**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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

For the	2017 calendar year, or tax year beginning	, 2017, and ending		•
Check if a	pplicable C		D Employer ider	tification number
Addre	ess change TEAMSTERS LOCAL 533		88-0046	825
Name	e change 1190 SELMI DRIVE, STE. 100		E Telephone nun	
$\vdash$	RENO, NV 89512		(775) 3	348-6060
$\vdash$	eturn/terminated		(113)	740 0000
H	nded return		G Gross receipts	\$ 1,369,773.
$\vdash$			(a) Is this a group return for su	
Ц Арріі	DEBUIL C	ALIVINO 🖊 I	• •	
	SAME AS C ABOVE		(b) Are all subordinates includ if 'No,' attach a list (see in	ed? Yes No estructions)
	empt status 501(c)(3) X 501(c) ( 5 ) ◀ (insert no )	4947(a)(1) or 527		
Webs	• • • • • • • • • • • • • • • • • • • •	<del></del>	(c) Group exemption number	
	organization Corporation Trust X Association Other	L Year of formation	n 1934 <b>M</b> State of	legal domicile NV
rt l	Summary			
1 B	riefly describe the organization's mission or most significan	nt activities LABOR_ORGAL	<u>NIZATION</u>	
_				
_				- <b></b>
_				
	heck this box \( \subseteq  if the organization discontinued its open the left of the left		e than 25% of its net a	ssets
	umber of voting members of the governing body (Part VI, I umber of independent voting members of the governing bo		3	7
	otal number of individuals employed in calendar year 2017	÷ -	4	
	otal number of individuals employed in calendar year 2017 otal number of volunteers (estimate if necessary)	(Fart V, line 2a)	5	9
	otal number of volunteers (estimate in necessary) otal unrelated business revenue from Part VIII, column (C)	line 12	6 7a	0
	et unrelated business taxable income from Form 990-T. In		7a 7b	0.
וא ט	et differenced business taxable income from 1 orm 330-1, in	16 34	Prior Year	0. Current Year
8 C	ontributions and grants (Part VIII, line 1h)			
	rogram service revenue (Part VIII, line 2g)		1,270,222.	1,329,363.
	ivestment income (Part VIII, column (A), lines 3, 4, and 7d	N	36,767.	32,316.
	ther revenue (Part VIII, column (A), lines 5, 4, and 70		423.	2.
		•	4,144.	8,092.
	otal revenue – add lines 8 through 11 (must equal Part VII		1,311,556.	1,369,773.
	rants and similar amounts paid (Part IX, column (A), lines			
	enefits paid to or for members (Part IX, column (A), line 4		27,949.	31,559.
<b>15</b> S	alaries, other compensation, employee benefits (Part IX, c	olumn (A), lines 5-10)	712,258.	736,661.
<b>16</b> a Pi	rofessional fundraising fees (Part IX, column (A), line 11e)	1		
<b>b</b> To	otal fundraising expenses (Part IX, column (D), line 25)			
	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e		581,380.	576,782.
	otal expenses. Add lines 13-17 (must equal Part IX, colum	•		
	evenue less expenses. Subtract line 18 from line 12	11 (A), lifte 25)	1,321,587.	1,345,002.
	evenue less expenses. Subtract line 18 from line 12	I RECEIVED	-10,031.	24,771.
20 T	otal assets (Part X, line 16)		Redinning of Current Year	End of Year
20 10	otal liabilities (Part X, line 16)	8 NOV 1 3 2018	801,263. 209,044.	767,710.
	•	NOV 1 3 2018	11621	150,720.
	et assets or fund balances. Subtract line 21 from line 20		592,219.	616,990.
rt II	Signature Block	OGDEN, UT		
r penalties	s of perjury, I declare that I have examined this return, including accompanying aration of preparer (other than officer) is based on all information of which pre	schedules and statements, and to the	e best of my knowledge and be	lief, it is true, correct, and
- Decia	aradori or preparer (other tiral officer) is based on all information of which pre	parer nas any knowledge		
	Depho Culli			
jn 💮	Signature of officer	\	Date	
'e	Debhie Lalkins Dee	cretary - Tr	easurer	
	Type or print name and title			
	Print/Type preparer's name Preparer's signature	Date	Check X if	PTIN
d	DAWN ROGERS	11/17- 111-4.	self-employed	P00383379
parer		15		,= : : : : : : : : : : : : : : : : : : :
		62	Firm's EIN ► 48	-1201075
		UZ	limisen. 40	-1471013
e Only	3000 EE CERTITIO 1 ERIERI, #3	<u></u>	51.0	000 6442
e Only	EL CERRITO, CA 94530 S discuss this return with the preparer shown above? (see		Phone no 510	-990-6443 X Yes No

orm 990 (2017)		88-0	04682	5	F	age 2
	itement of Program Service Accomplishments					
	ck if Schedule O contains a response or note to any line in this Part III					
-	cribe the organization's mission					
LABOR_C	<u> DRGANIZATION                                    </u>					
		<del></del> -				<b>-</b> -
D. D. J. M		the ever				
Form 990 c	anization undertake any significant program services during the year which were not listed on	the prior		V	T.	M.
			Ш	Yes	X	No
	scribe these new services on Schedule O.	·		V	17	M.
_	ganization cease conducting, or make significant changes in how it conducts, any progr escribe these changes on Schedule O	ani services		Yes	X	No
	ne organization's program service accomplishments for each of its three largest progra	m canuaca ac	maaa	م برط ام		
Section 50	organization's program service accomplishments for each of its times tagest program (c)(3) and 501(c)(4) organizations are required to report the amount of grants and allue, if any, for each program service reported	ocations to othe	ers, the t	otal e	xpens	ses,
1 a (Code	) (Expenses \$ including grants of \$	) (Revenue	\$			
	ED THE WELFARE AND WORKING CONDITIONS OF MEMBERS.		· —			
1101011	LD THE WEBLAND WORKING CONDITIONS OF MEMBERS.					
			<del></del> -			
		- <del></del>				
	<del></del>			<b>-</b>		<b>-</b> –
<b>b</b> (Code	) (Expenses \$ including grants of \$	) (Revenue	\$			
	ED MEMBERS WITH CONTRACT NEGOTIATION SUPPORT SERVICES	/ (Nevenue	Ÿ			
LVOATDI	ED MEMBERS WITH CONTRACT NEGOTIATION SUFFORT SERVICES		- <del>-</del>			
				<b>-</b>		
		- <del>-</del>				
				<b>-</b>		
		<del></del>	- <del>-</del>	<b>-</b>		<b>-</b> -
<b>c</b> (Code	) (Expenses \$ including grants of \$	) (Revenue	\$			
PROVIDE	ED MEMBERS WITH CONTRACT ARBITRATION SUPPORT SERVICES.	- <b>-</b>	<del>-</del> -			. <del></del> _
		<b></b>		<b>_</b>		
		<b></b>				
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		<del></del>				
	·					
<u>-</u>						
d Other prog	ram services (Describe in Schedule O )					
(Expenses		ue \$			)	
<del></del>	ram service expenses ►	<u> </u>			<del>-</del>	
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## Form 990 (2017) TEAMSTERS LOCAL 533 Partive 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 (see instructions)?  Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates	2		^
3	for public office? If 'Yes,' complete Schedule C, Part I.	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4	:	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
i	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI	11 a	Х	
I	b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
(	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
•	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
1	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	11 f		Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		X
ı	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	12 b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
1	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (Å), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
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## Form 990 (2017) TEAMSTERS LOCAL 533 Part IV Checklist of Required Schedules (continued)

			Yes	No
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
ı	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
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		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23	х	
24	a 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 Schedule K. If 'No, 'go to line 25a	24a		Х
	<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a 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>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II	26	х	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part L	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	<b>b</b> If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 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? 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 and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Note. All Form 990 filers are required to complete Schedule O	38	X	
BA/	4	Form	990 (	(2017)

Par	Charles School 18 Constants a recessor or note to any line in the Bort V			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	 No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 14		163	1
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b (	1 !		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1!		
•	(gambling) winnings to prize winners?	1 c	X	
2 a	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  2 a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
b	If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b		
4 a	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)?	4 a		Х
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)			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
С	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	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?	6 a		Х
	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
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?			
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	· · ·		
	Form 8282?	7 c		
	If 'Yes,' indicate the number of Forms 8282 filed during the year 7d	<u> </u>		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	]		
11	Section 501(c)(12) organizations. Enter	] '		
а	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 )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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			Ī
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  Enter the amount of reserves on hand  13b	┤		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		$\frac{1}{X}$
	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		<del></del> -
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Form 990 (2017) TEAMSTERS LOCAL 533 88-0046825 Page 6 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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 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 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? SEE SCHEDULE O X 6 7 a 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? SEE SCHEDULE O Х 7 a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, SEE SCH O stockholders, or persons other than the governing body? 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Χ a The governing body? 8 a X b Each committee with authority to act on behalf of the governing body? 8 b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates? 10 a Х 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? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 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? a The organization's CEO, Executive Director, or top management official SEE SCHEDULE O X 15 a X **b** Other officers or key employees of the organization SEE SCHEDULE O 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? 16 a X b If 'Yes.' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > NONE 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 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 policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records 20 DEBBIE CALKINS 1190 SELMI DRIVE, STE. 100 RENO NV 89512 (775) 348-6060

Form 990 (2	2017)	TEAMSTERS	LOCAL.	533

88-0046825

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### 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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (C) Position (do not check more than one box, unless person is both an officer and a (B) (A) (F) Estimated amount of other compensation from the Name and Title Reportable compensation from Reportable Average hours director/trustee) compensation from the organization (W 2/1099 MISC) related organization (W-2/1099 MISC) Officer employee individual frustee key employee nstitutional lighest compensated ormer organization and related organizations (list any hours for related organiza-tions I trustee below (1) GARY WATSON 40 PRESIDENT 0 Х 90,995 0 48,710. (2) MICHAEL SEALY, SR. 40 VICE PRESIDENT 0 X 89,995 0. 48,710. (3) DEBBIE CALKINS 40 0 X TREASURER 0 48,710. 109,090 (4) JOHN PATTERSON 5 TRUSTEE 0 Х 4,200 0 0. (5) JEAN PRINA 5 TRUSTEE 0 X 4,200 0 0. 5 (6) TIM RENSHAW TRUSTEE 0 Х 4,200 0. 0. (7) LEE HARRIS 5 TRUSTEE 0 Х 4,200 0. 0. (8) (10)(11) (12)(13) (14)

Part VII Section A. Officers, Directors, Tru	ustees, l	Key	Em	ıplo	oye	es,	and	d Highest Com	pensated Emp	loyees	(continued)
	(B)			((	<b>&gt;</b> )						
(A) Name and title	Average hours per	box,	, unle	ess pe	erson	than is botl or/trus	n an	(D)  Reportable compensation from	<b>(E)</b> Reportable	Es	(F)
	week (list any	<del></del>						the organization (W 2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	com	nt of other pensation om the
	hours for	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	( 2. 1000 1)	( ,	orga and	anization I related
	related organiza tions	ctor to	a	`	Pg Q	ee	`			orga	nizations
	below dotted	uste	Tu <u>s</u>		8	pens					
	line)	°	8			ated					
<u>(15)</u>									· ·		<del> </del>
(16)											
(17)											
<u>(18)</u>											
(19)											*******
(20)											
(21)											
(22)		-									•
(23)											
(24)											
(25)											
1 b Sub-total							<b>.</b>	306,880.	0.	1	46,130.
c Total from continuation sheets to Part VII, Secti	on A						<b>&gt;</b>	0.	0.		0.
d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited	to those I	ıstad	aho	ν <u>α</u> ) ν	who	recei	ved	306,880.	0.		46,130.
from the organization 1	i to those i	isteu	abo	ve)	WIIO	recei	veu	more than \$100,00		erisatioi	·
2.5											Yes No
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for suc	ctor, or tru ch individu	stee, <i>ial</i>	key	y en	nplo	yee,	or r	nighest compensa	ted employee	3	X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greater	f reportab er than \$1	le co 50,0	mpe	ensa If '\	ation Yes,	and con	oth <i>ple</i>	ner compensation te Schedule J for	from		
<ul> <li>such individual</li> <li>Did any person listed on line 1a receive or accrufor services rendered to the organization? If 'Yes</li> </ul>	ie comper	satio	n fr	om	any	unre	late	ed organization or	ındıvıdual	5	X X
Section B. Independent Contractors	s, comple	ile St	riec	luie	J 10	Suc	πρ	erson			
Complete this table for your five highest compen compensation from the organization. Report compensation.	sated ind	epen	den	t co	ntra	ctors	tha	at received more t	han \$100,000 of	,	•
(A) Name and business add		110 0	aicii	ioai .	ycai	Cridi	ng v	(B)	)	(Compe	;) nsation
· · · · · · · · · · · · · · · · · · ·											
2 Total number of independent contractors (including		ited to	o the	ose I	liste	dabo	ve)	who received more	than		·
\$100,000 of compensation from the organization		TEEAC	11001	0011	00/17		_			Form	<b>990</b> (2017)

	Check if Schedule O contains a respons	se or note to any	/ line in this Part VI	IL		
			<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts Its	1 a Federated campaigns 1 a					
ran	<b>b</b> Membership dues 1 b 1	L,329,363.				
s, G	c Fundraising events 1 c					
ar/	d Related organizations 1 d					
S; ( imi	e Government grants (contributions) 1 e		i			
Contributions, Gifts, Grants and Other Similar Amounts	f All other contributions, gifts, grants, and similar amounts not included above					
ğ ţ	g Noncash contributions included in lines 1a-1f \$					
Son	h Total. Add lines 1a-1f	▶	1,329,363.	i		
<u> </u>		Business Code				
Program Service Revenue	2a ADMINISTRATIVE FEES 90	0099	32,316.	32,316.		
æ	b		•	,		
ice	c					
ě	d					
Ë	е					
gra	f All other program service revenue					
P	g Total. Add lines 2a-2f	<b>&gt;</b>	32,316.			
	3 Investment income (including dividends, in	nterest and				
	other similar amounts)	•	2.	2.		
	4 Income from investment of tax-exempt bo	nd proceeds				
	5 Royalties	•				
	(i) Real	(II) Personal				
	6 a Gross rents					
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)	•				
	7 a Gross amount from sales of (i) Securities	(II) Other				
	assets other than inventory					İ
	b Less cost or other basis		i			
	and sales expenses c Gain or (loss)					
					·	<del></del>
	d Net gain or (loss)		<del></del>			
nue	8 a Gross income from fundraising events (not including \$					
Ķ	of contributions reported on line 1c).					
æ	See Part IV, line 18 a					
Other Reven	b Less direct expenses b					
₹	c Net income or (loss) from fundraising ever	nts ►				
	9 a Gross income from gaming activities. See Part IV, line 19					
	<b>b</b> Less direct expenses <b>b</b>		İ			
	c Net income or (loss) from gaming activitie	s Þ		•		
	10a Gross sales of inventory, less returns and allowances					
	b Less cost of goods sold b					
	c Net income or (loss) from sales of invento	ory ►				<u></u>
		Business Code				
	11a REIMBURSEMENTS 90	0099	4,871.	4,871.		
	b REIMB PROMOTIONAL ITEMS 90		3,221.	3,221.		
	c					
	d All other revenue.					
	e Total. Add lines 11a-11d	<b>&gt;</b>	8,092.			
	12 Total revenue. See instructions		1,369,773.	40,410.	0.	0.
	<del></del>					5 000 (0017)

### Part IX | Statement of Functional Expenses

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

	Check if Schedule O contains a response or note to any line in this Part IX						
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses		
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21						
2	Grants and other assistance to domestic 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			1			
4	Benefits paid to or for members	31,559.		1			
5	Compensation of current officers, directors, trustees, and key employees	453,010.					
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	146,337.					
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	44,632.					
9	Other employee benefits	54,921.					
10	Payroll taxes	37,761.					
11	Fees for services (non-employees)						
а	Management						
t	Legal	48,668.					
c	: Accounting	13,800.					
C	<b>I</b> Lobbying						
e	Professional fundraising services See Part IV, line 17						
	Investment management fees						
-	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0 ) Advertising and promotion	6,254.		<u>.</u>			
13	Office expenses	47,930.					
14	Information technology	1.7.550.					
15	Royalties						
16	Occupancy	10,008.					
17	Travel	33,973.					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials						
19	Conferences, conventions, and meetings	6,506.					
20	Interest	4,383.					
21	Payments to affiliates	335,539.					
22	Depreciation, depletion, and amortization	38,775.					
	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 O ).						
a	AUTOMOBILE EXPENSES	13,225.					
	EDUCATION & PUBLICITY	7,730.					
	PROMOTIONAL ITEMS	6,477.					
	COMMUNITY OUTREACH	2,600.					
	All other expenses	914.					
25	Total functional expenses. Add lines 1 through 24e	1,345,002.					
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)						

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) End of year (A) Beginning of year Cash - non-interest-bearing 150 1 150. 2 2 Savings and temporary cash investments 198,333 214,131. Pledges and grants receivable, net 3 4 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. 5 21,695 10,695 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 6 7 Notes and loans receivable, net 8 Inventories for sale or use Prepaid expenses and deferred charges 9 10 a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10 a 664,623 10 b 10 c b Less accumulated depreciation 127,051. 575,542 537,572. Investments - publicly traded securities 11 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 2,343 14 2,262. 15 Other assets See Part IV, line 11 15 3,200. 2,900. 16 Total assets. Add lines 1 through 15 (must equal line 34) 801,263. 16 767,710. <del>17</del> Accounts payable and accrued expenses 17 71,500. 71,500 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 137,544 23 79,220. 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 26 209,044 150.720 Organizations that follow SFAS 117 (ASC 958), check here > x and complete Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 592,219 27 616,990 Temporarily restricted net assets 28 29 Permanently restricted net assets Fund Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34. þ 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 33 Total net assets or fund balances 592,219 616,990. 34 Total liabilities and net assets/fund balances 34 801,263 767,710.

BAA

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

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

3 a

3 h

Form 990 (2017)

Х

Audit Act and OMB Circular A-133?

BAA

#### 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

2017

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to at www.irs.gov/Form990 for instructions and the latest information

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

•	xy Tax) (see se Section 501(c)(	•	rtions), then organizations Complete Part III.				
	of organization		RS LOCAL 533			Employer identifica	ation number
						88-004682	5
			rganization is exempt under s	•	*		zation.
1			organization's direct and indirect poli on of 'political campaign activities')	tical campaign a	activities in	Part IV.	
		-	xpenditures (see instructions)			<b>►</b> \$	
			campaign activities (see instructions)				
Pai	rt]I:BJ Comp	lete if the o	rganization is exempt under s	ection 501(c	)(3).		
1	Enter the amo	ount of any exc	cise tax incurred by the organization i	ınder section 49	55.	▶\$	
2	Enter the am	ount of any exc	cise tax incurred by organization man	agers under sed	tion 4955	▶\$	
3	If the organization	ation incurred a	a section 4955 tax, did it file Form 47	20 for this year?	,		Yes No
4 8	a Was a correct	tion made?					Yes No
ı	<b>b</b> If 'Yes,' descr	ibe in Part IV					
Pa	rtil-C Comp	lete if the o	rganization is exempt under s	ection 501(c	) , except	t section 501(c)(3).	
1	Enter the amo	ount directly ex	pended by the filing organization for	section 527 exe	mpt functio	n activities > \$	
2	Enter the amore function active	unt of the filing of	organization's funds contributed to other	organizations fo	r section 527	' exempt ►\$	
3	Total exempt line 17b	function exper	nditures. Add lines 1 and 2 Enter her	e and on Form	1120-POL,	<b>►</b> \$	
4	Did the filing	organization fil	e Form 1120-POL for this year?				Yes X No
5	organization i	made payment:	and employer identification number s. For each organization listed, enter ns received that were promptly and direct al action committee (PAC). If addition	the amount pair	d from the f	ilina organization's fund	ds Also enter the
	(a) Nam	ne ʻ	(b) Address	(c)	EIN	(d) Amount paid from filing organization's funds. If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)							
(2)							
(3)							
(4)					,		
(5)							
(6)							

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

section 501(	(h)\	n is exempt under sec	ction 50 f(c)(5) and	filed Form 5/68 (el	ection under
A Chook > Ust the files	<u> </u>	as to an affiliated arous (and	hat in Dort IV and affilia	tod arous mambar's name	
ш		igs to an affiliated group (and ind share of excess lobbying		ited group member's name	<del>?</del> ,
_		ecked box A and 'limited cor			
			or provident uppry	(a) Eiling	(b) Affiliated
(The term		ying Expenditures ans amounts paid or incurr	ed.)	(a) Filing organization's totals	group totals
·	•	ublic opinion (grass roots lo	· · ·		
		legislative body (direct lobb	yıng)		
c Total lobbying expenditi		and 1b)			
d Other exempt purpose		4 14 15			
e Total exempt purpose e	expenditures (add li	nes 1c and 1d)			<del></del>
f Lobbying nontaxable an both columns	nount Enter the ar	mount from the following tab	ile in		
If the amount on line 1e, col	umn (a) or (b) is	The lobbying nontaxable	amount is		
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1	<u> </u>	\$100,000 plus 15% of the excess			
Over \$1,000,000 but not over \$	<u> </u>	\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$	\$17,000,000	\$225,000 plus 5% of the excess o	ver \$1,500,000		
Over \$17,000,000		\$1,000,000			
g Grassroots nontaxable					
h Subtract line 1g from lin		·	,		
i Subtract line 1f from lin	ie Ic If zero or les	s, enter -0-	Į		
j If there is an amount othe section 4911 tax for this	er than zero on eithe s year?	r line 1h or line 1i, did the org	anızatıon file Form 4720	reporting	Yes No
<del></del> ,		4-Year Averaging Period U	Inder section 501(h)		
(Som					
(00		at made a section 501(h) electors. See the separate inst	ection do not have to c		
	columns be	at made a section 501(h) ele	ection do not have to c ructions for lines 2a the	rough 2f.)	
<u> </u>	columns b	at made a section 501(h) elelow. See the separate instr bying Expenditures During	ection do not have to c ructions for lines 2a the 4-Year Averaging Peri	rough 2f.) od	
Calendar year (or fiscal year beginning in)	columns be	at made a section 501(h) ele elow. See the separate inst	ection do not have to c ructions for lines 2a the	rough 2f.)	(e) Total
Calendar year (or fiscal	columns b	at made a section 501(h) elelow. See the separate instr bying Expenditures During	ection do not have to c ructions for lines 2a the 4-Year Averaging Peri	rough 2f.) od	(e) Total
Calendar year (or fiscal	columns b	at made a section 501(h) elelow. See the separate instr bying Expenditures During	ection do not have to c ructions for lines 2a the 4-Year Averaging Peri	rough 2f.) od	(e) Total
Calendar year (or fiscal year beginning in)  2 a Lobbying nontaxable amount	columns b	at made a section 501(h) elelow. See the separate instr bying Expenditures During	ection do not have to c ructions for lines 2a the 4-Year Averaging Peri	rough 2f.) od	(e) Total
Calendar year (or fiscal year beginning in)  2 a Lobbying nontaxable amount  b Lobbying ceiling amount (150% of line	columns b	at made a section 501(h) elelow. See the separate instr bying Expenditures During	ection do not have to c ructions for lines 2a the 4-Year Averaging Peri	rough 2f.) od	(e) Total
Calendar year (or fiscal year beginning in)  2 a Lobbying nontaxable amount  b Lobbying ceiling	columns b	at made a section 501(h) elelow. See the separate instr bying Expenditures During	ection do not have to c ructions for lines 2a the 4-Year Averaging Peri	od	(e) Total
Calendar year (or fiscal year beginning in)  2 a Lobbying nontaxable amount  b Lobbying ceiling amount (150% of line	columns b	at made a section 501(h) elelow. See the separate instr bying Expenditures During	ection do not have to c ructions for lines 2a the 4-Year Averaging Peri	od	(e) Total
Calendar year (or fiscal year beginning in)  2 a Lobbying nontaxable amount  b Lobbying ceiling amount (150% of line 2a, column (e))  c Total lobbying	columns b	at made a section 501(h) elelow. See the separate instr bying Expenditures During	ection do not have to c ructions for lines 2a the 4-Year Averaging Peri	od	(e) Total
Calendar year (or fiscal year beginning in)  2 a Lobbying nontaxable amount  b Lobbying ceiling amount (150% of line 2a, column (e))  c Total lobbying expenditures  d Grassroots nontaxable	columns b	at made a section 501(h) elelow. See the separate instr bying Expenditures During	ection do not have to c ructions for lines 2a the 4-Year Averaging Peri	od	(e) Total
Calendar year (or fiscal year beginning in)  2 a 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	columns b	at made a section 501(h) elelow. See the separate instr bying Expenditures During	ection do not have to c ructions for lines 2a the 4-Year Averaging Peri	od	(e) Total

Page 3

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

or each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description f the lobbying activity		1)	(b)
		No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  1 Other activities?			
j Total Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912		<u> </u>	<u> </u>
d 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 50	1(c)(5)	or	

## section 501(c)(6).

			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	Х	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3		X
$\overline{}$	. 111 5			

# Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) Part III-A, line 3, is answered 'Yes.'

1	Dues, assessments and similar amounts from members	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).		
	a Current year	2 a	
	<b>b</b> Carryover from last year	2 b	
	c Total	2 c	
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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	0.
5	Taxable amount of lobbying and political expenditures (see instructions)	5	0

#### Part IV | Supplemental Information

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

#### 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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

	TEAMSTERS LOCAL 533		88-0046825
Pai	Organizations Maintaining Done Complete if the organization ans	or Advised Funds or Other Similar Full wered 'Yes' on Form 990, Part IV, line	nds or Accounts.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		(a) and an other document
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 do are the organization's property, subject to the	nor advisors in writing that the assets held in deorganization's exclusive legal control?	onor advised funds Yes No
6	Did the organization inform all grantees, done for charitable purposes and not for the benefit impermissible private benefit?	ors, and donor advisors in writing that grant fun it of the donor or donor advisor, or for any other	ds can be used only r purpose conferring Yes No
<u>P</u> ai	Conservation Easements. Complete if the organization ans	wered 'Yes' on Form 990, Part IV, line	÷ 7.
1	Purpose(s) of conservation easements held b		
	Preservation of land for public use (e.g.,		of a historically important land area
	Protection of natural habitat	· L_	of a certified historic structure
	Preservation of open space		
2		held a qualified conservation contribution in the for	m of a conservation easement on the
	last day of the tax year		Held at the End of the Tax Year
	a Total number of conservation easements		2a
	<b>b</b> Total acreage restricted by conservation ease	ements	2 b
	c Number of conservation easements on a cert		2 c
		• • • • • • • • • • • • • • • • • • • •	
•	d Number of conservation easements included structure listed in the National Register	in (c) acquired after 7/25/06, and not on a histo	2 d
3	Number of conservation easements modified, tra tax year ►	nsferred, released, extinguished, or terminated by	the organization during the
4	Number of states where property subject to cons	ervation easement is located >	
5	Does the organization have a written policy re and enforcement of the conservation easeme	egarding the periodic monitoring, inspection, haints it holds?	andling of violations,
6	Staff and volunteer hours devoted to monitoring,	inspecting, handling of violations, and enforcing co	onservation easements during the year
7	Amount of expenses incurred in monitoring, insp ►\$	ecting, handling of violations, and enforcing conser	rvation easements during the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	on line 2(d) above satisfy the requirements of se	ection 170(h)(4)(B)(i) Yes No
9	include, if applicable, the text of the footnote	s conservation easements in its revenue and exper to the organization's financial statements that (	nse statement, and balance sheet, and describes the organization's accounting for
Pai	conservation easements	ections of Art, Historical Treasures, o	r Other Similar Assets.
7441	Complete if the organization ans	wered 'Yes' on Form 990, Part IV, line	e 8.
1 :	a If the organization elected, as permitted unde art, historical treasures, or other similar assets h in Part XIII, the text of the footnote to its fina	er SFAS 116 (ASC 958), not to report in its reve eld for public exhibition, education, or research in f ncial statements that describes these items.	enue statement and balance sheet works of furtherance of public service, provide,
1	historical treasures, or other similar assets held following amounts relating to these items	er SFAS 116 (ASC 958), to report in its revenue for public exhibition, education, or research in furth	erance of public service, provide the
	(i) Revenue included on Form 990, Part VIII,	, line 1	<b>*</b> \$
	(ii) Assets included in Form 990, Part X		<b>▶</b> \$
2	If the organization received or held works of art, amounts required to be reported under SFAS	historical treasures, or other similar assets for final 116 (ASC 958) relating to these items	ncial gain, provide the following
	a Revenue included on Form 990, Part VIII, line	e 1	<b>&gt;</b> \$
	<b>b</b> Assets included in Form 990, Part X		<b>▶</b> \$

Partilla Organizations Maintainin	g Collections o	of Art, Historic	cal Treasures, or	Other Similar Ass	ets (continu	<u>ied)</u>
3 Using the organization's acquisition, accultems (check all that apply)	ession, and other re	cords, check any	of the following that are	e a significant use of its	collection	
a Public exhibition		d Loan or	exchange programs			
<b>b</b> Scholarly research		e Other				
c Preservation for future generation	s					
4 Provide a description of the organization Part XIII.	's collections and ex	plain how they fu	irther the organization's	exempt purpose in		
5 During the year, did the organization to be sold to raise funds rather than to					Yes	No
Escrow and Custodial Ard line 9, or reported an amount	r <mark>angements.</mark> Count on Form 99	omplete if the 90, Part X, lin	e organization ans ne 21.	swered 'Yes' on Fo	rm 990, Par	t IV,
1 a Is the organization an agent, trustee, on Form 990, Part X?	custodian or other	intermediary for	contributions or othe	r assets not included	Yes	No
<b>b</b> If 'Yes,' explain the arrangement in P	art XIII and comple	ete the following	table	,		_
					Amount	
c Beginning balance				1 c	·	
<b>d</b> Additions during the year				1 d		
<ul> <li>Distributions during the year</li> </ul>				1 e		
f Ending balance				1 f		
2 a Did the organization include an amount					Yes	No
<b>b</b> If 'Yes,' explain the arrangement in P	art XIII. Check her	e if the explanat	ion has been provided	d on Part XIII	Ĺ	
Part V Endowment Funds. Comp					• -	
	a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four year	s back
1 a Beginning of year balance						
<b>b</b> Contributions						
c Net investment earnings, gains, and losses						
d Grants or scholarships						
Other expenditures for facilities and programs						
f Administrative expenses						
<b>g</b> End of year balance						
2 Provide the estimated percentage of t	he current year er	d balance (line	1g, column (a)) held a	as		
a Board designated or quasi-endowment		%				
<b>b</b> Permanent endowment ►	% 					
c Temporarily restricted endowment ►		<b>ે</b>				
The percentages on lines 2a, 2b, and 2c	should equal 100%					
3 a Are there endowment funds not in the poorganization by	ossession of the org	anization that are	held and administered	for the	Yes	No
(i) unrelated organizations.					3a(i)	
(ii) related organizations					3a(ii)	
<b>b</b> If 'Yes' on line 3a(ii), are the related of	-				3b	<u></u>
4 Describe in Part XIII the intended use		on's endowment	funds			
Partivil Land, Buildings, and Equ Complete if the organization	<u>-</u>	'es' on Form	990, Part IV, line	11a. See Form 99	0, Part X, III	ne 10.
Description of property		r other basis stment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book va	alue
1 a Land			101,700.		101,	,700.
<b>b</b> Buildings			411,148.	17,015.		,133.
c Leasehold improvements						
<b>d</b> Equipment			110,728.	95,956.	14.	,772.
e Other			41,047.	14,080.		,967.
Total. Add lines 1a through 1e. (Column (d)	) must equal Form	990, Part X, col		<b>&gt;</b>		,572.
BAA		<del></del>	<u> </u>	Schedu	ule <b>D</b> (Form 990	

Part VII	Investments - Other Securities.		N/A
	-		, Part IV, line 11b. See Form 990, Part X, line 12.
	ription of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
	al derivatives		
	r-held equity interests		
(3) Other			
(A)			
(B)			
(C) (D)			
(E) ·			
(F) — — ·			
(G) ·			
(H) — — —			
(1)			
	nn (b) must equal Form 990, Part X, column (B) line 12)		
	Investments – Program Related.	<u> </u>	N/A
	Complete if the organization answered		), Part IV, line 11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)		_	
(5)			
(6)			
(7)			
(8)			
(9) (10)			
	nn (b) must equal Form 990, Part X, column (B) line 13)		
Part IX	Other Assets.	N/A	<u> </u>
	Complete if the organization answered	Yes' on Form 990	), Part IV, line 11d. See Form 990, Part X, line 15.
	<b>(a)</b> De	scription	(b) Book value
(1)			
(2)			
(4)			
(5)			
(6)	· <del>- · -</del>		
(7)			
(8)			
(9) (10)			
	human (h) murat anural Carra 2000 Barri V andressa (	D) I.m. 15 )	•
	lumn (b) must equal Form 990, Part X, column (l	3) IINE 15 )	1
Part X	Other Liabilities. Complete if the organization answered 'Yes' on F	orm 990 Part IV line 13	Le or 11f See Form 990 Part X June 25
	(a) Description of liability	(b) Book value	10 01 111. Occ 10111 330, 1411 X, 1110 23
(1) Fede	ral income taxes	, ,	
(2)			
(3)			
(4)			
(5)			<u> </u>
(6) (7)			<del> </del>
(8)			<del> </del>
(9)			
(10)			
(11)			
Total. (Colum	nn (b) must equal Form 990, Part X, column (B) line 25)	<b>P</b>	
			nancial statements that reports the organization's liability for uncertain
tax positions	under FIN 48 (ASC 740) Check here if the text of the footnote	has been provided in Part XIII	

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Part XI Reconciliation of Revenue per Audited Financial Statements With F	Revenue per Return. N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, II	ne 12a.
1 Total revenue, gains, and other support per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a Net unrealized gains (losses) on investments	[-, ]
b Donated services and use of facilities 2b	
c Recoveries of prior year grants	
d Other (Describe in Part XIII )	
e Add lines 2a through 2d	2 e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b.	4 c
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5
Part XII Reconciliation of Expenses per Audited Financial Statements With	Expenses per Return. N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, II	
1 Total expenses and losses per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	,
a Donated services and use of facilities 2a	
b Prior year adjustments 2 b	
c Other losses 2 c	
d Other (Describe in Part XIII )	
e Add lines 2a through 2d	2 e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b.	4c .
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information.

BAA

#### 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.

► Go to www.irs.gov/form990 for instructions and the latest information

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

TEAMSTERS LOCAL 533

Employer identification number 88-0046825

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

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

Schedule J (Form 990) 2017

Page 2

Schedule J (Form 990) 2017 TEAMSTERS LOCAL 533

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 for 1099-MISC compensation	compensation				
(A) Name and Title	<u> </u>	() Base compensation	(i) Bonus & incentive compensation	(ii) Other reportable compensation	(C) Retirement and other deferred compensation	( <b>D</b> ) Nontaxable benefits	<b>(E)</b> Total of columns(B)(I)-(D)	(E) Total of (F) Compensation columns(B) (I)-(D) in column (B) reported as deferred on prior Form 990
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Schedule J (Form 990) 2017 TEAMSTERS LOCAL 533

Part III Supplemental Information

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

#### **SCHEDULE L** (Form 990 or 990-EZ)

#### **Transactions With Interested Persons**

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ.

2017

OMB No 1545-0047

Open To Public

Inspection

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization TEAMSTERS LOCAL 533

Employer identification number

88-0046825

Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only). Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified	(c) Description of transaction	(d) Cor	rected?
'	(a) Name of disquamed person	person and organization	(c) Besonption of admission.	Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958.

3 E	inter the amount of	tax, if any	<ol> <li>on line 2.</li> </ol>	above.	reimbursed by	the /	organization
-----	---------------------	-------------	--------------------------------	--------	---------------	-------	--------------

**►**\$ ►\$

#### Rartill Loans to and/or From Interested Persons.

Complete if the organization answered 'Yes' on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	froi	an to or n the ization?	(e) Original principal amount	(f) Balance due	I -		(h) Ap by bo comm	proved ard or attee?	(ı) W agree	ritten ment?
	l		То	From			Yes	No	Yes	No	Yes	No
(1) MARK TRACY	FORMER OFFI	CER									-	
(2)		FRAUD RECOV	ERY									
(3)				Х	87,120.	10,695.		Х		Х	Х	
(4)												
(5)												
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(7)												
(8)		- "										
(9)												
(10)			1									
otal	•	1			<b>▶</b> \$	10,695.						L

#### Rartill Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)			-		
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

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

Schedule L (Form 990 or 990-EZ) 2017

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88-0046825

Page 2

Part IV	Business 1	Transactions	Involvina Ir	iterested Pers	sons.

Complete if the organization	answered 'Yes'	on Form 990	. Part IV.	. line 28a	. 28b.	. or 28c.

(a) Name of interested person		(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
					Yes	No
(1)				,		
(2)			, , <u>, , , , , , , , , , , , , , , , , </u>			
(3)			· <u>-</u>			
(4)						
(5)						
(6)						
(7)						
(8)					-	
(9)	<del>-</del>					
(10)						

Part V Supplemental Information
Provide additional information for responses to questions on Schedule L (see instructions).

#### SCHEDULE O (Form 990 or 990-EZ)

4

#### 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.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Opento Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

TEAMSTERS LOCAL 533

Employer identification number 88-0046825

#### FORM 990, PART VI. LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDER

THE ORGANIZATION IS A LABOR UNION REPRESENTING MEMBERS COVERED BY COLLECTIVE BARGAINING AGREEMENTS NEGOTIATED BY THE UNION.

FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY

ALL EXECUTIVE BOARD MEMBERS ARE ELECTED BY THE LOCALÂ??S MEMBERSHIP.

FORM 990, PART VI, LINE 7B - DECISIONS OF GOVERNING BODY APPROVAL BY MEMBERS OR SHAREHOLDERS

THE EXECUTIVE BOARD MAY NOT TERMINATE OR MERGE THE ORGANIZATION WITHOUT MEMBERSHIP APPROVAL.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTANT AND PROVIDED TO THE EXECUTIVE BOARD FOR APPROVAL PRIOR TO SUBMISSION TO THE IRS.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

OFFICERS COMPENSATION IS BASED ON COLLECTIVE BARGAINING AGREEMENTS OF MEMBERS

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES

OFFICERS COMPENSATION IS BASED ON COLLECTIVE BARGAINING AGREEMENTS OF MEMBERS

FORM 990, PART VI. LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

DOCUMENTS AVAILABLE UPON WRITTEN REQUEST TO LOCAL