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Department of the Treasury

EXTENDED TO NOVEMBER 15, 2017

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.

Open to Public

Interna	I Keven	Information about Fo	rm 990 and its instructions is	s at www.ii	S.gov/10/m990.	Inspection
A F	or the	2016 calendar year, or tax year beginning	and	ending		
B CI	neck if	C Name of organization			D Employer identi	fication number
	Addres change	GENERAL TEAMSTERS LOCAL	L #431			
	Name change	Doing business as			94-	0577293
	Initial return	Number and street (or P.O. box if mail is not deli	vered to street address)	Room/suite	E Telephone numb	per
<u> </u>	Final	1140 WEST OLIVE)		(55)	
L	return/ termin-		ZID or foreign postal code			
	ated]Amend	City of town, state of province, country, and	ZIP of foreign postal code		G Gross receipts \$	1,609,794.
<u></u>	Jreturn	FRESNO, CA 33/20			H(a) Is this a group	
L.	Application				for subordinate	es? Yes X No
	pendin	9 1140 W. OLIVE, FRESNO,	CA 93728		H(b) Are all subordinates	included? Yes No
	ay-exe	mpt status: 501(c)(3) X 501(c) (5)		or 527	If "No." attach	a list (see instructions)
		e: N/A			H(c) Group exempti	
_			sociation X Other SIJBO	D L Voor	of formation: 1950	M State of legal domicile: CA
		organization, C	SOCIETOR POPUL	JIV L TEAL	oriorination, 1950	M State of legal domicile, CA
Ра	rt I	Summary				
е	1	Bnefly describe the organization's mission or most	significant activities LABO	R ORGA	NIZATION	
2						
Ë	2	Check this box 🕨 🔲 if the organization discor	itinued its operations or dispos	sed of more	e than 25% of its net a	assets
Ş	3	Number of voting members of the governing body	(Part VI, line 1a)		3	7
Ğ		Number of independent voting members of the gov			4	
ජ ේ		Total number of individuals employed in calendar y	·			
<u>ë</u> .	-		ear 2010 (Fait V, IIII 22)		5	
Activities & Governance		Total number of volunteers (estimate if necessary)			<u> 6</u>	
Ş	7 a	Total unrelated business revenue from Part VIII, co	lumn (C), line 12		<u>7a</u>	
_	b	Net unrelated business taxable income from Form	990-T, line 34			0.
				<u> </u>	Prior Year	Current Year
•	8	Contributions and grants (Part VIII, line 1h)		}	1,373,323	1,477,475.
ž		Program service revenue (Part VIII, line 2g)			114,202	
Revenue	l	Investment income (Part VIII, column (A), lines 3, 4,	and 7d)		23,477	
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c,			1,796	
_		Total revenue - add lines 8 through 11 (must equal	Part VIII, column (A), IIDB 727		1,512,798	T
		Grants and similar amounts paid (Part IX, column (A		10		
	14	Benefits paid to or for members (Part IX, column (A), IIne 4) \	5013	$\frac{1}{23}$, 109.	23,820.
ģ	15	Salaries, other compensation, employee benefits (F	Part IX, column (A), lines 5-10)	601	為 23,109. 学 787,700.	838,973.
38	16a	Professional fundraising fees (Part IX, column (A), li	ne 11e)	ا ا ا	0.	
Expenses		Total fundraising expenses (Part IX, column (D), line	25) OGDE	No		
Ä		Other expenses (Part IX, column (A), lines 11a-11d,	11f-24e)		601,965.	666,872.
				<u> </u>	1,412,774	
		Total expenses Add lines 13-17 (must equal Part I)		-		
	19	Revenue less expenses. Subtract line 18 from line	12		100,024.	
Net Assets or Fund Balances	1			Be	ginning of Current Year	End of Year
ase	20	Total assets (Part X, line 16)			<u>496,828.</u>	571,404.
&B B	21	Total liabilities (Part X, line 26)		L.	224,283.	218,730.
훒	22	Net assets or fund balances Subtract line 21 from	line 20	[272,545.	352,674.
Pa	art II	Signature Block				
_		ulties of perjury, I declare that I have examined this return,	including accompanying schedules	and statem	ente and to the heet of n	ay knowledge and ballof it is
						ny knowiedge and belief, it is
true	, correc	t, and complete Doublestan of prepare (other han office	i i s based off air information of will	icii preparei	nas any knowledge.	
		Format officer			11-14	
Sig	n	Florence wells			Date	
Her	e	PETE NUNEZ, SECRETARY-	<u> </u>			
		Type or print name and title				
		Print/Type preparer's name	Preparer's signature		Date Check	X PTIN
Paid		DAWN ROGERS, CPA	Dawn Wor.	Ì	self-emplo	
			CPA		Firm's EIN	
	narer				Talli S EIN	48-1291875
Use	Only	Firm's address 3060 EL CERRITO				0 000 6445
		EL CERRITO, CA 9			Phone no. 5 1	0-990-6443
Ma	y the I	RS discuss this return with the preparer shown abo				X Yes No
6320	01 11-	11-16 LHA For Paperwork Reduction Act Notic	e, see the separate instruction	ns.		Form 990 (2016)

orm	990 (2016) GENERAL TEAMSTERS LOCAL #431	<u>94-0577293</u>	_Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	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?	Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
•	If "Yes," describe these changes on Schedule O.	, , , ,	140
4	Describe the organization's program service accomplishments for each of its three largest program services, as r	measured by expenses	1
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
	revenue, if any, for each program service reported.	o, the total expenses, t	and
40			
4a	(Code) (Expenses \$) (Revenue PROVIDING LOCAL UNION MEMBERSHIP WITH CONTRACT NEGOTIATI)
		ON SUPPORT	
	SERVICES		
			·
			
			
4b	(Code) (Expenses \$	\$)
	PROVIDING LOCAL UNION MEMBERSHIP WITH SUPPORT SERVICES		
			
			
4c	(Code) (Expenses \$) (Revenue)
	PROVIDING LOCAL UNION MEMBERSHIP WITH CONTRACT SUPPORT S	ERVICES	
		·	
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses		
		Form QC	2016)

Form 990 (2016) GENERAL TEAMSTERS LOCAL #431 94-0577293 Page 3
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	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]	1
_	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		j	}
_	during the tax year? If "Yes," complete Schedule C, Part II	4	 	┼──
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_		}
_	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5	X	
6	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		1	х
_	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6	 	├ ┻
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	1	x
_	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		 	^
8	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	-		^
9	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?	1	ì	
	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	- <u>-</u> -		
	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	<u> </u>		
• •	as applicable	}		1
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			ì
	Part VI	11a	X	
ь	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 167 If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VIII	11c		X
đ	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	(i		-
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	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		<u> </u>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		_X_
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			v
4-	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		<u> </u>
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	45	}	v
40	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		<u> </u>
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	ļ	v
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		<u>X</u>
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	ļ	X
10	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	-''-		_4_
18	1c and 8a? If "Yes," complete Schedule G, Part II	18	1	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	_ <u>~</u>		 -
13	complete Schedule G, Part III	19	ļ	_X
		Form	990 a	
			v	,

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<u> </u>	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	1		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	-	•	}
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	1		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	-{		
	Schedule J .	23	X	ļ
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	Ì		
	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	1		
	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	} 1	1	
	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,"	1 1	}	
	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	1 1		
	of any of these persons? If "Yes," complete Schedule L, Part III	27	}	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)	1 1	l	
а	the state of the s	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
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	I	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	1 1		
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	} }	Ţ	
	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	} }	Ī	
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	1 1		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	1	T	
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		Form	990 c	2016

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 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 11 1a 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 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 11 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? X 3a 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)? X 4a If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? Х 5b 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? X 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). 7 a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? X 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7¢ X d If "Yes," indicate the number of Forms 8282 filed during the year 7d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter. a initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? X If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Form 990 (2016)

GENERAL TEAMSTERS LOCAL #431 94-0577293 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management No Yes 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. b Enter the number of voting members included in line 1a, above, who are independent 0 1b 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? X 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? X 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Did the organization have members or stockholders? 6 X 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? X 8a Each committee with authority to act on behalf of the governing body? X 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 Did the organization have local chapters, branches, or affiliates? 10a 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? X 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 Did the organization have a written whistleblower policy? X 13 13 Did the organization have a written document retention and destruction policy? X 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 Other officers or key employees of the organization X 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 Other (explain in Schedule O) Own website 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:

93728

632006 11-11-18

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)	(B)				 C)			ed any current officer, o	(E)	(F)
Name and Title	Average	(40	Position to not check more than one					Reportable	Reportable	Estimated
	hours per	box	, unie	ss pe	rson	is bot	han	compensation	compensation	amount of
	week		cer ar	io a o	recu	ornirus	(tee)	from	from related	other
	(list any hours for	Individual trustee or director						the organization	organizations (W-2/1099-MISC)	compensation
	related	ee oc	Stee			nsate	[(W·2/1099-MISC)	(VV-2/1099-IVII3C)	from the organization
	organizations	trust	al tru		oyee	ed mo		(** = * * * * * * * * * * * * * * * * *		and related
	below	Mdua	Institutional trustee	.ec	Кеу етрюуее	Highest compensated employee	Former			organizations
	line)	Ē	<u>=</u>	Officer	<u>\$</u>	2 E	호		 	
(1) LENNIE WELLS	40.00		}		1	}	} }			
RECORDING-SECRETARY	ļ		ļ	X		 		87,813.	0.	45,392.
(2) PETER NUNEZ	40.00	}				ł				
PRESIDENT	ļ	<u> </u>		X	<u> </u>	Ļ		119,538.	0.	45,392.
(3) RODNEY HOLLETT	5.00]	1				
TRUSTEE	 		L	X	Ì	<u> </u>		4,231.	0.	0.
(4) EDGAR AMENDE	5.00	}					} {		_	
TRUSTEE				X	ļ			3,365.	0.	0.
(5) STEVE SHARP	5.00							4		
TRUSTEE	F 00	<u> </u>		X				4,559.	0.	0.
(6) FRED WILSHAW	5.00	{ ;								_
VICE-PRESIDENT	F 00			X		-		4,612.	0.	0.
(7) CHRIS GARLICK	5.00							2 265		_
TRUSTEE	 					-		3,365.	0.	<u> </u>
	ļ			1						
	 									
				1			}			
	 									
			}							
	 	-								
			Ì	}						
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	1			-+	\rightarrow	\rightarrow	+			
	'	ŀ	- 1	- 1	ŀ	1	- 1	l l	1	

632007 11-11-16

	Name and business address	NONE	Description of services	Compensation
- ,, -				
2	Total number of independent contractors (including bu \$100,000 of compensation from the organization	ut not limited to those	listed above) who received more than	
				Farm 990 (001)

632008 11-11-16

		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a b c d e	Membership dues	1c 1d 1d 1e 1s, and 1e 1s	477,475.				
들임	g	Noncash contributions included in lines	1a-1f \$					
ပ္သန္မ	<u> </u>	Total, Add lines 1a-1f			1,477,475.		~	
Ì			100000	Business Code	442 546	440 =40		
Se	2 a			900099	113,719.	113,719.		
Program Service Revenue	þ			}			·	
M S	C			}				
Rea	d			ļ				
<u>۾</u>	•	All other program service reve	nue					
_ }	' a	Total. Add lines 2a-2f		>	113,719.			<u> </u>
	3	Investment income (including	dividends, intere	est, and				†
}	_	other similar amounts)		>		}		}
Ì	4	Income from investment of tax	x-exempt bond p	oroceeds 🕨				
}	5	Royalties	<u></u>					
1			(ı) Real	(II) Personal	}			
	6 a	Gross rents		 	}			
	b	Less [,] rental expenses			,	}		j
j	c	Rental income or (loss)	L	L	Ì			}
}		Net rental income or (loss)	r-:	, >				
}	7 a	Gross amount from sales of	(i) Securities	(II) Other				}
İ		assets other than inventory	2,400.					}
ļ	b	Less. cost or other basis	0.					
}		and sales expenses	2,400.					
1	_	: Gain or (loss) I Net gain or (loss)	2,400.		2,400.	2,400.		
i	d	Gross income from fundraising	a events (not		2,400.	2,400.		
an l	8 а	including \$	of	1		1		
Ver		contributions reported on line						
Other Reven		Part IV, line 18	. a	}		ļ		•
흝	b	Less. direct expenses	b			Ì		
0		Net income or (loss) from fund	draising events	>				
}	9 a	Gross income from gaming ac	tivities. See	Ì				
į		Part IV, line 19	а					1
}	b	Less: direct expenses	b	L				
ĺ		Net income or (loss) from gam						
	10 a	Gross sales of inventory, less	returns	Ì	Ì			
		and allowances	а		1			ļ
		Less. cost of goods sold	, b	L	}	ļ		}
	c	Net income or (loss) from sale		D				
		Miscellaneous Revenu REIMBURSED EXPE		Business Code 900099	15,613.	15,613.		
		REIMBURSED EXPE		900099	587.	587.		
			TOTTOMET	700033	301.	30/.		
		:						
		Total. Add lines 11a-11d		>	16,200.			
	12	Total revenue. See instructions.			1,609,794.	132,319.	0.	0

Form 990 (2016) GENERAL TEAMSTERS LOCAL #431 94-0577293 Page 10
Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must com			omplete column (A)	· · · · · · · · · · · · · · · · · · ·
	Check if Schedule O contains a respor	ise or note to any line in (A)		(C)	<u> </u>
	ot include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations	1			
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16	22 020		 	
4	Benefits paid to or for members	23,820.			
5	Compensation of current officers, directors,	210 267		}	
	trustees, and key employees	318,267.		 	
6	Compensation not included above, to disqualified			1	
	persons (as defined under section 4958(f)(1)) and	ł		1	
	persons described in section 4958(c)(3)(B)	294,292.		 	
7	Other salaries and wages	434,434.		 	
8	Pension plan accruals and contributions (include	02 520			
_	section 401(k) and 403(b) employer contributions)	83,520. 99,654.		l	
9	Other employee benefits	43,240.		 	
10	Payroll taxes	43,240.		 	
11	Fees for services (non-employees).				
a	Management	23,548.		 	
b	Legal	16,300.		 	
C	Accounting .	10,500.		 	
a	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees			 	
g	Other (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O.)	2,133.			
12	Advertising and promotion	200.			
13	Office expenses	90,244.			
14	Information technology				
15	Royalties				
16	Occupancy	18,238.			
17	Travel	42,545.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	·			
19	Conferences, conventions, and meetings	10,274.			
20	Interest	4,468.			
21	Payments to affiliates	391,563.			
22	Depreciation, depletion, and amortization	32,509.			
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	AUTOMOBILE EXPENSES	19,776.			
b	COMMUNUTIY OUTREACH	7,700.			
c	CONTRIBUTIONS TO LABOR	5,300.			
d	PROMOTIONAL ITEMS	2,074.			·
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,529,665.			
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined	{		{	
	educational campaign and fundraising solicitation.			{	
	Check here if following SOP 98-2 (ASC 958-720)	· <u>-</u>			·

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Par		Balance Sileet	to any board to State			
		Check if Schedule O contains a response or note	to any line in this Part X	/A>	Ţ	
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		203,085.	1	302,760
	2	Savings and temporary cash investments	Ì	2,768.		2,768
	3	Pledges and grants receivable, net	j		3	=1.00
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and for				
İ	_	trustees, key employees, and highest compensat		{		
1		Part II of Schedule L	{		5	
	6	Loans and other receivables from other disqualified	ed persons (as defined under			
		section 4958(f)(1)), persons described in section	1958(c)(3)(B), and contributing		}	
		employers and sponsoring organizations of section	on 501(c)(9) voluntary			
S.		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	
	9	Prepaid expenses and deferred charges	1		9	
	10a	Land, buildings, and equipment: cost or other				
	1	basis. Complete Part VI of Schedule D	10a 560,206.]	
	b	Less accumulated depreciation	10b 295,115.	290,190.	10c	265,091.
	11	Investments - publicly traded securities			11	
	12	Investments - other securities See Part IV, line 11			12	
	13	Investments - program-related See Part IV, line 1	!		13	
	14	Intangible assets		14	- 	
	15	Other assets See Part IV, line 11		785.	15	785.
	16	Total assets. Add lines 1 through 15 (must equal	line 34)	496,828.	16	571,404.
	17	Accounts payable and accrued expenses	<u> </u>	119,000.	17	132,900.
	18	Grants payable	<u> </u>		18	
	19	Deferred revenue	Ļ		19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Pa			21	
es	22	Loans and other payables to current and former of	•		}	
#	1	key employees, highest compensated employees	, and disqualified persons		1	
Liabilities		Complete Part II of Schedule L		105 202	22	0F 000
	23	Secured mortgages and notes payable to unrelate	·	105,283.	23	85,830.
	24	Unsecured notes and loans payable to unrelated	T .		24	
	25	Other liabilities (including federal income tax, paya	,		{	
	1	parties, and other liabilities not included on lines 1	7-24). Complete Part X of		25	
	00	Schedule D Total liabilities. Add lines 17 through 25	ţ	224,283.	25 26	218,730.
	26	Organizations that follow SFAS 117 (ASC 958),	check here ▶ X and		20	210,/30.
/ 0	ļ	complete lines 27 through 29, and lines 33 and			į	
ĕ	27	Unrestricted net assets	· · ·	269,777.	27	349,906.
aga	28	Temporarily restricted net assets	· }	2,768.	28	2,768.
Ä	29	Permanently restricted net assets	27,000	29	21100.	
Š		Organizations that do not follow SFAS 117 (AS	C 958), check here ▶			
ᅜ	}	and complete lines 30 through 34.				
<u>ş</u>	30	Capital stock or trust principal, or current funds	į		30	
SSE	31	Paid-in or capital surplus, or land, building, or equ	pment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated inco			32	·
ž	33	Total net assets or fund balances		272,545.	33	352,674.
	34	Total liabilities and net assets/fund balances		496,828.	34	571,404.

Form	990 (2016) GENERAL TEAMSTERS LOCAL #431	94	-0577293	Pa	ae 12
Par	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
	•				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,609		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,52	6, 6	65.
3	Revenue less expenses. Subtract line 2 from line 1	3			29.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	27:	2,5	45.
5	Net unrealized gains (losses) on investments	5	· · · · · · · · · · · · · · · · · · ·		
6	Donated services and use of facilities .	6			
7	Investment expenses	7			
8	Prior period adjustments .	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	1			
	column (B))	10	352	2,6	74.
Par	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		·····		X
1	Accounting method used to prepare the Form 990. Cash Accrual X Other MODIFIE If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	if "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both		1 1		
	Separate basis Consolidated basis Both consolidated and separate basis			į	
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs	,		
	consolidated basis, or both. X Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit.		}	
	review, or compilation of its financial statements and selection of an independent accountant?	,	2c		Х
	If the organization changed either its oversight process or selection process during the tax year, explain in Schi	edule C			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir		1 1		
	Act and OMB Circular A-133?	-	3a	}	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red auc			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		36		
			Form 9	90 (2	2016)

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.

2016

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) organ 	izations Complete Part III			
Name of organization			Emp	loyer identification number
GENER	AL TEAMSTERS LOCA	L #431	·····	94-0577293
Part I-A Complete if the	organization is exempt un	der section 501(c) or is a section 527 (organization.
·	anization's direct and indirect polit	ical campaign activitie		
2 Political campaign activity exper		•	▶ 9	50
3 Volunteer hours for political carr	paign activities		•	0
Darl B. Camalata if the	insting is even at un	der section EO4/s	-1(0)	
	organization is exempt un			
	tax incurred by the organization untax incurred by organization mana		F 5	<u> </u>
	ction 4955 tax, did it file Form 472		DD .	S
3 If the organization incurred a set 4a Was a correction made?	SHOTI 4955 tax, Gio it life i Offit 472	o tot titis year?		Yes No
b If "Yes," describe in Part IV				Yes No
Part I-C Complete if the	organization is exempt un	der section 501(c), except section 501	(c)(3).
1 Enter the amount directly expen				5
2 Enter the amount of the filing or				'
exempt function activities	,	and organization of	▶ 9	.
•	ires. Add lines 1 and 2 Enter here	and on Form 1120-PO	N .	·
line 17b			, • \$	
4 Did the filing organization file Fo	rm 1120-POL for this year?			Yes No
	l employer identification number (E	EIN) of all section 527 r	political organizations to which	
	nization listed, enter the amount pa			
	promptly and directly delivered to			
	. If additional space is needed, pro			
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
(a) Hamb	(3)	(5) =	filing organization's	contributions received and
	}	}	funds. If none, enter -0	promptly and directly
	1			delivered to a separate political organization
	}	}		If none, enter -0-
				
		}	1	
			1	

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

Schedule C (Form 990 or 990-EZ) 2016

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Schedule C (Form 990 or 990 EZ) 2016 G Part II-A Complete if the orga	ENERAL TEA	MSTERS LOCA mpt under section	AL #431 on 501(c)(3) and file	94- ed Form 5768 (e	0577293 Page 2 election under
section 501(h)).					
A Check > i if the filing organization	on belongs to an aff	iliated group (and list	n Part IV each affiliated	group member's na	me, address, EIN,
expenses, and share	· ·	•			
B Check 🕨 🔛 if the filing organization	on checked box A a	nd "limited control" pr	ovisions apply		
	on Lobbying Expe tures" means amou	nditures unts paid or incurred	.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	ence public opinion ((grass roots lobbying)			
b Total lobbying expenditures to influe					
c Total lobbying expenditures (add line					
d Other exempt purpose expenditures			. [
e Total exempt purpose expenditures		d)			
f Lobbying nontaxable amount Enter			th columns.		
if the amount on line 1e, column (a) 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 \$1,000,0	000 \$100,00	00 plus 15% of the ex	cess over \$500,000.		
Over \$1,000,000 but not over \$1,500	0,000 \$175,00	00 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,00	00,000 \$225,00	00 plus 5% of the exce	ess over \$1,500,000		
Over \$17,000,000	\$1,000,	000			}
j If there is an amount other than zero reporting section 4911 tax for this ye (Some organizations that	ear? 4-Year Ave at made a section 5	eraging Period Under	section 501(h) have to complete all of	f the five columns l	Yes No
		nditures During 4-Ye			
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(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))					

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Schedule C (Form 990 or 990 EZ) 2016 GENERAL TEAMSTERS LOCAL #431 94-057729 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 e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(6	a)	(b)
	e lobbying activity.	Yes	No	Am	ount
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				
	Volunteers?	ļ	<u> </u>		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		<u></u>	ļ	
¢	Media advertisements?			<u></u>	
	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				 _
f	· · · · · · · · · · · · · · · · · · ·				
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			<u></u>	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	}		} 	
	If "Yes," enter the amount of any tax incurred under section 4912	}		·	
_	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			·	
_	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? † III-A Complete if the organization is exempt under section 501(c)(4), sec	tion FO1(a)	/E\	-4:	
Par	<u>t III-A</u> Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6).	tion sur(c)	(5), or se	ction	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	X		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from			X	
	t III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."				e 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	itical	1 1		
	expenses for which the section 527(f) tax was paid).		1 1		
а	Current year	2a			
b	•	2b			
C		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the e				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
	expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information		5		
Prov	ide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated grouptions), and Part II-B, line 1. Also, complete this part for any additional information	up list), Part II-	A, lines 1 a	nd 2 (see	
					
		 ,			
		Schedule	e C (Form s	990 or 990	-FZ) 2016

SCHEDULE D

(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.irs.gov/form990.

OMB No 1545-0047 2016

Department of the Treasury Internal Revenue Service

Open to Public Inspection

Name	GENERAL TEAMSTERS	LOCAL #	431	}	Emp	94-05772	
Par				s or A	ccou	nts. Complete if the	1e
	organization answered "Yes" on Form 990, Part IV, III					,	
			onor advised funds	(t) Fund	is and other accou	unts
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 th	ne assets held in donor advi	sed fund	is		
•	are the organization's property, subject to the organization's					Yes	☐ No
6	Did the organization inform all grantees, donors, and donor			used o	niv		
•	for charitable purposes and not for the benefit of the donor		-		-		
	impermissible private benefit?		, , ,		J	Yes	☐ No
Par		rganization an:	swered "Yes" on Form 990,	Part IV,	line 7		
1	Purpose(s) of conservation easements held by the organizat	tion (check all	that apply)				
•	Preservation of land for public use (e.g., recreation or		Preservation of a his	torically	mporta	ant land area	
	Protection of natural habitat		Preservation of a cer	-			
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a quali	ified conserva	tion contribution in the form	of a cor	nservat	ion easement on t	he last
_	day of the tax year			ſ		Held at the End of th	
а	Total number of conservation easements			[2a		
b	Total acreage restricted by conservation easements			[2b		
C	Number of conservation easements on a certified historic sti	ructure includ	ed ın (a)	ſ	2c		
d	Number of conservation easements included in (c) acquired	after 8/17/06,	and not on a historic struct	ture			
	listed in the National Register .			}	2d		
3	Number of conservation easements modified, transferred, re	∍leased, extinç	juished, or terminated by th	e organi	zation	during the tax	
	year ▶						
4	Number of states where property subject to conservation ea	asement is loca	ated >				
5	Does the organization have a written policy regarding the pe	riodic monitor	ing, inspection, handling of				
	violations, and enforcement of the conservation easements	it holds?				Yes	☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, handling of v	iolations, and enforcing con	servatio	n ease	ments during the y	ear ear
	>						
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violation	ons, and enforcing conserva	ation eas	ement	s during the year	
	▶ \$						
8	Does each conservation easement reported on line 2(d) above	ve satisfy the	requirements of section 170)(h)(4)(B)	(t)		
	and section 170(h)(4)(B)(ii)?	-				Yes Yes	L No
9	In Part XIII, describe how the organization reports conservat	ion easements	s in its revenue and expense	e statem	ent, an	d balance sheet, a	ind
	include, if applicable, the text of the footnote to the organiza	ition's financia	I statements that describes	the orga	anızatıo	n's accounting for	
,	conservation easements.						
Pa	t III Organizations Maintaining Collections o			ther S	ımila	r Assets.	
	Complete if the organization answered "Yes" on Form					·	
1a	If the organization elected, as permitted under SFAS 116 (AS						
	historical treasures, or other similar assets held for public exi			ınce of p	ublic s	ervice, provide, in	Part XIII,
	the text of the footnote to its financial statements that descri						
b	If the organization elected, as permitted under SFAS 116 (AS						
	treasures, or other similar assets held for public exhibition, e	ducation, or re	esearch in furtherance of pu	blic serv	ice, pro	ovide 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 tre			al gaın, p	rovide		
	the following amounts required to be reported under SFAS 1	116 (ASC 958)	relating to these items:				
а	Revenue included on Form 990, Part VIII, line 1				▶ \$		
	Assets included in Form 990, Part X				▶ \$	·	
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 99	0.		S	chedule D (Form s	990) 2016

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		TEAMSTERS				94-0	57729	13 F	Page 2
Par						Similar Ass	ets(conti	ınued)
3	Using the organization's acquisition, access	ion, and other recor	ds; check any	of the following that	at are a sign	ificant use of if	is collectic	n iter	ns
	(check all that apply).								
а	Public exhibition	•	d Loan	or exchange progr	ams				
b	Scholarly research	•	e L Othe	r					
C	Preservation for future generations								
4	Provide a description of the organization's of	ollections and expla	แก how they fเ	ırther the organızat	ion's exemp	t purpose in P	art XIII		
5	During the year, did the organization solicit of	or receive donations	of art, historic	cal treasures, or oth	ner sımılar as	sets			
	to be sold to raise funds rather than to be m						Yes		No
Par	t IV Escrow and Custodial Arrar		lete if the orga	ınızatıon answered	"Yes" on Fo	rm 990, Part I	√, line 9, o	r	
	reported an amount on Form 990, Pa								
1a	Is the organization an agent, trustee, custoo	lian or other interme	diary for conti	ributions or other as	ssets not inc	luded			_
	on Form 990, Part X?						Yes		No
b	b If "Yes," explain the arrangement in Part XIII and complete the following table.								
							Amoun	it	
C	Beginning balance		•			1c			
d	Additions during the year			•		1d			
e	Distributions during the year .					1e			
f	Ending balance					11			
									No
	b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII								
Par	t V Endowment Funds. Complete	if the organization ar	nswered "Yes						
		(a) Current year	(b) Prior y	ear (c) Two yea	rs back (d)	Three years back	(e) Four	r years	back
1a	Beginning of year balance	<u> </u>	 						
b	Contributions .	ļ	}						
С	Net investment earnings, gains, and losses	ļ							
đ	Grants or scholarships	ļ					<u> </u>		
е	Other expenditures for facilities	1	[{				
	and programs		 						
f	Administrative expenses	ļ	ļ						
9	End of year balance	L	L						
2	Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:								
а	Board designated or quasi-endowment >%								
b	Permanent endowment >%								
C	Temporarily restricted endowment ►%								
	The percentages on lines 2a, 2b, and 2c should equal 100%								
За	Are there endowment funds not in the posse	ession of the organiz	ation that are	held and administe	red for the o	ırganızatıon	г		
	py.							Yes	No
	(i) unrelated organizations						3a(i)		
	(ii) related organizations		_				3a(ii)		
þ	If "Yes" on line 3a(ii), are the related organization						3b		
4	Describe in Part XIII the intended uses of the		owment funds						
Par	t VI Land, Buildings, and Equipn								
	Complete if the organization answere								
	Description of property	(a) Cost or o	1 1-) Cost or other	(c) Accur	í	(d) Book	c value	ө
		basis (investr	nent)	basis (other)	deprec	iation			
	Land	ļ		50,642.				0,6	
	Buildings	ļ		323,236.	19:	1,235.	132	2,0	01.
_	Leasehold improvements	ļ		106 101					
_	Equipment	ļ		106,424.		7,156.		2.2	
	Other .			79,904.	76	5,724.		3,18	
Total	Add lines 1a through 1e. (Column (d) must e	aguai Form 990. Part	x column (R)	une 10c)		► i	つんち	รถเ	นา

Schedule D (Form 990) 2016

To	Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)	
2.	2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial stat	ements that reports the
	organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote h	as been provided in Part XIII

Schedule D (Form 990) 2016

(6) (7) (8)

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. OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

GENERAL TEAMSTERS LOCAL #431

Employer identification number 94-0577293

Pa	rt I Questions Regarding Compensation		_	
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990	٠,		}
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.	-	1	}
	First-class or charter travel Housing allowance or residence for personal u	ise	}	
	Travel for companions Payments for business use of personal resider	nce	1	1
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	}	1	l
	Discretionary spending account Personal services (such as, maid, chauffeur, cl	hef)		1
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		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			1
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		ļ
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	,		ļ
	establish compensation of the CEO/Executive Director, but explain in Part III.			1
	Compensation committee Written employment contract	1		ı
	Independent compensation consultant Compensation survey or study	1		
	Form 990 of other organizations Approval by the board or compensation comm	uttee		
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			
	Receive a severance payment or change-of-control payment?			37
a	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4a		X
b	Participate in, or receive payment from, an equity-based compensation arrangement?	4b		X
С	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4c		
	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		1	
5	contingent on the revenues of.		1	
а	The organization?	5a		
	Any related organization?	5b		
_	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	}	ì	
•	contingent on the net earnings of	1	1	
а	The organization?	6a	ļ	
b	Any related organization?	6b		
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	1 1	}	
	not described on lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	<u> </u>		
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	1	
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	-		
-	Regulations section 53 4958-6(c)?	9	- 1	
		Schedule J (Form	9901	2016

Schedule J (Form 990) 2016

GENERAL TEAMSTERS LOCAL #431

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 aren't 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	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	1
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(Q)-())(g)	in column (B) reported as deferred on prior Form 990
(1) DEMED MINE?	9	119.538.	0	0	0	45,392.	164,930.	0
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SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047 2016

Department of the Treasury Internal Revenue Service

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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 O	RGANIZATION WITHOUT
MEMBERSHIP APPROVAL.	
FORM 990, PART VI, SECTION B, LINE 11B:	
THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTANT AND	D 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 FINANCE	IAL STATEMENTS ARE
AVAILABLE UPON WRITTEN REQUEST SENT TO THE LOCAL'S A	DMINISTRATIVE OFFICES.
FORM 990, PART XII, LINE 1 - METHOD OF ACCOUNTING	
THE ORGANIZATION USES THE MODIFIED CASH BASIS OF ACCO	OUNTING,
RECOGNIZING REVENUE WHEN RECEIVED AND EXPENSES WHEN I	PAID, OTHER THAN
DUES RECEIVED ON BEHALF OF AFFILIATES THAT REMAINS UP	NPAID 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. 832211 08-25-16	Schedule O (Form 990 or 990-EZ) (2016)

Schedule O (Form 990 or	330-EZ] (2010)					Page 2
Name of the organization	GENERAL	TEAMSTERS	LOCAL	4 31		Employer identification number 94-0577293
•						
						
						
						
						
	 					
						
						
						
				<u> </u>		
						
						
						
						
						
						

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