efile GRAPHIC print - DO NOT PROCESS As Filed Data -

For Paperwork Reduction Act Notice, see the separate instructions.

DLN: 93493125005068

OMB No 1545-0047

Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public

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

Cat No 11282Y

Form **990** (2017)

Open to Public

Intern	al Reve	nue Service	? Information about	. Form 990 and its instructions is at <u>wv</u>	<u>vw IRS gov</u>	<u>/10/m990</u>		Inspection	
A F	or the	e 2017 c		ning 01-01-2017 , and ending 12-	31-2017				
□ Ac		pplicable change ange	C Name of organization INTERNATIONAL BROTHERHOOD OF	TEAMSTERS LOCAL UNION 71		D Employer 56-02764		ication number	
☐ In	itial ret	turn	Doing business as						
		n/terminated 1 return	Number and street (or P O box if ma	ıl ıs not delivered to street address) Room/	suite	E Telephone	number		
□ Ap	plicatio	on pending				(704) 596	5-2475		
			City or town, state or province, count CHARLOTTE, NC 28214		_	G Gross rece	ıpts \$ 1,	,661,112	
			F Name and address of principal JOSEPH R EASON JR	officer		s this a group retu	rn for	□Yes ☑No	
			2529 BELTWAY BLVD CHARLOTTE, NC 28214		H(b) A	ubordinates? are all subordinates	5	Yes No	
I Ta	ax-exen	npt status		insert no)	- 1	ncluded? f "No," attach a lis:	t (see		
J W	/ebsit	e: >		, , , , , , , , , , , , , , , , , , , ,	1	Group exemption n	•	•	
K For	m of or	ganızatıon	Corporation Trust Assoc	oration Other •	L Year of	formation 1940	1 State	of legal domicile NC	
Pa	art I	Sum	mary						
	1 E	Briefly des	scribe the organization's mission or	most significant activities					
ce		ABOR OR							
nan	-								
ven	,	Check thi	us hox >	continued its operations or disposed of	more than	25% of its net ass	ets		
3				g body (Part VI, line 1a)			3	7	
× 5	1			the governing body (Part VI, line 1b)			4	0	
Activities & Governance			mber of individuals employed in cale			5	18		
	1		·	essary)			6 7a	0	
	1			Form 990-T, line 34			7a 7b		
	+ -	THEE GITTE	lated business taxable medite from	101111 330 1, 1111 3 1 1 1 1		Prior Year	1	Current Year	
	8	Contribut	tions and grants (Part VIII, line 1h)					0	
Rayenue	9	Program	service revenue (Part VIII, line 2g)		1,671,24				
Rọv	1		ent income (Part VIII, column (A), l	, ,		25,85	.2	17,766	
	1		venue (Part VIII, column (A), lines			6,22		35,682 1,661,112	
	+			et equal Part VIII, column (A), line 12)		1,703,330 6,075			
			nd similar amounts paid (Part IX, co paid to or for members (Part IX, co	, ,,		2,50		4,325 5,000	
S	1			nefits (Part IX, column (A), lines 5–10)		932,55		954,466	
Expenses		-	onal fundraising fees (Part IX, colun	, , , , , , , , , , , , , , , , , , , ,		·		, , , , , , , , , , , , , , , , , , ,	
e do	Ь	Total fundr	raising expenses (Part IX, column (D), lir	ne 25) ▶ 0		1			
ū	17	Other exp	penses (Part IX, column (A), lines 1	l1a-11d, 11f-24e)		754,80	3	732,217	
	1	•	penses Add lines 13-17 (must equa			1,695,93		1,696,008	
٥	19	Revenue	less expenses Subtract line 18 fro	m line 12	Regin	7,39		-34,896 End of Year	
Net Assets or Fund Balances									
Ass Bat			sets (Part X, line 16)			2,280,56		2,312,652	
E P	1		oilities (Part X, line 26)			70,40		146,460	
		_	ts or fund balances Subtract line 2	1 from line 20		2,210,16	0	2,166,192	
Unde		alties of p		ned this return, including accompanyin					
know		and belie		Declaration of preparer (other than of					
<u>, .</u>		lk							
		* * * * * * * Signati	* ure of officer			2018-05-05 Date			
Sigr	Sign /		CT IZ IMPENNI CECRETARY TREACURER						
			or print name and title						
			Print/Type preparer's name	Preparer's signature Richard J Pope CPA	Date 2018-05-05	Check I if PT:	ĪN		
Pai	d	<u> </u>	Richard J Pope CPA	self-employed					
	pare	*' -	Firm's name THE POPE CPA FIRM PA	Firm's EIN	0.7000				
Use	e On	ly ⁺	Firm's address ► 5108 MONROE ROAD Su			Phone no (704) 56	ъ-/960		
May	the ID	S discuss	CHARLOTTE, NC 28205			I		res 🗆 No	
ייום ۷ '	ane IK.	UISCUSS	s una recum with the brebarer snow	ii apover isee MSUUCHONSI			Y	ca 1110	

Form	990 (2017)					Page 2
Par	t IIII Statement	of Program Service Acc	omplishments			
	Check If Sche	edule O contains a response or	note to any line in this Part III			. 🗆
1	Briefly describe the	organization's mission				
LABO	OR ORGANIZATION					
2	-	· •	gram services during the year which v	vere not listed on		
	the prior Form 990 c	or 990-EZ?			☐ Yes 🗸	No
	•	ese new services on Schedule				
3	Did the organization	cease conducting, or make sig	gnificant changes in how it conducts, a	any program		_
					Yes	✓ No
	If "Yes," describe the	ese changes on Schedule O				
4	Section $501(c)(3)$ ar		plishments for each of its three large: required to report the amount of grai ervice reported			
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)	
	See Additional Data					
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)	
	(C-1-	\ / \(\(\(\) \)) /D======= #		
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)	
						_
4d	Other program servi	ces (Describe in Schedule O)				
	(Expenses \$	ıncluding ç	grants of \$	(Revenue \$)	
4e	Total program ser	vice expenses ▶				

or X as applicable

Section 501(c)(3) organizations.

Page 3

No

Νo

Νo

Nο

Nο

Nο

Nο

No

Nο

Nο

Nο

Nο

No Νo

Nο

Nο

Νo

Nο

Nο

Νo

Form **990** (2017)

Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

Did the organization receive or hold a conservation easement, including easements to preserve open space,

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets?

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX,

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

13 Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

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

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

assessments, or similar amounts as defined in Revenue Procedure 98-19?

4 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right 6

7

8

9 10

11a

11b

11c

11d

13

14a

14b

15

16

17

18

19

3

Yes

Yes

29

20b

21

22

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

35a

35h

36

37

Yes

Form 990 (2017)

Page 4

Nο

Νo

Nο

Νo

Nο

Part IV	Checklist of Required Schedules (continued)

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

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,"

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a No

Fell	Checklist of Required Schedules (Continued)		
		Yes	No
20 0	1 H		

orm	990 (2017)			Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 2			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
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			
L	this return	2b	Yes	
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		103	
За	Did the organization have unrelated business gross income of $$1,000$ or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5b		<u> </u>
C	If res, to line 3a or 3b, did the organization line rorm 8000-17	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
7	Organizations that may receive deductible contributions under section 170(c).			
а	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		No
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 c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
_		7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
Qa.	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
LO	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
L1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
	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			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
L4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No

-orm	990 (2017)			Page 6
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	" respo	nse to li	
	Check if Schedule O contains a response or note to any line in this Part VI			<u> </u>
Se	ction A. Governing Body and Management			
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 7		Yes	No
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 0			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? •	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	e.)	_
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c		
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
	Other officers or key employees of the organization	15b		No
	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		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b		
	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest			
20	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 FERNICAL MARKING ASSOCIATION OF THE NO. 28214 (704) 506-2475			
	▶ERNEST K WRENN 2529 BELTWAY BLVD CHARLOTTE, NC 28214 (704) 596-2475			

Form 990 (2017) Page 7 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 • 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, or 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

(C)

Position (do not check more

(D)

Reportable

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

(B)

Average

(A)

Name and Title

hours per than one box, unless person amount of other compensation compensation week (list is both an officer and a from the from related compensation any hours director/trustee) organizations organization from the for related (W- 2/1099-(W- 2/1099organization and Highest employ individual to or director organizations MISC) MISC) related Institutional below dotted organizations emplo nest compensated line) Ø. trustee P | Trustee 60 00 (1) JOSEPH R EASON JR Χ 123,335 0 37,644 PRESIDENT 4 50 (2) HARRY F FERRELL Х 6,960 0 VICE PRESIDENT 60 00 (3) ERNEST K WRENN Х 120.422 0 37.644 SECRETARY TREASURER 4 50 (4) WANDA M PAULSON Х 0 Ω 7.268RECORDING SECRETARY 4 50 (5) JERRY J CROWELL Х 6,894 0 0 TRUSTEE 4 50 (6) ROSCOE KENDALL Х 6,787 0 Ω TRUSTEE 4 50 (7) LARRY D KISER JR Х 0 6,613 TRUSTEE

(F)

Estimated

(E)

Reportable

Part VII

Page 8

		,	,,		-,-	,					,		,	
	(A) Name and Tıtle	(B) Average hours per week (list any hours	verage Position (do not check more than one box, unless person eek (list is both an officer and a director/trustee) organiza						Repo compo fro organiz	(D) ortable ensation m the cation (W-	w-	compensation N- from the		
		for related organizations below dotted	indivi or di	ln str	Officer	Xev.	Highs	Former	2/109	9-MISC)	2/1099-MISC)	rela	ition and ited zations
		Institutional Trustee	Ŧ	key employee	Highest compens employee	₫					3			
			Individual trustee or director	31 Trus		, 6 6	mpen							
			•	4 4			sated							
	Sub-Total	art VII. Sectio	 n A .				•					T		
				٠.			•			278,279				75,288
2	Total number of individuals (including of reportable compensation from the			e liste	ed al	bove	e) who	rece	eived mo	re than \$1	.00,000			
													Yes	No
3	Did the organization list any former of line 1a? <i>If "Yes," complete Schedule 3</i>			ee, k	ey eı •	mplo •	oyee, o	or hi	ghest cor	mpensated	l employee on	3		No
4	For any individual listed on line 1a, is organization and related organization:	the sum of repo s greater than \$	ortable o 150,00	comp 0? <i>If</i>	ensa " <i>Yes</i>	ition	and complet	ther te Sc	compen chedule J	sation froi for such	n the			
	ındıvıdual			•	•	٠	•					4		No
5	Did any person listed on line 1a receiv services rendered to the organization									tion or ind	ividual for	5		No
Se	ection B. Independent Contract	ors											•	
1	Complete this table for your five higher from the organization Report comper											npen	sation	
	Name a	(A) and business addre	ess							(B) Description of services			(C) Compensation	

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

compensation from the organization ▶

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

Part \	/1			a resno	onse or note to any	line in this Part VI	II -			
		Check if Schedule	o contains	а гезр	onse of flote to ally	(A) Total revenue	Relat exe fund	B) ted or impt ction	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
10	1a	Federated campaigr	ns	1a			reve	enue		512-514
ants unte	b Membership dues 11									
ا الله الله	•	Fundraising events		1c						
iffs. ar A	ď	l Related organization	ns	1d						
<u>آ</u> ⊒ ئ	•	Government grants (co	intributions)	1e						
itions er Sil	f	 All other contributions, and similar amounts no above 	gıfts, grants, ot ıncluded	1f						
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contribution in lines 1a-1f \$	ns included							
3 E	h	Total.Add lines 1a-1	f		•					
KI e					Business					
rever	2a	DUES FEES				900099 1,	607,664	1,607,	664	
Program Service Revenue	b			_						
	c d			_						
ري ح	e			_						
graf	f	All other program ser	vice revenue	<u>.</u>						
Ĕ	g.	Total.Add lines 2a-2f			▶	07,664				
		investment income (ir			interest, and other	17,79	56			17,766
		imilar amounts) . Income from investme			•	,				<u>'</u>
		Royalties								
	_		(ı) Rea	I	(II) Personal					
	6a	Gross rents								
	b	Less rental expenses				1				
	С	Rental income or (loss)				-				
	d	Net rental income or	· (loss)			4				
	u	Net rental income of	(ı) Securi		(II) Other					
	7a	Gross amount from sales of	(1)		(", " = " : " : " : " : " : " : " : " : " :	-				
		assets other than inventory								
	b	Less cost or other basis and sales expenses]				
		Gain or (loss)				1				
		Net gain or (loss) . Gross income from fu			•	1				
Other Revenue		(not including \$ contributions reporte	d on line 1c)	of						
e v		See Part IV, line 18								
٦		Less direct expenses Net income or (loss)								
the		Gross income from g		_	ents •					
0		See Part IV, line 19		a						
	ь	Less direct expenses		a b		-				
		Net income or (loss)				1				
	10a	Gross sales of inventored allowance								
	b	Less cost of goods s	old	a b		-				
		Net income or (loss)				1				
		Miscellaneous	Revenue		Business Code					
	11	a REIMBURSEMENTS F	REFUNDS		900099	34,2.	57	34,257		
	b	SALES ORGANIZATION	DNAL SUPPLI	ES	900099	1,4.	25	1,425		
	C									
		All other revenue .								
	е	Total. Add lines 11a-	-11d			35,68	32			
	12	Total revenue. See	Instructions			1,661,1	12	1,643,346	<u></u> _	17,766
						. ,-	-			Farma 000 (2017)

	1 990 (2017)				Page 10
	rt IX Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complete all columns	lumns All other orga	ınızatıons must com	plete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX		<u></u>	🗆
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	2,550			
2	Grants and other assistance to domestic individuals See Part IV, line 22	1,775			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	0			
4	Benefits paid to or for members	5,000			
5	Compensation of current officers, directors, trustees, and key employees	353,567			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	374,868			
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	82,248			
9	Other employee benefits	90,171			
10	Payroll taxes	53,612			
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	25,094			
C	Accounting	12,180			
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,595			
12	Advertising and promotion	0			
13	Office expenses	41,851			
14	Information technology	6,658			
15	Royalties	0			
16	Occupancy	44,713			
	Travel	38,142			
	Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
19	Conferences, conventions, and meetings	13,677			
20	Interest	1,162			
21	Payments to affiliates	392,957			
22	Depreciation, depletion, and amortization	80,409			
	Insurance	8,939			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
•	a AUTO	31,804			
i	STEWARD EXPENSE	12,918			
•	NEW MEMBER FEES	6,550			
•	d GRIEVANCE EXPENSE	4,932			
•	e All other expenses	7,636			
25	Total functional expenses. Add lines 1 through 24e	1,696,008			
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)				

2

3

Fund Balances

Assets or 30

Net

27

28

29

31

32

33

34

(B)

End of year

(A)

Beginning of year

80,894

436.948

1,373,382

389.337

2,280,561

62 581

7.820

70,401

1.467.374

742.786

2,210,160

2.280.561

1

2 3

4

5

6

8 9

10c

11

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

34

Page **11**

72,588

493.782

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

1	Cash-non-interes

Cash-non-interest-bearing . Savings and temporary cash investments . . . Pledges and grants receivable, net . . . Accounts receivable, net .

Loans and other receivables from current and former officers, directors,

trustees, key employees, and highest compensated employees Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete

Part II of Schedule L Notes and loans receivable, net . . Inventories for sale or use . Prepaid expenses and deferred charges .

10a basis Complete Part VI of Schedule D 10b

10a Land, buildings, and equipment cost or other Less accumulated depreciation

Assets 11 Investments—publicly traded securities . Investments—other securities See Part IV, line 11 . 12 13 Investments—program-related See Part IV, line 11 .

14

Other assets See Part IV, line 11 Total assets.Add lines 1 through 15 (must equal line 34) . . .

Intangible assets 15 16 17 Accounts payable and accrued expenses Grants payable . . .

Deferred revenue Tax-exempt bond liabilities

18 19 20 21 22

Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L .

Unsecured notes and loans payable to unrelated third parties .

Liabilities 23 24 25 and other liabilities not included on lines 17-24)

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances .

Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 .

26

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets

Other liabilities (including federal income tax, payables to related third parties,

Secured mortgages and notes payable to unrelated third parties . . .

1,822,765

414,853

13 14 15 16 17

12

2.312.652

1,407,912

338.370

121.318

25.142

146,460

1,425,342

740.850

2,166,192

2.312.652

Form **990** (2017)

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

2a

2b

2c

3a

3b

Yes

Νo

Νo

No

Form **990** (2017)

If the organization changed its method of accounting from a prior year or checked "Other," explain in

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Schedule O

☐ Separate basis

consolidated basis, or both

Separate basis

Audit Act and OMB Circular A-133?

separate basis, consolidated basis, or both

Additional Data

Software ID: 17005317 **Software Version:** 18.2.0.0

EIN: 56-0276491

Form 990, Part III, Line 4a:

COLLECTIVE BARGAINING - 2,451 MEMBERS

Form 990 (2017)

ORGANIZE WORKERS, SECURE IMPROVE WAGES, HOURS, WORKING CONDITIONS OTHER ECONOMIC ADVANTAGES THROUGH ORGANIZATION NEGOTIATIONS

Name: INTERNATIONAL BROTHERHOOD OF TEAMSTERS LOCAL UNION 71

SCHEDULE C

(Form 990 or 990-

EZ)

Political Campaign and Lobbying Activities

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

DLN: 93493125005068

Open to Public Inspection

OMB No 1545-0047

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. Department of the Treasury Internal Revenue Service www.irs.gov/form990.

▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** INTERNATIONAL BROTHERHOOD OF TEAMSTERS LOCAL UNION 71 56-0276491 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes Was a correction made? 4a ☐ Yes ☐ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a

				organization If none, enter -0-
1				
2				
3				
4				
5				
6				
For Paperwork Reduction Act Notice, see t	he instructions for Form 990 or 990-EZ.	Cat	No 50084S Schedule C (Form 990 or 990-EZ) 2017

2a Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

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

instructions), and Part II-B, line 1 Also, complete this part for any additional information

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

Schedule C (Form 990 or 990-EZ) 2017

activity

Volunteers?

Media advertisements?

Return Reference

1

b

(b)

Amount

(a)

No

Yes

Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? 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? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 Yes 1 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Yes Did the organization agree to carry over lobbying and political expenditures from the prior year? No Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year c Total 2c 3 3 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? 4 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Explanation

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

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.

DLN: 93493125005068 OMB No 1545-0047

(Form 990)

Open to Public ▶ Attach to Form 990. Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Inspection Name of the organization **Employer identification number** INTERNATIONAL BROTHERHOOD OF TEAMSTERS LOCAL UNION 71 56-0276491 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 52283D

Assets included in Form 990, Part X

Schedule D (Form 990) 2017

Par	t III	Organizations Ma	aintaining Col	lections o	of Art, Hi	stori	cal T	reası	ıres, oı	Other	Similar A	ssets (con	tinued)	
3		g the organization's acq s (check all that apply)	uisition, accessioi	n, and other	records, c	heck	any of	the fo	llowing t	hat are a	significant	use of its co	llection	
а		Public exhibition				d		Loan	or exch	ange prog	ırams			
b		Scholarly research				е		Othe	r					
С		Preservation for future	generations											
4	Provi Part	ide a description of the o	organization's col	lections and	l explain ho	ow the	ey furtl	her the	e organiz	zation's ex	kempt purpo	ose in		
5		ng the year, did the orga ts to be sold to raise fur									ular	☐ Yes	□ No	
Pa	rt IV	Escrow and Cust Complete if the org X, line 21.			" on Form	າ 990	, Part	IV, lı	ne 9, o	r reporte	ed an amoi	unt on For	m 990, Par	t
1a		e organization an agent ded on Form 990, Part X		an or other	ıntermedia	ry for	contri	bution	s or othe	er assets	not	☐ Yes	□ No	
b	If "Y	es," explain the arrange	ment in Part XIII	and comple	ete the follo	owing	table				Δ	mount		
c	Begir	nning balance		·		_				1c				
d	Addıt	tions during the year								1d				
е	Distr	butions during the year	-							1e				
f	Endır	ng balance								1 f				
2a	Did t	the organization include	an amount on Fo	rm 990, Pai	rt X, line 2	1, for	escrov	v or cu	stodial a	ccount lia	ability?	☐ Yes	☑ No	
b	If "Ye	es," explain the arrange	ment in Part XIII	Check here	e if the ext	olanatı	on has	s been	provide	d in Part)	XIII			
Pa	rt V	Endowment Fund												
			'	(a)Currer			rıor yea				(d)Three ye)Four years ba	ck_
1 a	Beginr	ning of year balance .												
b	Contri	butions												
C	Net in	vestment earnings, gair	is, and losses											
d	Grants	s or scholarships	•											
e		expenditures for facilities	es											
f	Admın	nistrative expenses .												
g	End of	f year balance												
2	Provi	ide the estimated percei	ntage of the curre	ent year end	d balance (line 1	g, colu	mn (a)) held a	s				
а	Boar	d designated or quasi-e	ndowment 🟲											
b	Perm	nanent endowment 🕨												
С	Tem	porarily restricted endov	vment 🟲											
3а	Are t	percentages on lines 2a, there endowment funds nization by				n that	t are h	eld an	d admın	stered fo	r the		Yes No	_
	-	inrelated organizations										3a(i		_
	(ii) r	related organizations .										3a(ii)	_
b		es" on 3a(II), are the rel	-		•			.7 .				3b		_
4		ribe in Part XIII the inte			n's endowr	ment f	funds							
Pa	rt VI	Land, Buildings, Complete if the ord			" on East		Daw	T\/ 1-	no 11-	S00 F0	-m 000 D-	ort V lone	10	
	Descr	ription of property	(a) Cost or oth (investme)	ner basıs	(b) Cost o						lepreciation	•	Book value	
_	1 - 1							01 427					101	427
	Land	1						81,437			220.000			,437
	Buildir	- I					1,28	89,067			229,869		1,059	,198
		hold improvements						05.00:			450 155			
d	Equipr	ment			1		20	05,964	I		158,163		47	,801

119,476

1,407,912

26,821

146,297

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) .

Part VII	Investments—Other Securities. Complete if the	ne organization answe	ered "Yes" on Form 99	0, Part IV, line 11b.
	See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b) Book value	(c) Metho	d of valuation -year market value
	l derivatives			
(3) Other _	held equity interests			
	derivatives and other financial products			
(B) Closely-l (C)	neld equity interests			
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Colum Part VIII	n (b) must equal Form 990, Part X, col (B) line 12) Investments—Program Related.	•		
ant viii	Complete if the organization answered 'Yes' on F			· · · · · · · · · · · · · · · · · · ·
	(a) Description of investment	(b) Book value		d of valuation -year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX	Other Assets. Complete if the organization answered (a) Description		: IV, line 11d See Form 9	990, Part X, line 15 (b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colu Part X	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization a			e or 11f
	See Form 990, Part X, line 25. (a) Description of liability			
1. (1) Federal :	ncome taxes	(B) Boo	ok value	
Federal inco	me taxes			
CAPITAL LEA (3)	ASES PAYABLE		25,142	
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col (B) line 25) or uncertain tax positions In Part XIII, provide the text ol	► f the footnote to the org	25,142 anization's financial state	ments that reports the
	's liability for uncertain tax positions under FIN 48 (ASC 7			_

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Schedule D (Form 990) 2017

Donated services and use of facilities

Recoveries of prior year grants . . .

Part XI

b

d	Other (Describe in Part XIII)						6,421		
e	Add lines 2a through 2d							2e	6,421
3	Subtract line 2e from line 1							3	1,661,112
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1								
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	1							
b	Other (Describe in Part XIII)	,							
c	Add lines 4a and 4b	•						4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) .							5	1,661,112
Par	Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered 'Yes' on Form 990, Part IV,			•	en	ses	per R	leturi	1.

2b

2c

Page 4

1,667,533

Schedule D (Form 990) 2017

1	Total expenses and losses per audited financial statements		1,711,501
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	26	15 493

3 1,696,008 3 Subtract line **2e** from line **1** Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . . 4a 4b

Add lines **4a** and **4b** 4c 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 1,696,008 Part XIII Supplemental Information Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information Return Reference Explanation

See Additional Data Table

Page 5		Schedule D (Form 990) 2017		
	ormation (continued)	Part XIII Supplemental Info		
	Explanation	Return Reference		

Schedule D (Form 990) 2017

Additional Data

Software Version: 18.2.0.0

Software ID: 17005317

EIN: 56-0276491

Name: INTERNATIONAL BROTHERHOOD OF TEAMSTERS LOCAL

UNION 71

Supplemental Information

Explanation

Return Reference

XI 2d

Supplemental Information Return Reference Explanation REFUNDS REIMBURSEMENTS - 1,287 LOSSES FROM DECLINES IN MARKET VALUES OF SECURITIES - 14.206 XII 2d

efile GRAPHIC print - DO NOT PROCESS As Filed Data DLN: 93493125005068 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer identification number** INTERNATIONAL BROTHERHOOD OF TEAMSTERS LOCAL UNION 71 56-0276491 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ☐ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) (book, FMV, appraisal, noncash assistance organization grant cash or assistance or government assistance other) (1) (3) (5) (6)(7) (8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2017

Schedule I (Form 990) 2017

(6)

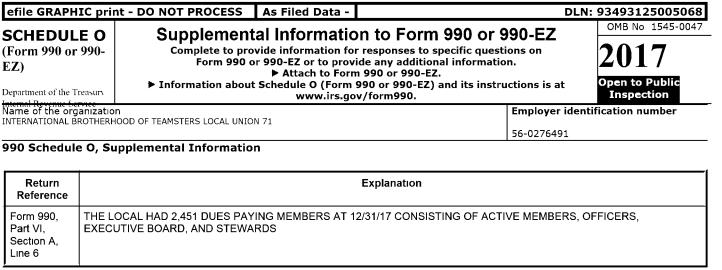
(7)

Explanation

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

Part IV

Return Reference



Return Explanation
Reference

Form 990, Part VI, Section A.

990 Schedule O, Supplemental Information

Line 7a

Return Explanation
Reference

Line 7b

Form 990, Part VI, Section A.

Return Explanation
Reference

Line 8a

Form 990, Part VI, Section A. WRITTEN MINUTES OF THE EXECUTIVE BOARD ARE MAINTAINED AND PRESENTED TO THE MEMBERSHIP AT REGULARLY SCHEDULED MEMBERSHIP MEETINGS

Return Explanation
Reference

Form 990,
Part VI,
Section A,
Line 8b

NONE OF THE LOCAL STANDING COMMITTEES MET DURING THE YEAR SO THERE WAS NO NEED TO RECORD
COMMITTEE MEETINGS DURING 2017

Return Explanation
Reference

Form 990, Part VI, Section B, Line 11b

FORM 990 IS PREPARED BY THE LOCALS AUDITOR AND IS PRESENTED TO THE LOCALS SECRETARY TREASURER OR PRESIDENT FOR REVIEW AND FILING

Return
Reference

Explanation

Line 19

Form 990, Part VI, Section C.

Return Explanation

Reference	
Form 990,	THE EXECUTIVE BOARD CHOOSES THE AUDITOR AND THE AUDIT REPORT IS RECEIVED AND REVIEWED BY THE
Part XII, Line	SECRETARY TREASURER

990 Schedule O, Supplemental Information Return Explanation Reference

Form 990, 5.124 BOOK GAIN FROM SALE OF AUTOMOBILES Part XI, Line