>	<b>Total.</b> Add lines 2a-2f . . . . . ▶		171,101,859				
	Other Revenue	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) . . . . . ▶		7,545,848			7,545,848
<b>4</b>		Income from investment of tax-exempt bond proceeds . . ▶						
<b>5</b>		Royalties . . . . . ▶		114,419			114,419	
<b>6a</b>		Gross rents	(i) Real	(ii) Personal	30,000			30,000
			30,000					
			0					
			30,000					
<b>b</b>		Less rental expenses						
<b>c</b>		Rental income or (loss)						
<b>d</b>		Net rental income or (loss) . . . . . ▶		30,000			30,000	
<b>7a</b>		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other	20,172			20,172
			5,410,006	2,861				
			5,385,314	7,381				
			24,692	-4,520				
<b>b</b>		Less cost or other basis and sales expenses						
<b>c</b>		Gain or (loss)						
<b>d</b>		Net gain or (loss) . . . . . ▶		20,172			20,172	
<b>8a</b>		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .	<b>a</b> _____					
			<b>b</b> Less direct expenses . . . . . <b>b</b> _____					
			<b>c</b> Net income or (loss) from fundraising events . . ▶					
<b>9a</b>	Gross income from gaming activities See Part IV, line 19 . . . . .	<b>a</b> _____						
		<b>b</b> Less direct expenses . . . . . <b>b</b> _____						
		<b>c</b> Net income or (loss) from gaming activities . . . ▶						
<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . .	<b>a</b> _____	66,145					
		66,145						
		0						
		<b>c</b> Net income or (loss) from sales of inventory . . ▶					66,145	
Miscellaneous Revenue		Business Code						
<b>11a</b>	DEFUNCT AFFILIATES	900099	159,644	159,644				
<b>b</b>	OTHER INCOME	900099	9,246			9,246		
<b>c</b>	_____							
<b>d</b>	All other revenue . . . . .							
<b>e</b>	<b>Total.</b> Add lines 11a-11d . . . . . ▶		168,890					
<b>12</b>	<b>Total revenue.</b> See Instructions . . . . . ▶		182,596,707	171,261,503	0	7,785,830		

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX . . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b>	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .	1,995,456			
<b>2</b>	Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .				
<b>3</b>	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . . .				
<b>4</b>	Benefits paid to or for members . . . . .	9,749,232			
<b>5</b>	Compensation of current officers, directors, trustees, and key employees . . . . .	9,253,209			
<b>6</b>	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
<b>7</b>	Other salaries and wages . . . . .	34,098,960			
<b>8</b>	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	4,944,003			
<b>9</b>	Other employee benefits . . . . .	17,440,298			
<b>10</b>	Payroll taxes . . . . .	3,340,298			
<b>11</b>	Fees for services (non-employees)				
<b>a</b>	Management . . . . .				
<b>b</b>	Legal . . . . .	5,373,250			
<b>c</b>	Accounting . . . . .	299,183			
<b>d</b>	Lobbying . . . . .				
<b>e</b>	Professional fundraising services. See Part IV, line 17				
<b>f</b>	Investment management fees . . . . .	117,589			
<b>g</b>	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) . . . . .	8,577,502			
<b>12</b>	Advertising and promotion . . . . .	896,701			
<b>13</b>	Office expenses . . . . .	8,670,414			
<b>14</b>	Information technology . . . . .	327,873			
<b>15</b>	Royalties . . . . .				
<b>16</b>	Occupancy . . . . .	2,183,032			
<b>17</b>	Travel . . . . .	10,350,898			
<b>18</b>	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
<b>19</b>	Conferences, conventions, and meetings . . . . .	770,951			
<b>20</b>	Interest . . . . .	20,463			
<b>21</b>	Payments to affiliates . . . . .	10,802,283			
<b>22</b>	Depreciation, depletion, and amortization . . . . .	2,260,361			
<b>23</b>	Insurance . . . . .	746,048			
<b>24</b>	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) . . . . .				
<b>a</b>	REIMBURSED SALARIES	8,639,866			
<b>b</b>	REIMBURSED BENEFITS	2,933,691			
<b>c</b>	REIMBURSED EXPENSES	1,549,047			
<b>d</b>	TAXES-SALES, PERSONAL P	1,307,243			
<b>e</b>	All other expenses	1,038,939			
<b>25</b>	<b>Total functional expenses.</b> Add lines 1 through 24e	147,686,790			
<b>26</b>	<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X**

**Balance Sheet**

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

				(A)		(B)
				Beginning of year		End of year
Assets	<b>1</b>	Cash—non-interest-bearing . . . . .		8,987,457	<b>1</b>	704,356
	<b>2</b>	Savings and temporary cash investments . . . . .		36,235,444	<b>2</b>	45,016,422
	<b>3</b>	Pledges and grants receivable, net . . . . .		531,270	<b>3</b>	391,493
	<b>4</b>	Accounts receivable, net . . . . .		20,953,049	<b>4</b>	18,880,005
	<b>5</b>	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .			<b>5</b>	
	<b>6</b>	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L . . . . .			<b>6</b>	
	<b>7</b>	Notes and loans receivable, net . . . . .		593,439	<b>7</b>	32,339
	<b>8</b>	Inventories for sale or use . . . . .		322,686	<b>8</b>	366,517
	<b>9</b>	Prepaid expenses and deferred charges . . . . .		826,070	<b>9</b>	797,519
	<b>10a</b>	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D . . . . .	<b>10a</b> 69,743,412			
	<b>b</b>	Less: accumulated depreciation . . . . .	<b>10b</b> 33,803,693	37,795,794	<b>10c</b>	35,939,719
	<b>11</b>	Investments—publicly traded securities . . . . .		150,038,232	<b>11</b>	167,869,792
	<b>12</b>	Investments—other securities. See Part IV, line 11 . . . . .			<b>12</b>	
	<b>13</b>	Investments—program-related. See Part IV, line 11 . . . . .			<b>13</b>	
	<b>14</b>	Intangible assets . . . . .			<b>14</b>	
	<b>15</b>	Other assets. See Part IV, line 11 . . . . .		247,725	<b>15</b>	378,117
	<b>16</b>	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .		256,531,166	<b>16</b>	270,376,279
Liabilities	<b>17</b>	Accounts payable and accrued expenses . . . . .		28,153,460	<b>17</b>	27,269,874
	<b>18</b>	Grants payable . . . . .			<b>18</b>	
	<b>19</b>	Deferred revenue . . . . .			<b>19</b>	
	<b>20</b>	Tax-exempt bond liabilities . . . . .			<b>20</b>	
	<b>21</b>	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .			<b>21</b>	
	<b>22</b>	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .			<b>22</b>	
	<b>23</b>	Secured mortgages and notes payable to unrelated third parties . . . . .		4,623,714	<b>23</b>	
	<b>24</b>	Unsecured notes and loans payable to unrelated third parties . . . . .			<b>24</b>	
	<b>25</b>	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D . . . . .		21,402,459	<b>25</b>	17,257,625
	<b>26</b>	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .		54,179,633	<b>26</b>	44,527,499
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>					
	<b>27</b>	Unrestricted net assets . . . . .		201,509,556	<b>27</b>	225,301,393
	<b>28</b>	Temporarily restricted net assets . . . . .		841,977	<b>28</b>	547,387
	<b>29</b>	Permanently restricted net assets . . . . .			<b>29</b>	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>					
	<b>30</b>	Capital stock or trust principal, or current funds . . . . .			<b>30</b>	
	<b>31</b>	Paid-in or capital surplus, or land, building or equipment fund . . . . .			<b>31</b>	
	<b>32</b>	Retained earnings, endowment, accumulated income, or other funds . . . . .			<b>32</b>	
	<b>33</b>	<b>Total net assets or fund balances</b> . . . . .		202,351,533	<b>33</b>	225,848,780
	<b>34</b>	<b>Total liabilities and net assets/fund balances</b> . . . . .		256,531,166	<b>34</b>	270,376,279

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	182,596,707
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	147,686,790
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	34,909,917
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	202,351,533
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-5,080,233
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	-6,332,437
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	225,848,780

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
<b>b</b>	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
<b>c</b>	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
<b>b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

Additional Data

Software ID:  
Software Version:  
EIN: 53-0215427  
Name: INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
FERLINE BUIE ..... Vice President - AT LARGE	35 00 .....	X						96,915	91,769	33,680
RONALD HERRERA ..... INTERNATIONAL TRUSTEE	35 00 .....	X						130,972	157,733	89,399
JIM KABELL ..... INTERNATIONAL TRUSTEE	35 00 .....	X						86,941	83,915	69,101
KEVIN MOORE ..... INTERNATIONAL TRUSTEE	35 00 .....	X						133,195	93,017	79,191
GREGORY FLOYD ..... INTERNATIONAL TRUSTEE	35 00 .....	X						59,711	246,636	29,736
JAMES P HOFFA ..... GENERAL PRESIDENT	35 00 .....			X				385,858	2,528	66,840
ROBERT BOUVIER ..... Vice President - Canada, &	35 00 .....			X				69,330	194,302	33,212
FORREST TYSON JOHNSON ..... Vice President - Southern	35 00 .....			X				216,513	0	49,584
JOHN F MURPHY ..... Vice President - Eastern R	35 00 .....			X				177,758	38,695	64,197
KEN WOOD ..... Vice President - Southern	35 00 .....			X				133,384	157,621	17,748

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN COLI ..... Vice President - Central R	35 00 .....			X				147,483	181,864	103,450
DANIEL J KANE SR ..... Vice President - Eastern R	35 00 .....			X				96,489	51,321	33,740
FREDERICK P POTER ..... Vice President - AT LARGE	35 00 .....			X				121,642	152,003	16,110
FREDDIE N SIMPSON ..... Vice President - AT LARGE	35 00 .....			X				95,840	180,178	63,760
GORDON SWEETON ..... Vice President - Central R	35 00 .....			X				182,446	0	44,640
GEORGE TEDESCHI ..... Vice President - AT LARGE	35 00 .....			X				96,595	204,597	67,120
WILLIAM HAMILTON ..... Vice President - Eastern R	35 00 .....			X				93,121	185,015	37,840
ROME ALOISE ..... Vice President - AT LARGE	35 00 .....			X				175,258	144,712	104,570
BRIAN BUHLE ..... Vice President - Central R	35 00 .....			X				89,155	139,040	11,640
Stanley J Hennessy ..... Vice President - Canada	35 00 .....			X				64,013	146,050	34,460

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RICK MIDDLETON ..... Vice President - Western R	35 00 .....			X				86,714	214,821	78,051
GEORGE MIRANDA ..... Vice President - AT LARGE	35 00 .....			X				89,429	235,237	32,681
ALBERT MIXON ..... Vice President - AT LARGE	35 00 .....			X				73,351	210,864	31,551
CRAIG MCINNES ..... VICE President - Canada	35 00 .....			X				61,967	146,797	35,071
SEAN O'BRIEN ..... VICE President - Eastern R	35 00 .....			X				130,097	156,740	84,341
BECKY STRZECHOWSKI ..... Vice President - CEntral R	35 00 .....			X				89,511	234,200	102,191
STEVEN VAIRMA ..... VICE President - WEstern R	35 00 .....			X				139,316	137,761	83,771
KEN HALL ..... GENERAL SEC -TREAS	35 00 .....			X				277,075	0	52,091
GARY S WITLEN ..... DEPARTMENT DIRECTOR/LEGAL	35 00 .....				X			243,131	0	55,141
CHARLES L DEANER ..... GENERAL PRESIDENT'S STAFF	35 00 .....				X			226,109	0	52,201



Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RICHARD BELL ..... EXECUTIVE ASST TO GEN SEC	35 00 .....				X			235,127	0	53,911
CHRISTINE BAILEY ..... Department Director, Field	35 00 .....				X			174,366	0	44,940
JEFFREY FARMER ..... DEPARTMENT DIRECTOR/ORGANI	35 00 .....				X			185,188	0	46,550
BRET CALDWELL ..... DEPARTMENT DIRECTOR/COMMUN	35 00 .....				X			181,484	0	46,760
MICHAEL MANLEY ..... STAFF ATTORNEY	35 00 .....				X			179,945	0	45,860
LAMONT BYRD ..... DEPARTMENT DIRECTOR/SAFETY	35 00 .....				X			170,969	0	44,450
RICHARD GIBSON ..... STAFF ATTORNEY	35 00 .....				X			176,657	0	45,540
NEIL DITCHEK ..... GENERAL PRES ASSISTANT GEN	35 00 .....				X			185,682	0	49,550
IAIN GOLD ..... DEPARTMENT DIRECTOR/Strate	35 00 .....				X			166,236	0	44,610
TODD J THOMPSON ..... SPECIAL SST TO GP	35 00 .....				X			172,716	0	44,730

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CYNTHIA IMPALA ..... DEPARTMENT DIRECTOR/TRAINI	35 00 .....				X			174,889	0	45,330
JOHN SLATERY ..... DEPARTMENT DIRECTOR/BENEFI	35 00 .....				X			166,197	41,666	43,730
LEAH FORD ..... Assistant Director/Special	35 00 .....				X			198,205	0	27,470
DAVID BOURNE ..... TRADE DIVISION DIRECTOR, A	35 00 .....				X			196,405	81,955	46,670
STEPHEN NAGROTSKY ..... deputy DIRECTOR, AIRLINes	35 00 .....				X			174,094	0	45,190
WILLIAM C SMITH III ..... Executive ASST TO GEN PRES	35 00 .....				X			220,469	69,540	84,040
CARIN ZELENKO ..... Department Director, Capit	35 00 .....				X			162,539	0	43,830
BRIAN RAINVILLE ..... International Representati	35 00 .....				X			180,618	17,867	49,660
NICHOLAS MANICONE ..... STAFF ATTORNEY	35 00 .....					X		159,167	0	43,000
MICHAEL FILLER ..... ASSOCIATE DIRECTOR	35 00 .....					X		157,542	0	42,560

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
FREDERICK DUBINSKY ..... International Representative	35 00 .....					X		161,596	0	41,880
SCOTT HEGLAND ..... International Representative	35 00 .....					X		161,532	0	41,560
RONALD SCHWAB ..... ASSISTANT DIRECTOR	35 00 .....					X		164,911	0	42,080

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.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2015

Open to Public Inspection

If the organization answered "Yes" on 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" on 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" on 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(c)(4), (5), or (6) organizations Complete Part III

Name of the organization INTERNATIONAL BROTHERHOOD OF TEAMSTERS	Employer identification number 53-0215427
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	\$
3	Volunteer hours	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	\$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	\$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," describe in Part IV	

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	\$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	\$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	\$
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2				
3				
4				
5				
6				

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount Enter the amount from the following table in both columns														
<table><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a If zero or less, enter -0-														
i	Subtract line 1f from line 1c If zero or less, enter -0-														

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

☐ Yes ☐ No

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a)2012	(b)2013	(c)2014	(d)2015	(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					

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)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

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

a

Volunteers?

b

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

c

Media advertisements?

d

Mailings to members, legislators, or the public?

e

Publications, or published or broadcast statements?

f

Grants to other organizations for lobbying purposes?

g

Direct contact with legislators, their staffs, government officials, or a legislative body?

h

Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?

i

Other activities?

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

d

If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

(a)

Yes

No

(b)

Amount

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

1

Were substantially all (90% or more) dues received nondeductible by members?

2

Did the organization make only in-house lobbying expenditures of \$2,000 or less?

3

Did the organization agree to carry over lobbying and political expenditures from the prior year?

Yes

No

1

Yes

No

2

No

3

No

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is 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 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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?

5

Taxable amount of lobbying and political expenditures (see instructions)

1

2a

2b

2c

3

4

5

Part IV

Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
Part I-A, Line 1	DURING THE YEAR IBT MEMBERS AND EMPLOYEES WERE PRESENT AT VARIOUS POLITICAL RALLIES TO SUPPORT VARIOUS CANDIDATES RUNNING FOR POLITICAL OFFICE. THE IBT HAS TWO SEPARATE DEPARTMENTS ASSOCIATED WITH POLITICAL ACTIVITY: THE DEPARTMENT OF FEDERAL LEGISLATION AND REGULATION AND THE DEPARTMENT OF POLITICAL AND LEGISLATIVE ACTION. EMPLOYEES IN BOTH DEPARTMENTS SPEND 89.00% OF THEIR WORK TIME ON POLITICAL ACTIVITIES. APPROXIMATELY 42.0% OF THE IBT OFFICERS' WORK TIME IS SPENT ON POLITICAL ACTIVITIES AND APPROXIMATELY 43.0% OF THE IBT EMPLOYEES' WORK TIME IS SPENT ON POLITICAL ACTIVITIES.

SCHEDULE D

(Form 990)

Department of the  
Treasury  
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on 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](http://www.irs.gov/form990).

OMB No 1545-0047

2015

Open to Public  
Inspection

Name of the organization INTERNATIONAL BROTHERHOOD OF TEAMSTERS	Employer identification number 53-0215427
--	--

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 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 advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1	Purpose(s) of conservation easements held by the organization (check all that apply) <div><input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)<div><input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of open space</div><input type="checkbox"/> Preservation of an historically important land area <input type="checkbox"/> Preservation of a certified historic structure</div>	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year	
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►	
4	Number of states where property subject to conservation easement is located ►	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items	
(i)	Revenue included on Form 990, Part VIII, line 1	► \$
(ii)	Assets included in Form 990, Part X	► \$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
a	Revenue included on Form 990, Part VIII, line 1	► \$
b	Assets included in Form 990, Part X	► \$

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets**  
(continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

**Part IV Escrow and Custodial Arrangements.**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance . . . . .					
b Contributions . . . . .					
c Net investment earnings, gains, and losses					
d Grants or scholarships . . . . .					
e Other expenditures for facilities and programs . . . . .					
f Administrative expenses . . . . .					
g End of year balance . . . . .					

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations . . . . .

(ii) related organizations . . . . .

	Yes	No
3a(i)		
3a(ii)		
3b		

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

4

Describe in Part XIII the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.**  
Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	Accumulated (c) depreciation	(d) Book value
1a Land . . . . .		794,117		794,117
b Buildings . . . . .		51,930,455	19,432,913	32,497,542
c Leasehold improvements . . . . .				
d Equipment . . . . .		114,630	114,630	0
e Other . . . . .		16,904,210	14,256,150	2,648,060
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) ) . . . . . ▶				35,939,719





**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**  
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	176,954,465
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	-5,080,233
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	-444,420
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	-5,524,653
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	182,479,118
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	117,589
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	117,589
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	182,596,707

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**  
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	147,569,201
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	0
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	147,569,201
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	117,589
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	117,589
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	147,686,790

**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.

Return Reference	Explanation
Part X, Line 2	Accounting principles generally accepted in the United States of America require management to evaluate tax positions taken by the International Union and recognize a tax liability if the International Union has taken an uncertain position that more likely than not would not be sustained upon examination by the U S Federal, state, or local taxing authorities. The International Union is subject to routine audits by taxing jurisdictions, however, there are currently no audits for any tax periods in progress. Typically, tax years will remain open for three years, however this may differ depending upon the circumstances of the International Union.

**Part XIII**   **Supplemental Information** *(continued)*

Return Reference	Explanation

OMB No 1545-0047

# 2015

53-0215427

☒ Yes      ☐ No

## Schedule I (Form 990) 2015

**Part III** **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22  
Part III can be duplicated if additional space is needed

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

**Part IV** **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
Part I, Line 2	DOCUMENTATION IS MAINTAINED TO SUBSTANTIATE THE AMOUNT OF THE GRANT OR ASSISTANCE AND ANY GRANT IN EXCESS OF \$25,000 REQUIRES EXECUTIVE BOARD APPROVAL

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 53-0215427  
**Name:** INTERNATIONAL BROTHERHOOD OF TEAMSTERS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
AMERICAN FRIENDS OF THE YITZHAK RABIN CENTER 866 SECOND AVE 10 TH FLOOR NEW YORK, NY 10017	13-3962392	501(C)(3)	45,000				FINANCIAL SUPPORT
THE AMERICAN CONSTITUTION SOCIETY FOR LAW & POLICY 1333 H STREET NW 11TH FLOOR WASHINGTON, DC 20005	52-2313694	501(C)(3)	5,000				FINANCIAL SUPPORT
KEVIN SPACEY FOUNDATION 200 PARK AVE SOUTH 8TH FLR NEW YORK, NY 10003	45-2085547	501(C)(3)	5,000				FINANCIAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
JOBS WITH JUSTICE 1325 MASSACUSETTS AVE NW STE 200 WASHINGTON, DC 20005	52-1865575	501(C)(3)	60,000				FINANCIAL SUPPORT
JAMES R HOFFA MEMORIAL SCHOLARSHIP FUND 25 LOUISIANA AVE NW WASHINGTON, DC 20001	52-2206826	501(C)(3)	25,000				FINANCIAL SUPPORT
THE PEGGY BROWING FUND 100 S BROAD STREET STE 1208 PHILADELPHIA, PA 19103	23-2887086	501(C)(3)	11,000				FINANCIAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
OLD NEWSBOYS' GOODFELLOW FUND OF DETROIT PO BOX 44444 DETROIT, MI 48244	38-6061491	501(C)(3)	5,000				FINANCIAL SUPPORT
JEWISH LABOR COMMITTEE 140 WEST 31ST STREET 3RD FLR NEW YORK, NY 10001	13-1675650	501(C)(3)	5,000				FINANCIAL SUPPORT
PRESEVE MIDDLE CLASS AMERICA INC 1850 E DIVISION STREET SPRINGFIELD, MO 65803	80-0734319	501(C)(4)	125,000				FINANCIAL SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
THE WAYNE COUNTY SHERIFF YOUTH & SENIOR EDUCATION FUND 4747 WOODWARD AVENUE DETROIT, MI 48201	38-2983116	501(C)(3)	5,000				FINANCIAL SUPPORT
INTERNATIONAL LABOR RIGHTS FORUM 1634 I STREET NW STE 1001 WASHINGTON, DC 20006	52-1497461	501(C)(3)	15,000				FINANCIAL SUPPORT
THE LADIES OF PIPEFITTERS LOCAL UNION 798 MEMORIAL FUND PO BOX 125 BIXBY, OK 74008	77-0683346	501(C)(3)	5,000				FINANCIAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
LABOR COUNCIL FOR LATIN AMERICAN ADVANCEMENT 815 16TH STREET NW 4TH FLOOR WASHINGTON,DC 20006	52-1002207	501(C)(3)	5,000				FINANCIAL SUPPORT
LOS ANGELES ALLIANCE FOR A NEW ECONOMY 464 LUCAS AVENUE SUITE 202 LOS ANGELES,CA 90017	95-4459527	501(C)(3)	154,874				FINANCIAL SUPPORT
UNITED STUDENTS AGAINST SWEATSHOPS 1150 17TH Street NW Suite 300 WASHINGTON,DC 20036	52-2094677	N/A	15,000				FINANCIAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NATIONAL MAINTENANCE AGREEMENT LABOR-MANAGEMENT POLICY COMMITTEE 1501 LEE HIGHWAY STE 202 ARLINGTON, VA 22209	52-1289622	501(C)(6)	5,500				FINANCIAL SUPPORT
INTERFAITH WORKER JUSTICE 1020 W BRYN MAWR STE 300 CHICAGO, IL 60660	36-4063982	501(C)(3)	25,000				FINANCIAL SUPPORT
ALIGN THE ALLIANCE FOR A GREATER NEW YORK INC 50 BROADWAY NEW YORK, NY 10004	20-0559291	501(C)(3)	50,000				FINANCIAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
THE FRANKLIN & ELEANOR ROOSEVELT INSTITUTE 570 LEXINGTON AVE STE 500 NEW YORK, NY 10022	23-7213592	501(C)(3)	25,000				FINANCIAL SUPPORT
TEAMSTERS NATIONAL BLACK CAUCUS 150 GARFIELD AVE STRATFORD, CT 06615	35-1827988	501(C)(10)	13,000				FINANCIAL SUPPORT
ALLIANCE FOR RETIRED AMERICANS 815 16TH STREET NW WASHINGTON, DC 20006	52-2277805	501(C)(4)	5,000				FINANCIAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ARISE CHICAGO 1463 W RANDOLPH STREET STE 202 CHICAGO, IL 60607	20-1072983	501(C)(3)	5,000				FINANCIAL SUPPORT
CIVIC BAKERY 45 MAIN STREET NO 547 NEW YORK, NY 11201	27-3086855	501(C)(3)	5,000				FINANCIAL SUPPORT
CLERGY & LAITY UNITED FOR ECONOMIC JUSTICE 464 LUCAS AVENUE LOS ANGELES, CA 90017	26-4744884	501(C)(3)	5,000				FINANCIAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
DIRECTORS GUILD OF AMERICA - HONORS 7920 SUNSET BLVD LOS ANGELES, CA 90046	95-1202310	501(C)(5)	5,000				FINANCIAL SUPPORT
FORT SILL MWR FUND 4700 MOW-WAY ROAD STE 15 FORT SILL, OK 73503		N/A	5,000				FINANCIAL SUPPORT
GOOD JOBS FIRST 1616 P STREET NW STE 210 WASHINGTON, DC 20036	82-0542648	501(C)(3)	20,000				FINANCIAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
JC 42 CHARITY FUND 981 CORPORATE CENTER DRIVE POMONA, CA 91768	95-4531147	501(C)(3)	22,980				FINANCIAL SUPPORT
LABOR COMMUNITY SERVICES PO BOX 920041 LOS ANGELES, CA 90006		501(C)(3)	25,000				FINANCIAL SUPPORT
LABOR PROJECT WORKING FAMILIES 2521 CHANNING WAY STE 5555 BERKELEY, CA 94720	94-3284312	501(C)(3)	5,000				FINANCIAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SONS OF ITALY FOUNDATION 219 E STREET NE WASHINGTON, DC 20002	23-1523015	501(C)(8)	5,000				FINANCIAL SUPPORT
SOUTHERN CHRISTIAN LEADERSHIP CONFERENCE PO BOX 92544 ATLANTA, GA 30314	58-0807748	501(C)(4)	5,000				FINANCIAL SUPPORT
THE AMERICAN LEGION PO BOX 1055 INDIANAPOLIS, IN 46208	35-0144250	501(C)(19)	10,000				FINANCIAL SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
THE MCCARTON SCHOOL 331 WEST 25TH STREET NEW YORK, NY 10001	68-0526818	501(C)(3)	5,000				FINANCIAL SUPPORT
THE PARTNERSHIP FOR WORKING FAMILIES 1620 EYE STREET WASHINGTON, DC 20006	71-0914032	501(C)(3)	25,000				FINANCIAL SUPPORT
TEAMSTERS LOCAL UNION 299 COMMUNITY SERVICES FNDTN 2741 TRUMBALL AVE DETROIT, MI 48216	61-1533183	501(C)(3)	5,000				FINANCIAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
UCLA DOWNTOWN LABOR CENTER 675 S PARK VIEW STREET LOS ANGELES, CA 90057	95-2250801	501(C)(3)	5,000				FINANCIAL SUPPORT
UFCW CHARITY FOUNDATION 1775 K STREET NW WASHINGTON, DC 20006	52-1979561	501(C)(3)	10,000				FINANCIAL SUPPORT
AMERICAN FEDERATION OF LABOR AND CONGRESS OF INDUSTRIAL ORGANIZATIONS 815 16TH STREET NW WASHINGTON, DC 20006	53-0228172	501(C)(5)	15,000				FINANCIAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
AEROSPACE MAINTENANCE COUNCIL 72 AUBURN STREET SAUGUS, MA 01906		N/A	5,000				FINANCIAL SUPPORT

Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
▶ Attach to Form 990.  
▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization  
INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Employer identification number  
53-0215427

Part I Questions Regarding Compensation

	Yes	No
<div>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</div> <div><div><input checked="" type="checkbox"/> First-class or charter travel</div><div><input checked="" type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Tax indemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</div></div>		
<div>b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.</div>	1b Yes	
<div>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</div>	2 Yes	
<div>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</div> <div><div><input type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
<div>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:</div> <div>a Receive a severance payment or change-of-control payment?</div> <div>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div> <div>c Participate in, or receive payment from, an equity-based compensation arrangement?</div> <div>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</div>	4a No 4b No 4c No	
<div>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</div>		
<div>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</div> <div>a The organization?</div> <div>b Any related organization?</div> <div>If "Yes," on line 5a or 5b, describe in Part III.</div>	5a 5b	
<div>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</div> <div>a The organization?</div> <div>b Any related organization?</div> <div>If "Yes," on line 6a or 6b, describe in Part III.</div>	6a 6b	
<div>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</div>	7	
<div>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.</div>	8	
<div>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</div>	9	

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

**Part III**   **Supplemental Information**

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

Return Reference	Explanation
Part I, Line 1a	THE GENERAL PRESIDENT AND THE GENERAL SECRETARY-TREASURER ARE PROVIDED HOUSING, THE FAIR VALUE IS INCLUDED ON THEIR W-2. EMPLOYEES RECEIVE A FICA MATCH WHICH IS A GROSS-UP PAYMENT INCLUDED ON THEIR W-2.

Additional Data

Software ID:

Software Version:

EIN: 53-0215427

Name: INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1FERLINE BUIE Vice President - AT LARGE	(i)	84,734	0	12,181	12,532	21,148	130,595	0
	(ii)	91,769	0	0	0	-	91,769	0
1RONALD HERRERA INTERNATIONAL TRUSTEE	(i)	120,401	0	10,571	17,807	21,148	169,927	0
	(ii)	139,400	650	17,683	28,483	-	-	0
2JIM KABELL INTERNATIONAL TRUSTEE	(i)	78,734	0	8,207	11,645	21,148	119,734	0
	(ii)	77,415	0	6,500	17,888	-	-	0
3KEVIN MOORE INTERNATIONAL TRUSTEE	(i)	119,831	0	13,364	17,723	21,200	172,118	0
	(ii)	91,870	0	1,147	17,888	-	-	0
4GREGORY FLOYD INTERNATIONAL TRUSTEE	(i)	54,261	0	5,450	8,025	10,704	78,440	0
	(ii)	232,645	0	13,991	11,007	-	-	0
5JAMES P HOFFA GENERAL PRESIDENT	(i)	308,936	0	76,922	45,692	21,148	452,698	0
	(ii)	2,528	0	0	0	-	-	0
6ROBERT BOUVIER Vice President - Canada, &	(i)	67,180	0	2,150	9,936	20,784	100,050	0
	(ii)	33,726	157,691	2,885	0	-	-	0
7FORREST TYSON JOHNSON Vice President - Southern	(i)	192,968	0	23,545	28,540	21,044	266,097	0
	(ii)	0	0	0	0	-	-	0
8JOHN F MURPHY Vice President - Eastern R	(i)	154,986	0	22,772	22,923	21,044	221,725	0
	(ii)	35,945	0	2,750	0	-	-	0
9KEN WOOD Vice President - Southern	(i)	120,000	0	13,384	17,748	0	151,132	0
	(ii)	157,621	0	0	0	-	-	0
10JOHN COLI Vice President - Central R	(i)	134,582	0	12,901	19,905	20,992	188,380	0
	(ii)	174,353	0	7,511	49,199	-	-	0
11DANIEL J KANE SR Vice President - Eastern R	(i)	84,581	0	11,908	12,509	21,044	130,042	0
	(ii)	42,000	0	9,321	0	-	-	0
12FREDERICK P POTTER Vice President - AT LARGE	(i)	108,578	0	13,064	16,059	0	137,701	0
	(ii)	139,602	2,634	9,767	0	-	-	0
13FREDDIE N SIMPSON Vice President - AT LARGE	(i)	84,581	0	11,259	12,509	364	108,713	0
	(ii)	165,768	0	14,410	24,324	-	-	0
14GORDON SWEETON Vice President - Central R	(i)	159,581	0	22,865	23,602	21,044	227,092	0
	(ii)	0	0	0	0	-	-	0
15GEORGE TEDESCHI Vice President - AT LARGE	(i)	84,581	0	12,014	12,509	21,044	130,148	0
	(ii)	200,251	0	4,346	3,063	-	-	0
16WILLIAM HAMILTON Vice President - Eastern R	(i)	82,277	0	10,844	12,169	20,992	126,282	0
	(ii)	166,035	0	18,980	3,520	-	-	0
17ROME ALOISE Vice President - AT LARGE	(i)	161,632	0	13,626	23,905	21,044	220,207	0
	(ii)	144,712	0	0	31,065	-	-	0
18BRIAN BUHLE Vice President - Central R	(i)	78,734	0	10,421	11,645	0	100,800	0
	(ii)	139,040	0	0	0	-	-	0
19Stanley J Hennessy Vice President - Canada	(i)	61,967	0	2,046	9,165	20,784	93,962	0
	(ii)	124,029	1,630	20,391	0	-	-	0
						4,513	150,563	

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
21RICK MIDDLETON Vice President - Western R	(i)	78,734	0	7,980	11,645	21,096	119,455	0
	(ii)	184,713	29,797	311	25,940	-	-	0
						19,374	260,135	
1GEORGE MIRANDA Vice President - AT LARGE	(i)	78,734	0	10,695	11,645	21,044	122,118	0
	(ii)	235,237	0	0	0	-	-	0
						0	235,237	
2ALBERT MIXON Vice President - AT LARGE	(i)	66,520	0	6,831	9,838	19,416	102,605	0
	(ii)	142,011	0	68,853	2,303	-	-	0
						0	213,167	
3CRAIG MCINNES VICE President - Canada	(i)	61,967	0	0	9,165	20,784	91,916	0
	(ii)	136,756	0	10,041	0	-	-	0
						5,122	151,919	
4SEAN O'BRIEN VICE President - Eastern R	(i)	120,000	0	10,097	17,748	21,096	168,941	0
	(ii)	156,740	0	0	23,613	-	-	0
						21,884	202,237	
5BECKY STRZECHOWSKI Vice President - CEntral R	(i)	78,734	0	10,777	11,645	21,369	122,525	0
	(ii)	215,000	0	19,200	53,928	-	-	0
						15,251	303,379	
6STEVEN VAIRMA VICE President - WEstern R	(i)	128,734	0	10,582	19,040	21,148	179,504	0
	(ii)	104,027	9,600	24,134	24,107	-	-	0
						19,483	181,351	
7KEN HALL GENERAL SEC -TREAS	(i)	209,957	0	67,118	31,053	21,044	329,172	0
	(ii)	0	0	0	0	-	-	0
						0	0	
8GARY S WITLEN DEPARTMENT DIRECTOR/LEGAL	(i)	230,234	0	12,897	34,052	21,096	298,279	0
	(ii)	0	0	0	0	-	-	0
						0	0	
9CHARLES L DEANER GENERAL PRESIDENT'S STAFF	(i)	211,364	0	14,745	31,261	20,940	278,310	0
	(ii)	0	0	0	0	-	-	0
						0	0	
10RICHARD BELL EXECUTIVE ASST TO GEN SEC	(i)	219,511	0	15,616	32,466	21,448	289,041	0
	(ii)	0	0	0	0	-	-	0
						0	0	
11CHRISTINE BAILEY Department Director, Field	(i)	160,870	0	13,496	23,793	21,148	219,307	0
	(ii)	0	0	0	0	-	-	0
						0	0	
12JEFFREY FARMER DEPARTMENT DIRECTOR/ORGANI	(i)	171,141	0	14,047	25,312	21,239	231,739	0
	(ii)	0	0	0	0	-	-	0
						0	0	
13BRET CALDWELL DEPARTMENT DIRECTOR/COMMUN	(i)	173,213	0	8,271	25,618	21,148	228,250	0
	(ii)	0	0	0	0	-	-	0
						0	0	
14MICHAEL MANLEY STAFF ATTORNEY	(i)	169,553	0	10,392	25,077	20,784	225,806	0
	(ii)	0	0	0	0	-	-	0
						0	0	
15LAMONT BYRD DEPARTMENT DIRECTOR/SAFETY	(i)	160,071	0	10,898	23,675	20,784	215,428	0
	(ii)	0	0	0	0	-	-	0
						0	0	
16RICHARD GIBSON STAFF ATTORNEY	(i)	166,392	0	10,265	24,609	20,940	222,206	0
	(ii)	0	0	0	0	-	-	0
						0	0	
17NEIL DITCHEK GENERAL PRES ASSISTANT GEN	(i)	177,296	0	8,386	26,222	23,330	235,234	0
	(ii)	0	0	0	0	-	-	0
						0	0	
18IAIN GOLD DEPARTMENT DIRECTOR/Strate	(i)	160,435	0	5,801	23,728	20,888	210,852	0
	(ii)	0	0	0	0	-	-	0
						0	0	
19TODD J THOMPSON SPECIAL SST TO GP	(i)	159,111	0	13,605	23,532	21,200	217,448	0
	(ii)	0	0	0	0	-	-	0
						0	0	



Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
41CYNTHIA IMPALA DEPARTMENT DIRECTOR/TRAINI	(i)	160,205	0	14,684	23,694	21,642	220,225	0
	(ii)	0	0	0	0	0	0	0
1JOHN SLATERY DEPARTMENT DIRECTOR/BENEFI	(i)	154,092	0	12,105	22,790	20,940	209,927	0
	(ii)	0	41,666	0	0	0	41,666	0
2LEAH FORD Assistant Director/Special	(i)	185,734	0	12,471	27,470	0	225,675	0
	(ii)	0	0	0	0	0	0	0
3DAVID BOURNE TRADE DIVISION DIRECTOR, A	(i)	174,000	0	22,405	25,735	20,940	243,080	0
	(ii)	81,955	0	0	0	0	81,955	0
4STEPHEN NAGROTSKY deputy DIRECTOR, AIRLINes	(i)	163,674	0	10,420	24,207	20,992	219,293	0
	(ii)	0	0	0	0	0	0	0
5WILLIAM C SMITH III Executive ASST TO GEN PRES	(i)	179,393	0	41,076	26,532	21,200	268,201	0
	(ii)	57,980	0	11,560	17,888	18,420	105,848	0
6CARIN ZELENKO Department Director, Capit	(i)	154,824	0	7,715	22,898	20,940	206,377	0
	(ii)	0	0	0	0	0	0	0
7BRIAN RAINVILLE International Representati	(i)	167,576	0	13,042	24,784	21,057	226,459	0
	(ii)	14,583	0	3,284	2,752	1,072	21,691	0
8NICHOLAS MANICONE STAFF ATTORNEY	(i)	149,182	0	9,985	22,064	20,940	202,171	0
	(ii)	0	0	0	0	0	0	0
9MICHAEL FILLER ASSOCIATE DIRECTOR	(i)	145,235	0	12,307	21,480	21,083	200,105	0
	(ii)	0	0	0	0	0	0	0
10FREDERICK DUBINSKY International Representati	(i)	141,263	0	20,333	20,893	20,992	203,481	0
	(ii)	0	0	0	0	0	0	0
11SCOTT HEGLAND International Representati	(i)	140,506	0	21,026	20,781	20,784	203,097	0
	(ii)	0	0	0	0	0	0	0
12RONALD SCHWAB ASSISTANT DIRECTOR	(i)	142,945	0	21,966	21,142	20,940	206,993	0
	(ii)	0	0	0	0	0	0	0

**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](http://www.irs.gov/form990).

OMB No 1545-0047

**2015****Open to Public  
Inspection**Name of the organization  
INTERNATIONAL BROTHERHOOD OF TEAMSTERS**Employer identification number**

53-0215427

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part VI, Section A, line 6	THE INTERNATIONAL BROTHERHOOD OF TEAMSTERS (IBT) IS A MEMBERSHIP ORGANIZATION. MEMBERSHIP TO THE ORGANIZATION IS DISCUSSED IN ARTICLE II, SECTION 2(A) OF ITS BY-LAWS WHICH ARE LOCATED ON IBT'S WEB-SITE WWW.TEAMSTER.ORG
Form 990, Part VI, Section A, line 7a	ELECTION OF OFFICERS AND DELEGATES OF THE INTERNATIONAL BROTHERHOOD OF TEAMSTERS (IBT) IS DISCUSSED IN ARTICLE IV OF ITS BY-LAWS WHICH ARE LOCATED ON IBT'S WEB-SITE WWW.TEAMSTER.ORG

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part VI, Section B, line 11	THE INTERNATIONAL BROTHERHOOD OF TEAMSTERS FORM 990 IS PREPARED BY ITS INDEPENDENT PUBLIC ACCOUNTANT WHO THEN FORWARDS THE COMPLETED RETURN TO IBT'S GENERAL-SECRETARY TREASURER FOR REVIEW AND SIGNATURE
Form 990, Part VI, Section B, line 12c	THE INTERNATIONAL BROTHERHOOD OF TEAMSTERS MONITORS ITS CONFLICT OF INTEREST POLICY ANNUALLY

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part VI, Section C, line 19	THE INTERNATIONAL BROTHERHOOD OF TEAMSTERS MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST
Form 990, Part XI, line 9	LOSS ON FOREIGN CURRENCY EXCHANGE -444,420 FASB ASC 715 ADJUSTMENT -5,888,017

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE INTERNATIONAL BROTHERHOOD OF TEAMSTERS (IBT) FINANCIAL STATEMENTS WERE AUDITED AS PART OF A CONSOLIDATED STATEMENT. IBT'S OFFICERS ARE RESPONSIBLE FOR OVERSEEING THE FINANCIAL STATEMENT AUDIT AND SELECTION OF THE INDEPENDENT ACCOUNTANT THAT PERFORMS THE AUDIT. NO CHANGE TO THE PROCESS WAS MADE FROM THE PRIOR YEAR.

SCHEDULE R  
(Form 990)

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.▶ Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization  
INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Employer identification number  
53-0215427

Part I

Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II

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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
See Additional Data Table							

Part III

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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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.

(a) Name, address, and EIN of related organization	(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 512 (b)(13) controlled entity?	
								Yes	No
(1) TEAMSTERS NATIONAL HEADQUARTERS BUILDING CORPORATION  25 LOUISIAN AVENUE NW WASHINGTON, DC 20001 53-0226398	BUILDING CORPORATION	DC	INTERNATIONAL BROTHERHOOD OF TEAMSTERS	C			100 000 %		No

**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

**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?

**a** Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity . . . . .

**b** Gift, grant, or capital contribution to related organization(s) . . . . .

**c** Gift, grant, or capital contribution from related organization(s) . . . . .

**d** Loans or loan guarantees to or for related organization(s) . . . . .

**e** Loans or loan guarantees by related organization(s) . . . . .

**f** Dividends from related organization(s) . . . . .

**g** Sale of assets to related organization(s) . . . . .

**h** Purchase of assets from related organization(s) . . . . .

**i** Exchange of assets with related organization(s) . . . . .

**j** Lease of facilities, equipment, or other assets to related organization(s) . . . . .

**k** Lease of facilities, equipment, or other assets from related organization(s) . . . . .

**l** Performance of services or membership or fundraising solicitations for related organization(s)  
. . . . .

**m** Performance of services or membership or fundraising solicitations by related organization(s) . . . . .

**n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .

**o** Sharing of paid employees with related organization(s) . . . . .

**p** Reimbursement paid to related organization(s) for expenses . . . . .

**q** Reimbursement paid by related organization(s) for expenses . . . . .

**r** Other transfer of cash or property to related organization(s) . . . . .

**s** Other transfer of cash or property from related organization(s) . . . . .

	Yes	No
<b>1a</b>		No
<b>1b</b>	Yes	
<b>1c</b>		No
<b>1d</b>		No
<b>1e</b>		No
<b>1f</b>		No
<b>1g</b>		No
<b>1h</b>		No
<b>1i</b>		No
<b>1j</b>		No
<b>1k</b>		No
<b>1l</b>		No
<b>1m</b>		No
<b>1n</b>	Yes	
<b>1o</b>	Yes	
<b>1p</b>	Yes	
<b>1q</b>	Yes	
<b>1r</b>	Yes	
<b>1s</b>		No

**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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
See Additional Data Table			



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.

[illegible]

**Part VII**   **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
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Additional Data

Software ID:

Software Version:

EIN: 53-0215427

Name: INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501 (c)(3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
THE COMMITTEE FOR DEMOREPINDEPENDENT VOTER EDUCATION (DRIVE) 25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 53-0261255	POLITICAL ACTION COMMITTEE	DC	SECTION 527				No
THE TEAMSTER AFFILIATES PENSION PLAN 25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 52-6128127	PENSION FUND	DC	401(A)/501(A)				No
RETIREMENT AND FAMILY PROTECTION PLAN 25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 53-0215427	PENSION FUND	DC	401(A)/501(A)				No
JAMES R HOFFA MEMORIAL SCHOLARSHIP FUND INC 25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 52-2206826	SCHOALRSHIP FUND	DC	501(C)(3)	509(A)(2)			No
TEAMSTERS NATIONAL 401(K) SAVINGS PLAN 25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 52-1967784	PENSION FUND	DC	401(A)/501(A)				No
INTERNATIONAL BROTHERHOOD OF TEAMSTERS VOLUNTARY EMPLOYEE BENEFITS TRUST 25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 01-6196051	VEBA TRUST	DC	501(C)(9)				No
TEAMSTER DISASTER RELIEF FUND 25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 52-1790540	CHARITABLE RELIEF FUND	DC	501(C)(3)	170(B)(1)(A)(VI)			No
INTERNATIONAL BROTHERHOOD OF TEAMSTERS SUPPLEMENTAL BENEFITS TRUST 25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 20-0412571	SUPPLEMENTAL BENEFITS TRUST	DC	501(C)(5)				No
TEAMSTERS EDUCATION AND MOBILIZATION FUND 25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 26-2912925	POLITICAL ACTION COMMITTEE	DC	SECTION 527				No
TEAMSTERS LEGAL DEFENSE TRUST 25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 26-3361356	LEGAL DEFENSE FUND	DC	501(C)(9)				No
JLMC TEAMSTERS VOLUNTARY EMPLOYEE BENEFITS TRUST 25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 27-4722755	VEBA TRUST	DC	501(C)(4)				No
TEAMSTER FLORIDA CCE 25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 27-0765573	POLITICAL ACTION COMMITTEE	FL	SECTION 527				No

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
(1) INTERNATIONAL BROTHERHOOD OF TEAMSTERS VOLUNTARY EMPLOYEE BENEFITS TRUST	Q	441,800	FMV
(1) INTERNATIONAL BROTHERHOOD OF TEAMSTERS SUPPLEMENTAL BENEFITS TRUST	Q	306,462	FMV
(2) James r hoffa MEMORIAL scholarship fund	N	98,607	FMV
(3) James r hoffa MEMORIAL scholarship fund	Q	54,109	FMV
(4) James r hoffa MEMORIAL scholarship fund	R	86,272	FMV
(5) THE TEAMSTER AFFILIATES PENSION PLAN	Q	1,278,361	fMV
(6) RETIREMENT AND FAMILY PROTECTION PLAN	Q	226,555	fMV
(7) INTERNATIONAL BROTHERHOOD OF TEAMSTERS SUPPLEMENTAL BENEFITS TRUST	P	3,450	FMV