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EXTENDED TO NOVEMBER 15, 2016

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

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. Open to Public ▶ Information about Form 990 and its instructions is at www.lrs.gov/form990. Inspection A For the 2015 calendar year, or tax year beginning

В	Check if	C Name of organization		D Employer identific	ation number
	Addre				
┝	chane			0.4.0	
┝	chane Initial			1	577293
┝	returr Final	,	Room/suite	E Telephone number	
L	returr_ term⊪)-		(559)	
	ated Amer	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,512,798.
┝	returr Appl:	FRESNO, CA 93728		H(a) Is this a group re	
L	tion pend	F Name and address of principal officer PETE NONEZ		for subordinates?	
_		" 1140 W. OLIVE, FRESNO, CA 93728		H(b) Are all subordinates in	
		empt status 501(c)(3)X 501(c)(5) ◀ (insert no.) 4947(a)(1)	or 527	1 '	ist (see instructions)
		te: ► N/A forganization: Corporation Trust Association X Other ► SUB	ODL	H(c) Group exemption	
	art I	forganization: Corporation Trust Association X Other ► SUB Summary	ORIL Year	of formation; 1950 M	State of legal domicile: CA
	1	Briefly describe the organization's mission or most significant activities: <u>LABO</u>	R ORGA	NIZATION	
Activities & Governance		Charles thus have the description described to accompany of the		. the 050/ - 6 the the	
Ver	2	Check this box I if the organization discontinued its operations or dispo	sea of more	1 1	sets
Ĝ	3	Number of voting members of the governing body (Part VI, line 1a)		3	
త	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	0
ţį	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)		5	12
ξį	6	Total number of volunteers (estimate if necessary)		6	0
Ą	1	Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990 T, line 34 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	- Carlotte Control	7a	<u> </u>
	6	Treat difference of publication in the month of the publication of the	- i	Prior Year	
	8	Contributions and grants (Part VIII, line 1h)		1,397,489.	Current Year 1,373,323.
Jue	9	Program service revenue (Part VIII, line 2g)		108,683.	114,202.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10	0.	23,477.
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e).		3,184.	1,796.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII) column (A), line 12)		1,509,356.	1,512,798.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	-	21,120.	23,109.
Ø	i	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		871,698.	787,700.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ē	b	Total fundraising expenses (Part IX, column (D), line 25)	0.		<u></u>
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		585,285.	601,965.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,478,103.	1,412,774.
	19	Revenue less expenses Subtract line 18 from line 12		31,253.	100,024.
P S			Be	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		298,249.	496,828.
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)		37,728.	224,283.
		Net assets or fund balances Subtract line 21 from line 20		260,521.	272,545.
P	art II	Signature Block			
Und	ler pen	alties of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the best of my	knowledge and belief, it is
<u>true</u>	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of w	hich preparer		
		DYUMELL.		11/8/	مرا
Sig		Signature of officer		Date V	
Hei	e	PETE NUNEZ, SECRETARY-TREASURER Type or print name and title			
		Print/Type preparer's name Preparer's signature	1	Date Check 3	PTIN
Paid	d	DAWN ROGERS, CPA OCUM OTCH		0/26/16 if self-employed	- L
	parer	Firm's name DAWN M. ROGERS, CPA	<u>- , , , , , , , , , , , , , , , , , , ,</u>	Firm's EIN	48-1291875
	Only	Firm's address 3060 EL CERRITO PLAZA #362		Tim 3 Live	10 10/10/0
		EL CERRITO, CA 94530		Phone no 51 ()-990-6443
Ma	y the !	RS discuss this return with the preparer shown above? (see instructions)	·		X Yes No
	01 12-		ons.	Δ()	Form 990 (2015)

	990 (2015) GENERAL TEAMSTERS LOCAL #431	94-0577293	Page 2
Pai	t III Statement of Program Service Accomplishments		
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission.		
•	LABOR ORGANIZATION		
			
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O	Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	s? Yes	X No
4	If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to or revenue, if any, for each program service reported		
4a		renue \$	
	PROVIDING LOCAL UNION MEMBERSHIP WITH CONTRACT NEGOTIANSERVICES		
4b	(Code) (Expenses \$	enue \$	
	PROVIDING LOCAL UNION MEMBERSHIP WITH SUPPORT SERVICES		
4c	· · · · · · · · · · · · · · · · · · ·	renue \$	
	PROVIDING LOCAL UNION MEMBERSHIP WITH CONTRACT SUPPORT	SERVICES	
4d	Other program services (Describe in Schedule O)	`	
	(Expenses \$ including grants of \$) (Revenue \$,	

	1990 (2015) GENERAL TEAMSTERS LOCAL #431 94-057	<u> </u>	P	age 3
Pa	rt IV Checklist of Required Schedules			
	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X_
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		ļ
5	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	sımılar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	i		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		1	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	į		
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		٦,	
	Part VI	11a	Х	-
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			\
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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	11c		X
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	444		х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	'''	-	
	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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	1		
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	}		
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X

Form 990 (2015)

19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

complete Schedule G, Part III

	•		Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	if "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			ŀ
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			ŀ
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	<u> </u>	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	ļ	<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	1		
	If "Yes," complete Schedule R, Part V, line 2	36	ļ	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	ļ. <u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		l _	1
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		Form	990	(2015)

rai	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			1,10
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			ļ
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	ı		İ
	(gambling) winnings to prize winners?	1c	х	
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 12	1		ĺ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
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		İ
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	i		į
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country. ▶	i	j	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	. 1	1	
	any contributions that were not tax deductible as charitable contributions?	6a		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	_		l
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	i _		v
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		_X_
O O	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b		 -
C	to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		l
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		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		l
9	Sponsoring organizations maintaining donor advised funds.			ł
а	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:	i		1
а	Initiation fees and capital contributions included on Part VIII, line 12	i		ĺ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter.	ł		1
a	Gross income from members or shareholders			1
b	Gross income from other sources (Do not net amounts due or paid to other sources against			1
40-	amounts due or received from them.)			1
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers.		- 1	
13	Is the organization licensed to issue qualified health plans in more than one state?	13a		
a	Note. See the instructions for additional information the organization must report on Schedule O.	ısa		
h	Enter the amount of reserves the organization is required to maintain by the states in which the			1
-	organization is licensed to issue qualified health plans •		.	
c	Enter the amount of reserves on hand		.	ĺ
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			gan	(004E

GENERAL TEAMSTERS LOCAL #431 94-0577293 Form 990 (2015) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. \mathbf{x} Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1a 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. 0 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7h Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Х 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 X Did the organization have a written document retention and destruction policy? 14 14 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? a The organization's CEO, Executive Director, or top management official 15a X X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed >CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website X Upon request ___ Own website Other (explain in Schedule O) 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 State the name, address, and telephone number of the person who possesses the organization's books and records:

Form 990 (2015)

PETE NUNEZ - (559)486-5414 1140 WEST OLIVE, FRESNO, CA

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

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

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

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

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

(A) Name and Title	(B) Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)					h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
1) DARRELL PRATT	40.00										
PRESIDENT (PAST)	<u> </u>		ļ	X	_		<u> </u>	9,686.	0.	7,613	
2) LENNIE WELLS	40.00								_		
RECORDING-SECRETARY			_	X	_	<u> </u>	<u> </u>	87,138.	0.	42,539	
(3) PETER NUNEZ	40.00		l						_		
PRESIDENT			<u> </u>	X			<u> </u>	114,156.	0.	42,539	
(4) RODNEY HOLLETT	5.00			l	ļ			2 542	•		
PRUSTEE	F 00		_	X	_	-	_	3,512.	0.	0	
5) EDGAR AMENDE	5.00		İ	٦,			İ	2 472	0	•	
PRUSTEE	5.00			X	-	 		3,473.	0.	0	
(6) STEVE SHARP	3.00	ł		x				2 152	0	١ ,	
TRUSTEE	5.00		├	Δ				3,152.	0.	0	
7) FRED WILSHAW VICE-PRESIDENT	3.00			x				3,516.	0.	0	
8) CHRIS GARLICK	5.00			^	 -	╁		3,510.	<u> </u>		
PRUSTEE	3.00	İ						3,838.	0.	0	
KOSIBB								3,030.			
		-							 		
									· · · · · · · · · · · · · · · · · · ·		
			_								
		_	-	-							
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rar	T VII Section A. Officers, Directors, Trus	1	ploy	ees.			ghe	st C	ompensated Employe	es (continued)				
	, (A)	(B)				C)			(D)	(E)	- 1		(F)	
	Name and title	Average	(40	not c	Pos				Reportable	Reportable		Es	tımate	ed
		hours per	box	, unie	ss pe	rson	ıs bot	h an	compensation	compensation)	an	nount	of
		week	offi	ceran	dad	irecto	or/trus	tee)	from	from related			other	
		(list any	Individual trustee or director						the	organizations		com	pensa	tion
		hours for	ğ gi				텵	İ	organization	(W-2/1099-MIS	C)	fr	om th	е
		related	ste	insblutional trustee			Highest compensated employee		(W-2/1099-MISC)			_	anızat	
		organizations	al tru	at		Key employee	§ 9.						d relat	
		below	P.	t t t	Officer	emp	Best	Ротше г				orga	ınızatı	ons
		line)	Ē	Ę	5	ş	물.	횬						
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											1			
			1					l						
1b	Sub-total		<u> </u>				1	<u> </u>	228,471.		0.	9	2,6	91.
	Total from continuation sheets to Part V	Il Section A							0.		0.		_, _	0.
	Total (add lines 1b and 1c)	n, occuon A							228,471.		0.	<u>a</u>	2,6	
		at limited to th		liata			a)d		·				2,0	<u> </u>
2	Total number of individuals (including but r	iot iimitea to tr	iose	IISTE	o a	DOVE	e) wr	10 re	eceived more than \$100	,000 of reportable	,			1
	compensation from the organization					_							V	
											г		Yes	No
3	Did the organization list any former officer,	•		e, ke	y er	nplo	уее	or l	highest compensated e	mployee on		1		
	line 1a? If "Yes," complete Schedule J for s											3		X
4	For any individual listed on line 1a, is the si	um of reportab	le co	omp	ensa	ation	n and	to t	her compensation from	the organization				
	and related organizations greater than \$15	0,000? If "Yes,	" co	mple	ete S	Sche	eduk	e <i>J f</i>	for such individual		ļ	4	_X_	_
5	Did any person listed on line 1a receive or	accrue compe	nsat	ion f	rom	any	/ unr	elat	ed organization or indivi	dual for services	- [
	rendered to the organization? If "Yes," con	plete Schedul	e J 1	for si	uch	pers	son					5		X
Sec	tion B. Independent Contractors									_				
1	Complete this table for your five highest co	mpensated in	depe	ende	nt c	onti	racto	ors t	hat received more than	\$100,000 of comp	oensa	ation f	rom	
	the organization Report compensation for													
	(A)		-			*****	<u> </u>		(B)	,,,,,		(C	<u>.,</u>	
	Name and business	address	N	INC	7				Description of s	ervices	С		nsatio	n
				<u> </u>				\dashv	•					
								\dashv						
								- }						
								-						
														
								T						
				_ •				_						
2	Total number of independent contractors (including but n	ot li	mrte	d to	tho	se la	sted	d above) who received m	ore than				
	\$100,000 of compensation from the organi						0		,					
							-	-						2015

532008 12-1**6**-15

<u> </u>		Check if Schedule O cont	ains a response	or note to any lu	ne in this Part VIII			
		Onesi, ii Gonesia o Gone		<u> </u>	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
इइ	1 a	Federated campaigns	1a					
ira or	b		1b 1,	373,323.				
ا ڇُڙي	c	Fundraising events	1c					
# 1	d		1d					
S, E	е	Government grants (contribut	tions) 1e					
ΘΩ	f	All other contributions, gifts, gran						1
돌		similar amounts not included abo						
Ę Ó	g	Noncash contributions included in lines	1a-1f \$					
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f		. >	1,373,323.			
				Business Code				
g,	2 a	MEMBERS' FEES &	ASSESS	900099	114,202.	114,202.		
ا کے	ь					•		
8 5	c							_
e a	d							
Program Service Revenue	е	1						
٦	f	All other program service reve	enue					
		Total. Add lines 2a-2f			114,202.			
	3	Investment income (including	dividends, inter	est, and				
		other similar amounts)		>	5.			5.
	4	Income from investment of ta	x-exempt bond ;	oroceeds >				
1	5	Royalties		•				
			(ı) Real	(II) Personal				
	6 a	Gross rents						
	b	Less rental expenses						
ļ	c	Rental income or (loss)						
-	c	Net rental income or (loss)						
	7 a	Gross amount from sales of	(ı) Securities	(II) Other				
		assets other than inventory	23,472.					
	b	Less cost or other basis						
		and sales expenses	0.	<u></u>				
	c	: Gain or (loss)	23,472.					
ŀ	d	Net gain or (loss)			23,472.	23,472.		
e	8 a	Gross income from fundraisin	g events (not					
		including \$	of		1			
ev.		contributions reported on line	1c) See					
Other Reven		Part IV, line 18	а					
£		Less. direct expenses	b					
		Net income or (loss) from fund	=					
	9 a	Gross income from gaming ac	ctivities See		•			
Ì		Part IV, line 19	а					
ŀ		Less. direct expenses	b	· L	-			•
1		Net income or (loss) from gan	-					 _
	10 a	Gross sales of inventory, less						İ
	_	and allowances	a		-			1
ł		Less: cost of goods sold	. b	· L	-			
ŀ		: Net income or (loss) from sale			 			
}		Miscellaneous Revenu		Business Code	1	1 210		
		REIMBURSED EXPE		900099	1,316.	1,316. 480.		
	b		TOTTONAL	900099	480.	450.		+
Į	0				 			
	· ·	All other revenue Total, Add lines 11a-11d			1,796.		******	+
	12	Total revenue. See instructions.	•		$\frac{1,730.}{1,512,798.}$	139,470.	0	. 5.
					<u>-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			<u> </u>

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 (C) Management and Do not include amounts reported on lines 6b. Total expenses Program service Fundraising 7b. 8b. 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 23,109 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 321,262 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 248,909. Other salaries and wages Pension plan accruals and contributions (include 78,349. section 401(k) and 403(b) employer contributions) 94,781. Other employee benefits 9 44,399. 10 Payroli taxes Fees for services (non-employees) 11 a Management 21,491. Legal b c Accounting d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, 3,009 column (A) amount, list line 11g expenses on Sch O.) 200. Advertising and promotion 12 89,973. Office expenses 13 Information technology 14 Royalties 15 16,724 Occupancy 16 38,998. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 5,858. 19 347. Interest 20 366,947 Payments to affiliates 21 9,913. Depreciation, depletion, and amortization 22 23 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.) 26,435 AUTOMOBILE EXPENSES CONTRIBUTIONS TO LABOR 9,800. 181. c COMMUNUTIY OUTREACH d STEWARDS' EXPENSES (NOT 5,006. 83. e All other expenses 1,412,774 Total functional expenses. Add lines 1 through 24e 25 Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. if following SOP 98-2 (ASC 958-720)

Form 990 (2015)
Part X Balance Sheet

Part	^_	Charled School In Contains a reconstruction	to to on the Det V			
		Check if Schedule O contains a response or no	le to any line in this Part X	(A)		(B)
				Beginning of year		End of year
	1	Cash - non-interest-bearing	-	<u> 107,187.</u>	1	203,085
	2	Savings and temporary cash investments		2,763.	2	2,768
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net	_	4		
	5	Loans and other receivables from current and for	ormer officers, directors,			
		trustees, key employees, and highest compens	ated employees Complete			
		Part II of Schedule L	<u> </u>		5	·····
	6	Loans and other receivables from other disquali	fied persons (as defined under			
		section 4958(f)(1)), persons described in section	1 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sec	* * * * * * * * * * * * * * * * * * * *			
왔		employees' beneficiary organizations (see instr)	Complete Part II of Sch L		6	·-
Assets	7	Notes and loans receivable, net			7	
•	8	Inventories for sale or use			8	<u>.</u> .
1	9	Prepaid expenses and deferred charges			9	
1	0a	Land, buildings, and equipment, cost or other				
		basis Complete Part VI of Schedule D	10a 552,796.			
	b	Less accumulated depreciation	10ь 262,606.	187,514.	10c	290,190
1	1	Investments - publicly traded securities		11	· · · · · · · · · · · · · · · · · · ·	
1	2	Investments - other securities See Part IV, line		12		
1	3	Investments - program-related See Part IV, line	11		13	
1.	4	Intangible assets			14	
1	5	Other assets See Part IV, line 11		785.	15	785
1	6	Total assets. Add lines 1 through 15 (must equ	al line 34)	298,249.	_16	496,828
1	7	Accounts payable and accrued expenses	L	37,728.	17	119,000
1	8	Grants payable	L		18	
19	9	Deferred revenue	Ĺ		19	
2	:0	Tax-exempt bond liabilities	L		20	
2	1	Escrow or custodial account liability Complete	Part IV of Schedule D		21	
စ္မ 2	2	Loans and other payables to current and former	officers, directors, trustees,			
		key employees, highest compensated employee	es, and disqualified persons			
Liabilities 5		Complete Part II of Schedule L	<u>[</u>		22	
- 2	3	Secured mortgages and notes payable to unrela	ated third parties		23	105,283
2	4	Unsecured notes and loans payable to unrelate	d third parties		24	
2	5	Other liabilities (including federal income tax, pa	yables to related third			
		parties, and other liabilities not included on lines	17-24) Complete Part X of			
		Schedule D			25	
2	6	Total liabilities. Add lines 17 through 25		37,728.	26	224,283
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and		İ	
စို့		complete lines 27 through 29, and lines 33 and	d 34.			
င္က 2	7	Unrestricted net assets		<u>257,758.</u>	27	<u> 269,777</u>
g 2	8	Temporarily restricted net assets	L	<u>2,763.</u>	28	2,768
[2	9	Permanently restricted net assets			29	
로		Organizations that do not follow SFAS 117 (A	SC 958), check here ▶ 📖			
ō		and complete lines 30 through 34.				
န္မွ် ဒ	0	Capital stock or trust principal, or current funds	<u> </u>		30	
§ 3	1	Paid-in or capital surplus, or land, building, or ed	uipment fund		31	
Net Assets or Fund Balances は の の の の の の の の の の の の の の の の の の	2	Retained earnings, endowment, accumulated in	come, or other funds		32	
z 3	3	Total net assets or fund balances	<u> </u>	260,521.	33	272,545
3	4	Total liabilities and net assets/fund balances		298,249.	34	496,828

532012 12-16-15

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

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) organiza	ations Complete Part III			
Nar	ne of organization			Emp	loyer identification number
	GENERAL	TEAMSTERS LOCAL	#431		94-0577293
P	art I-A Complete if the or	ganization is exempt un	der section 501(c) or is a section 527 o	rganization.
2	Provide a description of the organic Political expenditures Volunteer hours	zation's direct and indirect politi	cal campaign activities		0.
P	art I-B Complete if the ord	ganization is exempt un	der section 501/o)/3/	
ـــــا	Enter the amount of any excise tax				
	Enter the amount of any excise tax				
	If the organization incurred a section				Yes No
	a Was a correction made?	,	, , , , ,		Yes No
	olf "Yes," describe in Part IV				
Pa	art I-C Complete if the org	ganization is exempt un	der section 501(c), except section 501	c)(3).
1	Enter the amount directly expende	d by the filing organization for s	ection 527 exempt fund	ction activities	
2	Enter the amount of the filing organ	nization's funds contributed to o	ther organizations for	section 527	
	exempt function activities			▶ \$	·
3	Total exempt function expenditures	s Add lines 1 and 2 Enter here	and on Form 1120-PO	•	
	line 17b			▶\$	Yes No
	Did the filing organization file Form	•			
5	Enter the names, addresses and en made payments. For each organization	ation listed, enter the amount pa	ad from the filing organ	nization's funds. Also enter th	ne amount of political
	contributions received that were propolitical action committee (PAC) If				ite segregated fund or a
		T			T
	(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

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

Schedule C (Form 990 or 990-EZ) 2015

LHA 532041

Schedule C (Form 990 or 990 EZ) 2015 Part II-A Complete if the org	GENERA	L TEA	MSTERS LOCA	AL #431	94-(0577293 Page 2
Part II-A Complete if the org section 501(h)).	gariizatio	n is exe	mpt under sectio	on soricits) and th	ea rorm 3/08 (election under
A Check Inf the filing organization expenses, and sha	re of exces	s lobbying		n Part IV each affiliated	group member's nar	me, address, EIN,
Limi	its on Lobb	ying Expe			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence publ	ic opinion ((grass roots lobbying)			
b Total lobbying expenditures to infl	•					
c Total lobbying expenditures (add i	_		, , , ,			
d Other exempt purpose expenditur	es	•				
e Total exempt purpose expenditure	es (add line:	s 1c and 1c	d)			
f Lobbying nontaxable amount Ent	er the amou	int from th	e following table in bo	th columns		
If the amount on line 1e, column (a) o	or (b) is:	The lob	bying nontaxable an	nount is:		
Not over \$500,000		20% of	the amount on line 1e			
Over \$500,000 but not over \$1,00	0,000	\$100,00	00 plus 15% of the ex	cess over \$500,000		
Over \$1,000,000 but not over \$1,5	500,000	\$175,00	00 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000	\$225,00	00 plus 5% of the exce	ess over \$1,500,000		
Over \$17,000,000		\$1,000,	000			
g Grassroots nontaxable amount (er	nter 25% of	line 1f)				
h Subtract line 1g from line 1a If zer	o or less, e	nter -0-		ļ	·· · -	
Subtract line 1f from line 1c If zero	o or less, er	iter -0-				<u> </u>
f there is an amount other than ze	ro on eithe	line 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this				***		Yes No
(Some organizations t	hat made a	section 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all o	of the five columns I	below.
			nditures During 4-Ye			
	2000	yilig Expe	inditures burning 4- re	ar Averaging Period		T
Calendar year (or fiscal year beginning in)	(a) 2	012	(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))						
					· 	

Schedule C (Form 990 or 990-EZ) 2015

Peach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description he lobbying activity. 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 fallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total Add lines 1c through 1i a 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 by organization managers under section 4912 of if Yes," enter the amount of any tax incurred by organization managers under section 4912 of if Yes, enter the amount of any tax incurred by organization managers under section 4912 of if the filing organization incured a section 4912 axi, did it file Form 4720 for this year? but III-A Complete if the organization is exempt under section 501(c)(4), section 501 (5)(c)(6). Were substantially all (60% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization make only in-house lobbying expenditures from the pnor year? the line organization agree to carry over lobbying expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political	(a)		(1	o)
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 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? bif "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? Int III-A Complete if the organization is exempt under section 501(c)(4), section 501: 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization make only in-house lobbying expenditures from the prior year? Int III-B Complete if the organization is exempt under section 501(c)(4), section 501: 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members 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 t Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable est		No	Am	ount
or referendum, through the use of a Volunteers? b Paul 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 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? bif "Yes," enter the amount of any tax incurred under section 4912 ci if "Yes," enter the amount of any tax incurred by organization managers under section 4912 dif the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Int III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the pnor year? Int III-B Complete if the organization is exempt under section 501(c)(4), section 501: 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members 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 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable	\top			
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vide 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), Pa		5	l	
ructions), and Part II-B, line T. Also, complete this part for any additional information.	t II-A	A, lines 1 a	and 2 (see	

SCHEDULE D

Department of the Treasury

Internal Revenue Service

(Form 990)

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.lrs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

Pa	rt I Organizations Maintaining Donor Advised		ls or Accounts Complete of the							
[1 4			is of Accounts. Complete if the							
	organization answered "Yes" on Form 990, Part IV, line	(a) Donor advised funds	(b) Funds and other accounts							
	Total cost of the	(a) Donor advised idilos	(b) Fullus and other accounts							
1	Total number at end of year									
2	Aggregate value of contributions to (during year)									
3	Aggregate value of grants from (dunng 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 e	· ·	Yes No							
6	Did the organization inform all grantees, donors, and donor ac	lvisors in writing that grant funds can be	e used only							
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose	e conferring							
	impermissible private benefit?		Yes No							
Pa	rt II Conservation Easements. Complete if the orga	anization answered "Yes" on Form 990,	Part IV, line 7.							
1	Purpose(s) of conservation easements held by the organization	n (check all th <u>at a</u> pply)								
	Preservation of land for public use (e.g., recreation or ed	ducation) Preservation of a his	torically important land area							
	Protection of natural habitat Preservation of a certified historic structure									
	Preservation of open space									
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form	n of a conservation easement on the last							
	day of the tax year.	Held at the End of the Tax Year								
а	Total number of conservation easements	2a								
b	Total acreage restricted by conservation easements	2b								
¢	c Number of conservation easements on a certified historic structure included in (a)									
d										
	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 eas	ement is located >								
5	Does the organization have a written policy regarding the period		•							
	violations, and enforcement of the conservation easements it	- · · · · · · · · · · · · · · · · · · ·	Yes No							
6										
	>	, , ,	,							
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing conserv	ation easements during the year							
	▶ \$	• • • • • • • • • • • • • • • • • • • •								
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 17	O(h)(4)(B)(i)							
	and section 170(h)(4)(B)(ii)?	, ,	Yes No							
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue and expens								
	include, if applicable, the text of the footnote to the organization									
	conservation easements.		o the organization o decodarting to							
Pa	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or 0	Other Similar Assets.							
	Complete if the organization answered "Yes" on Form									
	If the organization elected, as permitted under SFAS 116 (ASC	C 958), not to report in its revenue state	ement and balance sheet works of art.							
	historical treasures, or other similar assets held for public exhi									
	the text of the footnote to its financial statements that describ									
b	If the organization elected, as permitted under SFAS 116 (ASC		of and halance sheet works of art, historical							
_	treasures, or other similar assets held for public exhibition, ed	· · ·	·							
	relating to these items.	doction, or recognist in termiorality of pr	abile service, provide the leneving amounts							
	(i) Revenue included on Form 990, Part VIII, line 1		L ¢							
	(ii) Assets included in Form 990, Part X	•••	► \$ ► \$							
2	If the organization received or held works of art, historical trea	eurae or other eimilar accets for financi								
~	the following amounts required to be reported under SFAS 11		ar gain, provide							
	Revenue included on Form 990, Part VIII, line 1	o (mod 300) relating to triese items.	• •							
a	Assets included in Form 990, Part X	• • • •	▶ \$							
<u>D</u>	AGGEG III GUUGGU III I OHH 350, FAIL A		. 🔻 🦁							

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

Schedule D (Form 990) 2015

Sche		TEAMSTERS							<u>77293</u>	
Pa	rt III Organizations Maintaining C	ollections of A	rt, Hist	torical Tr	easures, c	or Othe	er Simil	<u>ar Asse</u>	ts (continue	∍d)
3	Using the organization's acquisition, accessi	on, and other record	ds, check	any of the	following tha	t are a s	ignificant	use of its	collection it	ems
	(check all that apply):									
а	Public exhibition	d	, <u> </u>	Loan or exc	hange progra	ams				
b	Scholarly research	e	, [_]	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	in how th	ey further t	he organizati	on's exe	mpt purp	ose in Parl	t XIII	
5	During the year, did the organization solicit o	r receive donations	of art, hi	storical trea	sures, or oth	er sımıla	r assets		_	
	to be sold to raise funds rather than to be ma								Yes	No_
Pai	rt IV Escrow and Custodial Arrange reported an amount on Form 990, Par		ete ıf the	organizatio	n answered '	'Yes" on	Form 99	0, Part IV,	line 9, or	
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contribution	s or other as	sets not	ıncluded			
	on Form 990, Part X?									
b	b If "Yes," explain the arrangement in Part XIII and complete the following table.									
-									Amount	
С	c Beginning balance									
d	d Additions during the year									
e	Distributions during the year									
f	f Ending balance						1e			
2a									No	
	b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII									
	Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10									
		(a) Current year		rior year	(c) Two year			years back	(e) Four ye	ars back
1a	a Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses			,						
d	Grants or scholarships	,					-			
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2										
а										
b										
С										
	The percentages on lines 2a, 2b, and 2c should equal 100%									
За	a Are there endowment funds not in the possession of the organization that are held and administered for the organization									
	by Yes No									
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza	itions listed as requi	red on S	chedule R?					3b	
4	Describe in Part XIII the intended uses of the	organization's ende	owment t	funds						
Pa	rt VI Land, Buildings, and Equipm	nent.								
	Complete if the organization answere	d "Yes" on Form 99	0, Part I\	/, line 11a S	See Form 990), Part X	line 10			
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) A	ccumulat	ed	(d) Book v	alue
		basis (investi	ment)	basis	(other)	de	preciation	<u> </u>		
1a	Land			5	0,642.				50	,642.
b	Buildings				7,404.		184,7	38.		,666.
	Leasehold improvements									
d	Equipment			10	6,425.		2,4	91.	103	,934.
е	Other			7	8,326.		75,3	77.	2	,949.
Tota	I. Add lines 1a through 1e (Column (d) must e	gual Form 990, Part	X, colur	nn (B), line	(0c.)				290	<u>,191.</u>

Schedule D (Form 990) 2015

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

Schedule D (Form 990) 2015

(8) (9)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)

SCHEDULE J (Form 990)

Compensation Information

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

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

➤ Attach to Form 990.

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

20 13

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service
Name of the organization

Department of the Treasury

GENERAL TEAMSTERS LOCAL #431

Employer identification number 94-0577293

Questions Regarding Compensation Part I Yes No ta 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 First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 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 Compensation committee Written employment contract Compensation survey or study Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee 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 a Receive a severance payment or change-of-control payment? X 4a X Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 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 The organization? 5a Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III. 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 The organization? 6a b Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III 7 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 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

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Schedule J (Form 990) 2015

Regulations section 53 4958-6(c)?

Page 2

Schedule J (Form 990) 2015

532112 10-14-15

Schedule J (Form 990) 2015

21

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

								•
		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) PETER NUNEZ	Θ	114,156.	0	0.		42,539.	156,69	0.
PRESIDENT	(ii)	0	0	0.	0	0.		0.
	(3)							
	(ii)							
	Ξ							
	(ii)							
	(3)							
	(ii)							
	(i)							
	(ii)							
	Θ							
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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. OMB No 1545-0047 Open to Public Inspection

Name of the organization

GENERAL TEAMSTERS LOCAL #431

Employer identification number 94-0577293

FORM 990, ITEM K, OTHER FORM OF ORGANIZATION:
SUBORDINATE IN GROUP RULING
FORM 990, PART VI, SECTION A, LINE 7A:
ALL EXECUTIVE BOARD MEMBERS ARE ELECTED BY THE LOCAL'S MEMBERSHIP.
FORM 990, PART VI, SECTION A, LINE 7B:
THE EXECUTIVE BOARD MAY NOT TERMINATE OR MERGE THE ORGANIZATION WITHOUT
MEMBERSHIP APPROVAL.
FORM 990, PART VI, SECTION B, LINE 11:
THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTANT AND PROVIDED TO THE
EXECUTIVE BOARD FOR APPROVAL PRIOR TO SUBMISSION TO THE IRS.
FORM 990, PART VI, SECTION C, LINE 19:
COPIES OF THE LOCAL'S GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE
AVAILABLE UPON WRITTEN REQUEST SENT TO THE LOCAL'S ADMINISTRATIVE OFFICES.
FORM 990, PART XII, LINE 1 - METHOD OF ACCOUNTING
THE ORGANIZATION USES THE MODIFIED CASH BASIS OF ACCOUNTING,
RECOGNIZING REVENUE WHEN RECEIVED AND EXPENSES WHEN PAID, OTHER THAN
DUES RECEIVED ON BEHALF OF AFFILIATES THAT REMAINS UNPAID AT THE END OF
THE YEAR, WHICH IS RECOGNIZED AS A LIABILITY.
FORM 990, PART XII, LINE 2C
NO CHANGE FROM PRIOR YEAR.
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2015) 09-02-15

Schedule O (Form 990 or 9 Name of the organization		TEAMSTERS	T.OCAT.	# 4 31		Employer identification number 94-0577293
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