efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Return of Organization Exempt From Income Tax

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

DLN: 93493133025899 OMB No 1545-0047

Internal Revenue Service

Do not enter social security numbers on this form as it may be made public Open to Public Department of the Treasur ▶ Information about Form 990 and its instructions is at www IRS gov/form990 Inspection For the 2017 calendar year, or tax year beginning 07-01-2017 , and ending 06-30-2018 C Name of organization INTERNATIONAL BROTHERHOOD OF D Employer identification number B Check if applicable ☐ Address change BOILERMAKERS IRON SHIP BUILDERS 48-6031851 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O  $\,$  box if mail is not delivered to street address) 753 STATE AVE NO 565 ☐ Amended return ☐ Application pending (913) 371-2640 City or town, state or province, country, and ZIP or foreign postal code KANSAS CITY, KS 66101 G Gross receipts \$ 47,660,069 F Name and address of principal officer H(a) Is this a group return for WILLIAM CREEDEN ☐Yes ☑No subordinates? 753 STATE AVE NO 565 H(b) Are all subordinates KANSAS CITY, KS 66101 ☐ Yes ☐No included? ☐ 501(c)(3) **☑** 501(c)(5) **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW BOILERMAKERS ORG L Year of formation 1893 M State of legal domicile KS K Form of organization ☐ Corporation ☑ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities INTERNATIONAL LABOR UNION Activities & Governance Check this box ▶ 🔲 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 3 Number of independent voting members of the governing body (Part VI, line 1b) 0 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 112 Total number of volunteers (estimate if necessary) . . . 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 . 7a -19,376 **7**b **b** Net unrelated business taxable income from Form 990-T, line 34 -19,376 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . **9** Program service revenue (Part VIII, line 2g) . . . 38,614,304 40,660,944 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 2,330,882 1,534,829 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,271,389 516,213 42,216,575 42,711,986 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . 378,717 369,419 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 28,362 121,781 30,329,730 28,178,332 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . 18,468,334 14,843,120 49,205,143 43,512,652 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 . -6,988,568 -800,666 Assets or d Balances **Beginning of Current Year End of Year** 54,654,682 20 Total assets (Part X, line 16) . 54,696,800 21 Total liabilities (Part X, line 26) . . . . 2.928.357 3.652.323 51,002,359 51,768,443 22 Net assets or fund balances Subtract line 21 from line 20 . Part III Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-05-13 Signature of officer Sign Here WILLIAM CREEDEN INT'L SEC TREASURER Type or print name and title Print/Type preparer's name GREG WALLENBECKER Preparer's signature GREG WALLENBECKER Date PTIN Check | If P01451145 Paid self-employed

For Paperwork Reduction Act Notice, see the separate instructions.

Firm's name LEGACY PROFESSIONALS LLP

Firm's address ▶ 4 WESTBOOK CORPORATE CENTER SUITE

WESTCHESTER, IL 60154 May the IRS discuss this return with the preparer shown above? (see instructions) .

**Preparer** 

Use Only

Form **990** (2017) Cat No 11282Y

✓ Yes 🗆 No

Firm's EIN ► 32-0043599

Phone no (312) 368-0500

Form	990 (2017)				Page <b>2</b>
Pai	t IIII Statement	of Program Service Acc	complishments		
	Check If Sche	dule O contains a response or	note to any line in this Part III .		🗆
1	Briefly describe the o	organization's mission			
INTE	RNATIONAL LABOR UN	NION			
_					
2	<del>-</del>		gram services during the year which v	were not listed on	☐ Yes ☑ No
		or 990-EZ?			⊔ Yes ⊻ No
3	•	ese new services on Schedule		any program	
3	services?	<del>-</del> .	gnificant changes in how it conducts, a	any program	☐ Yes ☑ No
		ese changes on Schedule O			Lifes Lino
4	·	<del>-</del>	nplishments for each of its three large	st program convices, as measure	nd by expenses
•	Section 501(c)(3) an		required to report the amount of gra		
	(C-1-	\ / F	in alcidire a sur about 6	) /D	
4a	(Code See Additional Data	) (Expenses \$	including grants of \$	) (Revenue \$	)
	— Jee Additional Data				
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
		, ( -	3 3	, (	,
4-	(C-1-	) /F #	unalization a supplier of the	) /Davanua #	
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4d	Other program serv	ces (Describe in Schedule O )			
<b>+</b> u	(Expenses \$	,		(Revenue \$	)
	Total program serv		у <del>т</del> /	V	,

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

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Page 3

No

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Form **990** (2017)

Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates 3 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? 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? 

Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . .

5 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? 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 🛸 🔒 Did the organization maintain collections of works of art, historical treasures, or other similar assets? 

6 7 8 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 9

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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 🕏 . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 11a assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥦 . . . . . . . . . 11b 11c

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total 11d Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

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

12a Did the organization obtain separate, independent audited financial statements for the tax year? 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 🕏 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

12a 13 14a

business, investment, and program service activities outside the United States, or aggregate foreign investments 14h

14a Did the organization maintain an office, employees, or agents outside of the United States? . . . **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . . . . .

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any 15 foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . . Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to 16

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

Yes Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . . Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

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

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Yes

Yes

Yes

Yes

Yes

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No

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Nο

Nο

Nο

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Nο

Par	Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
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	Yes	
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 2º If "Yes," complete Schedule I, Parts I and III	22	Yes	
	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	Yes	
	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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.			

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," 25a 

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

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

c 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.

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

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

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . 🔀 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

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

of any of these persons? If "Yes," complete Schedule L, Part III . . . . . . . . . . . . . . . Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

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

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

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

instructions for applicable filing thresholds, conditions, and exceptions)

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and 25b that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 

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? 26 Yes 

orm	990 (2017)			Page
Par				_
	Check if Schedule O contains a response or note to any line in this Part V			Ш
	Fortunation would be Box 2 of Forms 1000 Fortun 0 of each conduction.		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 589  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?	<b>1</b> 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			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
_	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ►CA See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	35		
·	The state of state of guille and the organization me form occor in the first occor.	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6</b> 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?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7</b> 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
f	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	<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		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12   10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	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 )			
	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			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
	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			_
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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Par	<b>TVI</b> Governance, Management, and DisclosureFor 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	nes
	Check if Schedule O contains a response or note to any line in this Part VI			<b>✓</b>
Se	ection A. Governing Body and Management	• •	• •	
-	ector A. Governing body and Planagement		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 6			
	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?	7b	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	Yes	
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		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	∍.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
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	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
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	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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		
Se	ection 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			
	Own website Another's website 🗹 Upon request 🗆 Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ▶WILLIAM CREEDEN 753 STATE AVE SUITE 565 KANSAS CITY, KS 66101 (913) 371-2640			

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII . Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid • List all of the organization's current key employees, if any See instructions for definition of "key employee"

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

- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- 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

organization, more than \$10,000 of reportable co list persons in the following order individual trus compensated employees, and former such persoi	stees or directo									
Check this box if neither the organization no	r any related o	ganızat	tion c	omp	ens	ated a	ny c	current officer, dire	ctor, or trustee	
( <b>A</b> ) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	Position than on the second se	on (de one be	(C o no ox, u in of tor/t	) t chunle: ficer rust	ecs are employee	ore son	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
						Ē				
(1) NEWTON B JONES INTERNATIONAL PRESIDENT	56 00 56 00			×				395,391	357,674	233,287
(2) WILLIAM CREEDEN INTERNATIONAL SEC - TREAS	60 00 40 00			х				335,673	272,936	231,227
(3) TOM BACA INTERNATIONAL VICE PRES	40 00 20 00			х				335,386	0	211,508
(4) JOSEPH MALONEY	60 00									
INTERNATIONAL VICE PRES	1 00			×				433,145	0	198,985
(5) LAWRENCE J MCMANAMON	38 00									
INTERNATIONAL VICE PRES	3.00			×				346,168	0	212,131
(6) WARREN FAIRLEY	2 00 70 00			x				335,920	46,070	206,719
INTERNATIONAL VICE PRES (7) JOHN FULTZ INTERNATIONAL VICE PRES	30 00 40 00			×				317,671	0	161,745
(8) DALE A BRANSCUM II SPC ASST TO INTL PRES	40 00					x		195,775	0	122,983
(9) WILLIAM MARK VANDIVER EXECUTIVE DIRECTOR - CSP	40 00					x		193,899	0	130,256
(10) JAMES SNOWDEN EXECUTIVE DIRECTOR - BSO	40 00					х		221,564	0	150,400
(11) BRIDGET MARTIN SPC ASST TO INTL PRES - BSO	40 00 2 00					x		214,434	6,000	134,483
(12) TYLER BROWN EXECUTIVE DIRECTOR - ISO	40 00					×		225,286	0	145,230
(13) DAVID HAGGERTY INTERNATIONAL VICE PRES - PAST	0 00						х	549,247	0	162,832

Form 990 (2017) Page 8 Part VIII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Par	Section A. Officers, Direc	tors, Trustees	, Key	Empl	oye	es,	and	Higl	hest Cor	npensate	ed Employees	(cont	inued)	
	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related	than o	ne b	ox, u n of	t che inles ficer	and a	son	Repo compo froi organiz	D) ortable ensation m the eation (W- 9-MISC)	(E) Reportable compensation from related organizations (	w-	Estima Estima amount o compen from	ated of other sation the
	Former Highest compensated employee Officer Institutional Trustee or director							2/1099-MISC	)	organizat relat organiza	ed			
1h (	Sub-Total						▶			I				
c 1	Total from continuation sheets to P  Total (add lines 1b and 1c)	Part VII, Sectio	nΑ.				<b>*</b>		4,	099,559	682,68	30		2,301,786
2	Total number of individuals (including of reportable compensation from the			e list	ed al	bove	e) who	rec	eıved mo	re than \$1	.00,000			
3	Did the organization list any <b>former</b>								-		employee on		Yes	No
4	line 1a? If "Yes," complete Schedule.  For any individual listed on line 1a, is	s the sum of repo	ortable (	comp	ensa	ation	n and d	other		sation fror	• • n the	3	Yes	
	organization and related organization individual	s greater than \$	• •	0? <i>If</i> •	"Yes	i," c	omple:	te So	chedule J	for such		4	Yes	
5	Did any person listed on line 1a recei services rendered to the organization								-			5		No
Se	ection B. Independent Contract													
1	Complete this table for your five high from the organization Report compe	nest compensate ensation for the c	d indep alendar	ender year	nt co end	ntra ling	actors with o	that r wit	received hin the o	more that rganizatio	n \$100,000 of co n's tax year	mpen		
	Name	(A) and business addre	ess							Desc	(B) cription of services		(C Comper	
BLAK	E & UHLIG									LEGAL SER	•		- 5111-01	759,376
KANS	STATE AVENUE SUITE 475 AS CITY, KS 66101													
UNIT	ED UNIONS									LANDLORD				138,776
	NEW YORK AVE NW HINGTON DC 20006													

WASHINGTON, DC 20006

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 ▶ 2 Form **990** (2017)

Treat   Schedule   Centars a response or nate to a you have the Part VIII   Total revenue   Selection   Centars	Part		II Statement of	Revenue								rage 9
Total revenue   Period of Control   Period o					a respo	onse or note to any	line in th	ıs Part VIII				🗆
Telegrated expressions   1a					·		(A	1)	Rela ex- fur	B) ted or empt ction	Unrelated business	Revenue excluded from tax under sections
10   10   10   10   10   10   10   10		1:	a Federated campaig	ns	1a				rev	enue		512-514
Note   Part	nts nts					<u> </u>						
Note   Part	iral nou		·		L							
Note   Part	s, G An		_		L	<u> </u>						
Note   Part	Gift		_		L							
Note   Part	S. E				l re	<u> </u>						
Note   Part	tior sr S		and similar amounts n		1f							
Note   Part	혈			ons included								
Second   S	<u>a</u>		ın lınes 1a-1f \$									
2a	<u>ة</u> ك	Ľ	n Total.Add lines 1a-1	.f		<u> </u>						
### ### #### #########################	H.					Business	<del></del>					
### ### ### #### #####################	Ven.	_										
### ### #### #########################	o <u>¥</u>				A							
### ### #### #########################	Ŋ.											
3   Investment income (including dividends, interest, and other similar amounts)   1,407,448   1,407	₹.											
3   Investment income (including dividends, interest, and other similar amounts)   1,407,448   1,407	ram			rvice revenue	_							
3   Investment income (including dividends, interest, and other similar amounts)   1,407,448   1,407	<b>y</b> og		· -			40,6	60,944					
### Smillsr amounts	_					unterest and other	1					T
S Royaltes   (i) Real   (ii) Personal		9	sımılar amounts) .			•		1,407,448				1,407,448
Canada   C					-	·		120.26				120.267
Sea Gross rents		5	Royalties			1	<u> </u>	130,367				130,367
Description		6a	Gross rents	(I) Kea	1	(II) Personal						
C   Rental income or (loss)   257,235   276,811												
Comparison   Com		Ŀ	Less rental expenses	5	579,671							
19,375   276,611   276,611   3   276,611		•		2	257,235							
Ta Gross amount   (i) Securities   (ii) Other							ļ	257 225			40.27	276.644
7a Gross amount for sales of assets other than inventory		(	Net rental income o			<u>_</u>		257,235	1		-19,376	2/6,611
123,568   127,381   127,		7a	from sales of assets other	,,								
127,381   127,381   127,381   127,381   127,381   38a Gross income from fundraising events (not including \$ of contributions reported on line 1c)   See Part IV, line 18		ŀ	other basis and	4,2	244,844	123,568						
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		•	Gain or (loss)	1	150,907	-23,526	]					
(not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses b c Net income or (loss) from fundraising events  10aGross sales of inventory, less returns and allowances a 33,282 b Less cost of goods sold . b C Net income or (loss) from sales of inventory					•	<b>•</b>	ļ	127,381				127,381
b Less direct expenses b	evenue		(not including \$contributions reporte See Part IV, line 18	ed on line 1c)	of . a							
b Less direct expenses b	r R					ents	J					
b Less direct expenses b	the						1					
b Less direct expenses b	0					ļ						
c Net income or (loss) from gaming activities . ▶  10aGross sales of inventory, less returns and allowances  a			aloss direct evacues	_								
10aGross sales of inventory, less returns and allowances						les	]					
b Less cost of goods sold b       0         c Net income or (loss) from sales of inventory ▶       33,282         Miscellaneous Revenue       Business Code         11aOTHER INCOME       900099         b       0         d All other revenue			<b>a</b> Gross sales of invent	ory, less			1					
b Less cost of goods sold b			returns and allowand	es	3	22.202						
c Net income or (loss) from sales of inventory		ŀ	less cost of goods s	old			-					
Miscellaneous Revenue       Business Code         11aOTHER INCOME       900099         b       95,329         c       d All other revenue							J	33,282		33,282		
b  c  d All other revenue e Total. Add lines 11a–11d			Miscellaneous									
d All other revenue       95,329         12 Total revenue. See Instructions		11	LaOTHER INCOME			900099		95,329				95,329
d All other revenue       95,329         12 Total revenue. See Instructions												
d All other revenue		t	•									
d All other revenue												<b></b>
e Total. Add lines 11a-11d		(	3									
e Total. Add lines 11a-11d			4 All -6'									-
95,329 95,320 95,320 95,320 95,320 95,320 95,320 95,320 95,320 95,320 95,320 95,320 95,320 95,320 95									-			-
42,711,986 40,694,226 -19,376 2,037,136						•		95,329				<del>                                     </del>
			- TOLAT F <b>evenue.</b> See	Instructions	• •			42,711,986		40,694,226	-19,376	2,037,136

Part IX	Stat	teme	ent	of	Functional	Expenses	

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

Form 990 (2017)				Page <b>10</b>
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete	ete all columns All other o	rganizations must co	mplete column (A)	
Check if Schedule O contains a response or not	e to any line in this Part I>	( <b></b> .		<u> </u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	( <b>A</b> ) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations domestic governments See Part IV, line 21	and 312,74	1		
<b>2</b> Grants and other assistance to domestic individuals S IV, line 22	ee Part 44,66	8		
<b>3</b> Grants and other assistance to foreign organizations, f governments, and foreign individuals See Part IV, line and 16		0		
<b>4</b> Benefits paid to or for members	121,78	1		
<b>5</b> Compensation of current officers, directors, trustees, a key employees	and 3,834,27	1		
<b>6</b> Compensation not included above, to disqualified pers defined under section 4958(f)(1)) and persons describ section 4958(c)(3)(B)				
7 Other salaries and wages	10,143,45	6		
8 Pension plan accruals and contributions (include section (k) and 403(b) employer contributions)	on 401 5,925,24	9		
9 Other employee benefits	6,395,71	9		
<b>10</b> Payroll taxes	1,879,63	7		
11 Fees for services (non-employees)				
a Management				
<b>b</b> Legal	876,53	8		
c Accounting	86,63	6		
d Lobbying				
e Professional fundraising services See Part IV, line 17				+
f Investment management fees	89,67	7		
g Other (If line 11g amount exceeds 10% of line 25, col (A) amount, list line 11g expenses on Schedule O)	· ·			
12 Advertising and promotion	130,07	3		
13 Office expenses	1,754,11	0		
14 Information technology	503,71			
15 Royalties	· ·			
<b>16</b> Occupancy	944,70	15		
17 Travel	67,06			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,007,94	1		
20 Interest	69,82			+
21 Payments to affiliates	999,26			
22 Depreciation, depletion, and amortization	751,26			
23 Insurance	558,93			<del> </del>
24 Other expenses Itemize expenses not covered above miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 2 expenses on Schedule O)	(List			
a OFFICER AND REPRESENTAT	3,710,98	2		
<b>b</b> MAINTENANCE FEES	287,06	5		
c ADMINISTRATIVE EXPENSES	282,99	0		
d DUES AND FEES	148,16	2		
			1	
e All other expenses	369,76		1	
25 Total functional expenses. Add lines 1 through 24e		2		
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	1			

Form **990** (2017)

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34

Liabilities 22

Fund Balances

Assets or 30

Net

4,000,000

10,319,376

24.093.817

11.287.119

54.654.682

800.000

489.356

3,652,323

51.002.359

51,002,359

54.654.682

Form **990** (2017)

2 362 967

(B) End of year

Page **11** 

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

1	Cash–non-interest-bearing	1,419,677	1	1,104,304
2	Savings and temporary cash investments	3,262,947	2	3,850,066
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			

(A)

Beginning of year

9.732.421

25.015.695

11.250.280

54,696,800

2.481.140

447.217

2,928,357

51.768.443

51,768,443

54,696,800

10c

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trustees, key employees, and highest compensated employees Complete Part 5 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) 4,000,000 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Assets Notes and loans receivable, net . 15.780 Inventories for sale or use . 8 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 32,076,406 10a

basis Complete Part VI of Schedule D 10b 21,757,030 b Less accumulated depreciation Investments—publicly traded securities . 12 Investments—other securities See Part IV, line 11 . 13 Investments—program-related See Part IV, line 11 Intangible assets . . . . . Other assets See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34) . .

Escrow or custodial account liability Complete Part IV of Schedule D

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

key employees, highest compensated employees, and disqualified

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees,

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

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . . . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

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

Total liabilities. Add lines 17 through 25 .

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Page **12** 

2b

2c

3a

3b

Yes

Yes

No

Form **990** (2017)

Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . 5

Form 990 (2017)

☐ Separate basis

consolidated basis, or both ✓ Separate basis

Audit Act and OMB Circular A-133?

**Reconcilliation of Net Assets** 

Part XI

5 6 7

8 Other changes in net assets or fund balances (explain in Schedule O) . . . . . . . . . 9

34,582 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 51,002,359 Part XII **Financial Statements and Reporting** Check if Schedule O contains a response or note to any line in this Part XII . . . .

Yes No ✓ Cash ☐ Accrual ☐ Other 1 Accounting method used to prepare the Form 990

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a Νo If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both

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

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

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

Consolidated basis

Consolidated basis

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

#### Additional Data

Software ID: Software Version:

**EIN:** 48-6031851

Name: INTERNATIONAL BROTHERHOOD OF

WAGES, AND SIMILAR BENEFITS

Form 990, Part III, Line 4a:

Form 990 (2017)

IBB PROMOTES AND PROTECTS THE INTERESTS OF ITS MEMBERS BY BARGAINING COLLECTIVELY WITH THEIR EMPLOYERS TO SECURE BETTER WORKING CONDITIONS.

BOILERMAKERS IRON SHIP BUILDERS

## **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

DLN: 93493133025899

Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE C (Form 990 or 990-

EZ)

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2 3

1 2

5

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

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 48-6031851

BOILERMAKERS IRON SHIP BUILDERS

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

Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of 'political campaign activities")

Political campaign activity expenditures (see instructions) \$ \_\_\_\_\_ 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

Enter the amount of any excise tax incurred by organization managers under section 4955

If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

Was a correction made?

b If "Yes," describe in Part IV

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

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?

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing

5 organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount

(a) Name

INT'L BROTHERHOOD OF BOILERMAKERS

LEGISLATIVE EDUCATION FUND

(b) Address

fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

753 STATE AVE SUITE 565

KANSAS CITY, KS 66101

(c) EIN

73-1642974

(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-

☐ Yes

☐ Yes

of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segrec

unc	
-+	
ateu	

31,800

g	a	t	e	d	

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

Cat No 50084S

Schedule C (Form 990 or 990-EZ) 2017

Calendar year (or fiscal year (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (e) Total beginning in) 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

activity

Volunteers?

Media advertisements?

1

c

e

1

1

2

Current year

(b)

**Amount** 

Yes

No

Form 5768 (election under section 501(h)). (a) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

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

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

Grants to other organizations for lobbying purposes? q Direct contact with legislators, their staffs, government officials, or a legislative body? h 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? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A

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

501(c)(6).

Mailings to members, legislators, or the public? Publications, or published or broadcast statements?

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

Yes No 1 Yes 2 Yes No

Dues, assessments and similar amounts from members

Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political

expenses for which the section 527(f) tax was paid).

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

b Carryover from last year

c 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?

Return Reference PART I-A, LINE 1

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

Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information

ACCORDANCE WITH RESPECTIVE FEC AND IRS REGULATIONS

Explanation

WITH OTHER LABOR ORGANIZATIONS AND ALLIED GROUPS ON ELECTORAL MATTERS, ALL IN ORDER TO SERVE THE BEST INTERESTS OF THE ORGANIZATION'S MEMBERS, THEIR FAMILIES AND ALL WORKING PEOPLE THE INTERNATIONAL ALSO SPONSORS A SEPARATE SEGREGATED FUND THAT IS REGISTERED AS A FEDERAL POLITICAL COMMITTEE WITH THE FEDERAL ELECTION COMMISSION (FEC) AND A SEPARATE SEGREGATED FUND THAT IS REGISTERED AS A POLITICAL ORGANIZATION WITH THE INTERNAL REVENUE SERVICE (IRS) THE ORGANIZATION PROVIDES ADMINISTRATIVE SUPPORT FOR THESE FUNDS IN

THE INTERNATIONAL PROVIDES INFORMATION TO ITS MEMBERS ABOUT ELECTORAL CAMPAIGNS AND

ISSUES, ENCOURAGES ITS MEMBERS TO PARTICIPATE IN THE ELECTORAL PROCESS, AND COLLABORATES

1

2a

2b

2c 3

> 4 5

SCHEDULE D

(Form 990)

Department of the Treasury

## **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.

OMB No 1545-0047

DLN: 93493133025899

Open to Public

tern	nal Revenue Service   Information about Schedule D (For	rm 990) and its inst	truc	ctions is at <u>www.i</u>	rs.qov	<u>/form990</u> .	Ins	spection	
Na	me of the organization ERNATIONAL BROTHERHOOD OF				Emp	oloyer identifi	cation	number	
	ILERMAKERS IRON SHIP BUILDERS				48-6	031851			
Pā	ort I Organizations Maintaining Donor Advi	sed Funds or Oth	er	Similar Funds o	r Acc	ounts.			
	Complete if the organization answered "Ye	(a) Donor a				(b)Funds and	other :		_
ı	Total number at end of year	(a) Donor a	auv	isea fullas		(D)Funus and	ouner a	accounts	_
2	Aggregate value of contributions to (during year)								_
3	Aggregate value of grants from (during year)								_
1	Aggregate value at end of year								-
5	Did the organization inform all donors and donor adviso organization's property, subject to the organization's ex			ets held in donor ac	lvised	funds are the		Yes □ N	lo
5	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?						ole	Yes □ N	lo
Pa	rt II Conservation Easements. Complete if th	ne organization ans	swe	ered "Yes" on Form	n 990	, Part IV, line	7.		
L	Purpose(s) of conservation easements held by the orga	nızatıon (check all tha	at a	pply)					
	$\square$ Preservation of land for public use (e g , recreation	n or education) [		Preservation of an	histor	ically important	: land a	area	
	Protection of natural habitat	[		Preservation of a	certifie	d historic struct	ure		
	☐ Preservation of open space								
2	Complete lines 2a through 2d if the organization held a	qualified conservation	n co	ontribution in the fo	rm of a	conservation			
	easement on the last day of the tax year					Held at the	End o	f the Year	_
а	Total number of conservation easements				2a				_
b	Total acreage restricted by conservation easements		,	,	2b				_
С	Number of conservation easements on a certified histori			•	2c				_
d	Number of conservation easements included in (c) acqu structure listed in the National Register				2d				_
3	Number of conservation easements modified, transferre tax year ▶	ed, released, extinguis	she	d, or terminated by	the or	ganızatıon durır	g the		
1	Number of states where property subject to conservation	on easement is located	d ▶			_			
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds		g, ır	nspection, handling	of viola		Yes	□ No	
5	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of viola	atıo	ns, and enforcing co	onserv	ation easement	s durın	g the year	
7	Amount of expenses incurred in monitoring, inspecting,  \$ \\$	handling of violations	s, a	nd enforcing conser	vation	easements dur	ing the	: year	
3	Does each conservation easement reported on line 2(d) and section $170(h)(4)(B)(II)^2$	) above satisfy the rec	quir	ements of section 1	70(h)(		Yes	□ No	
Ð	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the organ		· ·		,			
a	t III Organizations Maintaining Collections	of Art, Historical		•	er Si	milar <b>A</b> ssets			_
La	Complete if the organization answered "Ye If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for	16 (ASC 958), not to r public exhibition, edu	repo	ort in its revenue sta tion, or research in f					_
b	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	ne exhibition, educati	J11,	o, research in fulti	ioi arree	•			
	(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, histori following amounts required to be reported under SFAS	·			ncıal g	ain, provide the	÷		

Revenue included on Form 990, Part VIII, line 1

**b** Assets included in Form 990, Part X

Sche	dule D (Form 990) 2017										Page <b>2</b>
Par	t IIII Organizations Maintaining Co	lections o	f Art, Histo	rical T	reası	ıres, oı	r Other Si	milar A	ssets (conti	nued)	
3	Using the organization's acquisition, accessio items (check all that apply)	n, and other	records, che	k any of	f the fo	llowing t	:hat are a sı	gnıfıcant ı	use of its coll	ection	
а	Public exhibition		C		Loan	or excha	ange progra	ms			
b	Scholarly research		•		Othe	r					
С	Preservation for future generations										
4	Provide a description of the organization's col Part XIII	llections and	explain how	they furt	her the	e organız	zation's exe	mpt purpo	ose in		
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to							nr	☐ Yes	□ N	0
Pai	<b>Escrow and Custodial Arrange</b> Complete if the organization answ X, line 21.		on Form 9	90, Pari	t IV, lı	ne 9, oi	r reported	an amoı	unt on Form	990,	Part
1a	Is the organization an agent, trustee, custodi included on Form 990, Part X?	an or other	ntermediary	or contr	bution	s or othe	er assets no	t	☐ Yes	□ N	o
ь	If "Yes," explain the arrangement in Part XIII	and comple	te the follow	na table		[		Δ	mount		_
c	Beginning balance	. and comple	ice the following	ing table			1c				_
d	Additions during the year						1d				_
е	Distributions during the year					l	1e				_
f	Ending balance						1f				_
2a	Did the organization include an amount on Fo	orm 990, Par	t X, line 21, f	or escro	w or cu	stodial a	ccount liabi	lity?	☐ Yes	□м	_
b	If "Yes," explain the arrangement in Part XIII										
Pa	rt V Endowment Funds. Complete if										
1 2	Beginning of year balance	(a)Curren	t year (I	Prior yea	ar	(c)Two ye	ears back (	<b>d)</b> Three ye	ars back (e)F	our year	s back_
	Contributions				_						
	Net investment earnings, gains, and losses										
	Grants or scholarships										
	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curre	ent year end	balance (line	1g, colu	ımn (a	)) held a			l		
а	Board designated or quasi-endowment >	·	·								
ь	Permanent endowment ▶										
С	Temporarily restricted endowment ▶										
	The percentages on lines 2a, 2b, and 2c shou	ıld equal 100	)%								
За	Are there endowment funds not in the posses	ssion of the o	organization t	hat are h	neld an	d admını	istered for t	he			
	organization by  (i) unrelated organizations								3a(i)	Yes	No
	(ii) related organizations			•	٠.	• •			3a(ii)		
b	If "Yes" on 3a(II), are the related organization	ns listed as r	equired on So	hedule F	۲۶ .				3b		
4	Describe in Part XIII the intended uses of the										
Pa	rt VI Land, Buildings, and Equipme										
	Complete if the organization answ										
	Description of property (a) Cost or oth (investment)		(b) Cost or ot	ier Dasis i	(ouner)	(C) Acc	umulated dep	eciation	( <b>a</b> ) Bo	ook valu	e
1a	Land			2,5	10,243					2	,510,243
	Buildings			14,5	42,273			8,193,960		$\epsilon$	5,348,313
	Leasehold improvements										
	Equipment			14,0	90,865		1	3,066,964		1	,023,901

933,025

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

496,106

436,919

10,319,376

Part VII	<b>Investments—Other Securities.</b> Complete if the See Form 990, Part X, line 12.	ne organization ai	nswered "Yes" or	Form 990, Part IV, line 11b.
	(a) Description of security or category (including name of security)	(b) Book value	Cos	(c) Method of valuation it or end-of-year market value
(1) Financial	derivatives			
(3) Other	neld equity interests			
	ENT IN BANK STOCK	5,551,8		C
	D REAL ESTATE	4,388,6		C
(C) AFL-CIO (D)	HOUSING INVESTMENT TRUST	1,346,5	86	С
(E)				
(F)				
(G)				
(H)				
	(b) must equal Form 990, Part X, col (B) line 12 )	11,287,1	19	
Part VIII	<b>Investments—Program Related.</b> Complete if the organization answered 'Yes' on F	orm 990, Part IV	, lıne 11c. See F	orm 990, Part X, line 13.
	(a) Description of investment	(b) Book val		(c) Method of valuation t or end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	(b) must equal Form 990, Part X, col (B) line 13 )	<b>•</b>	5 . 5)	
Part IX	Other Assets. Complete if the organization answered  (a) Description		Part IV, line 11d	See Form 990, Part X, line 15  (b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization a	nswered 'Yes' on	Form 990. Part	▶   IV. line 11e or 11f.
	See Form 990, Part X, line 25.  (a) Description of liability		) Book value	
(1) Federal ır		(5	) book value	
PAYROLL WIT	THHOLDINGS		452,817	
	ONAL OVER / SHORT		36,539	
(3) (4)				
(5)				
(6)				
(7)				
(8)				
(9) ————				
	r (b) must equal Form 990, Part X, col (B) line 25 ) r uncertain tax positions In Part XIII, provide the text of	f the footnote to the	489,356 organization's fina	ancial statements that reports the
	s liability for uncertain tax positions under FIN 48 (ASC 7			

Part XI

2

3

4

b

c

Part XII

5

1

2

c

d

3

4

b

5

Part XIII

See Additional Data Table

Return Reference

Schedule D (Form 990) 2017

Page 4

34,582

43,291,657

579,670

43,512,653

43.512.653

Schedule D (Form 990) 2017

b	Donated services and use of facilities
c	Recoveries of prior year grants
d	Other (Describe in Part XIII )

Add lines **4a** and **4b** . . . . . . . .

Donated services and use of facilities . . .

Supplemental Information

Amounts included on line 1 but not on Form 990, Part IX, line 25

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 . .

Net unrealized gains (losses) on investments . . . . 

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . .

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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . .

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

Amounts included on Form 990, Part VIII, line 12, but not on line 1

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Investment expenses not included on Form 990, Part VIII, line 7b .

4b

4a

2a 2b

2c

2d

4a

4b

Explanation

2a 2b 2c

-579,670

34.582

579,670

2e

3

4c

5

3 4c

2e

-579,670
42,711,987
44,092,323

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

Schedule D (Form 990) 2017

#### **Additional Data**

Software ID: Software Version:

RE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS

**EIN:** 48-6031851

Name: INTERNATIONAL BROTHERHOOD OF

BOILERMAKERS IRON SHIP BUILDERS

Supplemental Information

PART X, LINE 2

# Return Reference Explanation LINE 2 THE INTERNATIONAL BROTHERHOOD IS REQUIRED TO EVALUATE ITS TAX POSITIONS AND DISCLOSE THE A MOUNT OF TAX LIABILITY IF THE INTERNATIONAL BROTHERHOOD HAS TAKEN AN UNCERTAIN POSITION TH AT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY TAX AUTHORITIES THE IN

TERNATIONAL BROTHERHOOD IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS, HOWEVER, THE

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	GAIN ON CANADIAN CURRENCY CONVERSION 34,582

-

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	RENTAL EXPENSES -579,670

upplemental Information							
Return Reference	Explanation						
PART XII, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES 579,670						

SCHEDULE F	Staten	nent of	Activities	Outside the Un	ited St	ates	OMB No 1545-0047		
(Form 990)	•	olete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, o  ► Attach to Form 990.  ation about Schedule F (Form 990) and its instructions is at www.irs.gov/foi					2017		
Department of the Treasury Internal Revenue Service							Inspection		
Name of the organization INTERNATIONAL BROTHER BOILERMAKERS IRON SHI						<b>Employer ident</b> 48-6031851	ification number		
	<b>nformation o</b> Part IV, line 14		s Outside the	United States. Comple	ete if the i	organization ar	nswered "Yes" to		
<del>-</del>	he grantees' eli	gıbılıty for t		substantiate the amoun stance, and the selection	_		□ Yes 🗹 No		
2 For grantmakers outside the United		art V the org	anızatıon's proce	edures for monitoring the	e use of its	grants and oth	er assistance		
3 Activites per Region	(The following	Part I, line 3	table can be dupl	ıcated ıf addıtıonal space ı	s needed )				
(a) Region		<b>b)</b> Number of offices in the region	(c) Number of employees, agents and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program s	ty listed in (d) is a service, describe lific type of e(s) in region	(f) Total expenditures for and investments in region		
(1) CANADA		2	9	ACTIVITIES TO PROMOTE AND PROTECT THE INTERESTS OF CANADIAN MEMBERS BY BARGAINING COLLECTIVELY	AND PROT	ECT THE 5 OF CANADIAN BY NG	3,206,41		
( 2)									
( 3)									
( 4)									
( 5)									
3a Sub-total b Total from continuati Part I			2 9				3,206,41		
c Totals (add lines 3a			21 9	)	I		3,206,41		

(1)				
( 2)				
(3)				

(4) 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-

exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . . . . . . . . .

(2) (3) (4) (5) (6) (7)

(8) (9) (10) (11) (12)

(13) (14) (15) (16) (17) (18) Page 3

appraisal, other)

Schedule F (Form 990) 2017

N/A

Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (b) Region (c) Number of (d) Amount of (e) Manner of cash (f) Amount of (g) Description (h) Method of recipients cash grant disbursement non-cash of non-cash valuation (book, FMV,

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

assistance assistance (1) SCHOLARSHIPS CANADA 9 11,140 DIRECT PAYMENT TO 0 N/A UNIVERSITY

Sche	dule F (Form 990) 2017		Page <b>4</b>
Pai	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	<b>☑</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	Yes	<b>☑</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	<b>✓</b> No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	□Yes	<b>☑</b> No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	□Yes	<b>☑</b> No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	☐Yes	<b>✓</b> No
	Schedul	e F (Form 9	990) 2017

Schedule Fi	(Form 990) 2017	Page !
Part V	amounts of investments vs.	uired by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; expenditures per region); Part II, line 1 (accounting method); Part III (accounting nn (c) (estimated number of recipients), as applicable. Also complete this part to provide
	ReturnReference	Explanation

Schedule F (Form 990) 2017

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -					DLI	N: 934931330	25899	
Schedule I (Form 990)  Department of the	Grants and Other Assistance to Organizations, Governments and Individuals in the United States  Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.  Attach to Form 990.								OMB No 1545-0047  2017  Open to Public	
Treasury Internal Revenue Service	► Infor		Inspection							
Name of the organization INTERNATIONAL BROTHERHOO						'	oloyer identifica 6031851	ation number		
BOILERMAKERS IRON SHIP BU Part I General Infor	ILDERS mation on Grants	and Assistance				40-1	0031831			
the selection criteria use  Describe in Part IV the o	d to award the grants rganization's procedu	or assistance? res for monitoring the u	se of grant funds in the U	nited States				✓ Yes	□ No	
				ents. Complete if the o	rganization answered "Yes	" on Form 990	), Part IV, line	21, for any recip	ient	
(a) Name and address of organization or government	on (if applicable) grant cash (book, FMV, appraisal, noncash assis									
(1) See Additional Data										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
		-	s listed in the line 1 table				. <b>.</b>		11 2	
For Paperwork Reduction Act No	tice, see the Instruction	ons for Form 990.		Cat No 50055	5P		Sch	edule I (Form 990	) 2017	

Page **2** 

Schedule I (Form 990) 2017

(2) DEATH BENEFITS 5,000 FMV N/A (3) OTHER 1,668

(3) (4) (5) (6)

(7)

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

**Explanation** 

Return Reference

PART I, LINE 2 THE EXECUTIVE BOARD CAREFULLY REVIEWS ALL REQUESTS FOR DONATIONS PRIOR TO THEIR APPROVAL AND DISBURSEMENT APPROVAL IS GRANTED ONLY TO REPUTABLE ORGANIZATIONS AND INDIVIDUALS WHO HAVE SATISFIED THE BOARD'S DUE DILIGENCE THE BOARD PERFORMS NO SUBSEQUENT MONITORING OF

THE USE OF DONATIONS AND GRANTS. ALL RECORDS REGARDING DISBURSEMENT OF FUNDS ARE MAINTAINED AT THE INTERNATIONAL'S OFFICE Schedule I (Form 990) 2017

### **Additional Data**

		Software ID: Software Version: EIN: Name:	: 48-6031851				
Form 990,Schedule I, Part (a) Name and address of	t II, Grants and C	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	(g) Description of	(h) Purpose of grant
organization or government		ıf applicable	grant	cash assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
BOYS & GIRLS CLUBS OF CHICAGO 550 W VAN BUREN STREET SUITE 350 CHICAGO, IL 60607	36-2166997	501(C)(3)	10,000				CHARITABLE CONTRIBUTION
CARBON UTILIZATION RESEARCH COUNCIL 1050 THOMAS JEFFERSON STREET NW SUITE 700 WASHINGTON, DC 20007	52-2028570	501(C)(6)	10,000				CHARITABLE CONTRIBUTION

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ABLE

CONTRIBUTION

CHICAGO WOMEN IN TRADES 244 W 16TH STREET CHICAGO, IL 60608	36-3256699	501(C)(3)	7,500		CHARITABLE CONTRIBUTION
ECONOMIC POLICY INSTITUTE	52-1368964	501(C)(3)	20,000		CHARITABLE

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

1333 H STREET NW SUITE 300 I

WASHINGTON, DC 20005

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance FISHING FOR FREEDOM 45-5597183 501(C)(3) 10.000 CHARITABLE

PO BOX 654 LEAVENWORTH, KS 66048		, ,, ,	·		CONTRIBUTION
HELMETS TO HARDHATS 815 16TH STREET NW SUITE 600	43-1972568	501(C)(3)	10,000		CHARITABLE CONTRIBUTI

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

WASHINGTON, DC 20006

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 65-0865370 501(C)(3) 7.500 CHARITABLE LABOR OF LOVE INTERNATIONAL INC CONTRIBUTION

5640 WARD ROAD ARVADA, CO 08002					CONTRIBUTION
NATIONAL CONSUMERS LEAGUE INC 1701 K STREET NW SUITE	53-0242038	501(C)(3)	5,350		CHARITABLE CONTRIBUTION

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

1200

WASHINGTON, DC 20006

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-1289622 501(C)(6) 5.500 CHARITABLE NATIONAL MAINTENANCE CONTRIBUTION AGREEMENT POLICY

COMMITTEE 1501 LEE HIGHWAY SUITE 202 ARLINGTON, VA 22209					
ROSIE THE RIVETER TRUST	94-3335350	501(C)(3)	10,000		CHARIT

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

SUITE 221

RICHMOND, CA 94801

ITABLE CONTRIBUTION 440 CIVIC CENTER PLAZA

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant ıf applıcable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance TEXAS AFL-CIO WORKER 74-1289747 501(C)(3) 10,000 CHARITABLE RIBUTION

RELIEF FUND PO BOX 12727 AUSTIN, TX 78711					CONTRIE
THE PEGGY BROWNING FUND	23-2887086	501(C)(3)	7,500		CHARITA

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

PHILADELPHIA, PA 19110

TABLE CONTRIBUTION 100 S BROAD STREET SUITE 1208

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (b) EIN (c) IRC section organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 501(C)(3) 85.695 UNION SPORTSMEN'S 27-2345009 CHARITABLE ALLIANCE CONTRIBUTION

4800 NORTHFIELD LANE SPRING HILL. TN 37174

efile GRAPHIC print - DO NOT PROCESS   As Filed Data - DLN: 93493133									899
Sch	edule J	Co	ompensat	ion	Information	00	1B No	1545-0	0047
(Forr	n 990)	► Complete if the org	Compens ganization ansv ► Attacl	ated E wered h to Fo	es, Key Employees, and Higl mployees "Yes" on Form 990, Part IV, orm 990.	line 23.		17	
•	tment of the Treasury al Revenue Service	► Information a			m 990) and its instructions i form990.	s at C		to Pul	
	ne of the organiz	I ation	***************************************	,, <u>q</u> 01/1	<u> </u>	Employer identificat			
	ERNATIONAL BROTH LERMAKERS IRON S					48-6031851			
Pa	rt I Questi	ons Regarding Compensa	ition		L				
								Yes	No
1a		opiate box(es) if the organizatio section A, line 1a Complete Part							
	First-class	s or charter travel		Hous	ing allowance or residence for p	personal use			
		companions		•	nents for business use of persor				
		nification and gross-up payment	ts 🔽		th or social club dues or initiation				
	□ Discretion	nary spending account		Perso	onal services (e g , maid, chauf	reur, cner)			
b		xes in line 1a are checked, did t all of the expenses described ab				ent or reimbursement	1b	Yes	
2		ation require substantiation prio ees, officers, including the CEO/I				1 = 2	2	Yes	
	anectors, traste	ees, officers, including the CLO/I	LXECULIVE DITECTO	oi, rega	irumg the items thetheu in ime	ia.			
3	organization's C	ıf any, of the following the filing EEO/Executive Director Check a ed organization to establish com	Il that apply Do	not che	eck any boxes for methods				
	☐ Compens	ation committee		Writt	en employment contract				
		ent compensation consultant							
	☐ Form 990	of other organizations	✓	Appro	oval by the board or compensat	cion committee			
4	During the year related organiza	r, did any person listed on Form ation	990, Part VII, Se	ection A	$\lambda$ , line $1$ a, with respect to the fi	ling organization or a			
а	Receive a sever	ance payment or change-of-con	itrol payment?				4a	Yes	
b	Participate in, o	r receive payment from, a supp	lemental nonqua	lified re	etirement plan?		4b	Yes	
c		r receive payment from, an equ	,		-		4c	Yes	
	If "Yes" to any	of lines 4a-c, list the persons an	d provide the app	plicable	e amounts for each item in Part	III			
	Only 501(c)(3	s), 501(c)(4), and 501(c)(29	) organizations	must	complete lines 5-9.				
5		ed on Form 990, Part VII, Section Contingent on the revenues of		the or	ganization pay or accrue any				
а	The organizatio	n?					5a		
b	Any related org						5b		
		5a or 5b, describe in Part III							
6		ed on Form 990, Part VII, Section Contingent on the net earnings o		the or	ganization pay or accrue any				
а	The organizatio						<b>6</b> a		
b	Any related org						6b		
_	•	6a or 6b, describe in Part III							
7	payments not d	ed on Form 990, Part VII, Section Sescribed in lines 5 and 6? If "Ye	s," describe in Pa	art III	,	I	7		
8		ints reported on Form 990, Part nitial contract exception describe				escribe	8		
9	If "Yes" on line 53 4958-6(c)?	8, did the organization also follo	ow the rebuttable	presu	mption procedure described in	Regulations section	9		
For F	Paperwork Redu	uction Act Notice, see the Ins	structions for Fo	orm 9	<b>90.</b> Cat No 5	0053T Schedule J	(Form	1990)	2017

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (C) Retirement (D) Nontaxable (B) Breakdown of W-2 and/or 1099-MISC (E) Total of (F) and other benefits columns compensation Compensation in

		compensation		deferred	Bellettes	(0)(1)(0)	Compensation in
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table							
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		1	Schedule J (Fo	orm 990) 2017

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

FIRST-CLASS TRAVEL OR CHARTER TRAVEL DURING CALENDAR YEAR 2017, THE IBB ALLOWED FOR ALL MEMBERS OF THE INTERNATIONAL EXECUTIVE COUNCIL

TO TRAVEL FIRST CLASS. THE FIRST-CLASS TRAVEL IS NOT CONSIDERED TAXABLE COMPENSATION TO THOSE INDIVIDUALS LISTED. HEALTH OR SOCIAL CLUB FEES DURING CALENDER YEAR 2017 THE INTERNATIONAL PAID HEALTH CLUB MEMBERSHIP FEES FOR INTERNATIONAL VICE PRESIDENT LAWRENCE MCMANAMON THE MEMBERSHIP FEES FOR LAWRENCE MCMANAMON ARE CONSIDERED TAXABLE COMPENSATION AND ARE INCLUDED IN SCHEDULE J. PART II. COLUMN B (III) TAX INDEMNIFICATION AND GROSS UP PAYMENTS DURING CALENDAR YEAR 2017, THE INTERNATIONAL INDEMNIFIED PERSONAL USE OF THE INTERNATIONAL'S AUTOMOBILES FOR ALL MEMBERS OF THE INTERNATIONAL EXECUTIVE COUNCIL AND CERTAIN OTHER EMPLOYEES THESE INDEMNIFICATIONS WERE TREATED AS TAXABLE COMPENSATION AND ARE INCLUDED IN SCHEDULE J. PART II. COLUMN B (III) PART I, LINES 4A-C PART I, LINE 4A INTERNATIONAL BROTHERHOOD OFFICERS ARE ELIGIBLE FOR SEVERANCE PAY UPON RETIREMENT OR DEATH DURING THEIR TERM OF OFFICE ITHE SEVERANCE PAY IS EOUAL TO THE GREATER OF THREE MONTHS' SALARY, OR ONE WEEK'S SALARY FOR EACH YEAR OF FULL-TIME SERVICE WITH A MAXIMUM OF SIX MONTHS' SALARY, IN ADDITION TO THE TRANSFER OF TITLE TO THE AUTOMOBILE DRIVEN BY THE OFFICER DURING THE CALENDAR YEAR WHICH ENDED DURING THE REPORTING PERIOD, INTERNATIONAL VICE PRESIDENT DAVID HAGGERTY RETIRED AND RECEIVED SEVERANCE PAY OF \$156,919 PART I, LINE 4B ALL MEMBERS OF THE INTERNATIONAL EXECUTIVE COMMITTEE AS WELL AS INTERNATIONAL SECRETARY TREASURER WILLIAM CREEDEN

PARTICIPATE IN A SUPPLEMENTAL NONOUALIFIED RETIREMENT PLAN UNDER THIS PLAN, AMOUNTS ARE ALLOCATED ANNUALLY TO INDIVIDUAL ACCOUNT BALANCES INTEREST IS ALSO CREDITED ANNUALLY UPON RETIREMENT THE PARTICIPANT IS PAID THE BALANCE OF THEIR INDIVIDUAL ACCOUNT THIS AMOUNT IS PAID OUT OF THE INTERNATIONAL'S GENERAL ASSETS DURING THE 2017 CALENDAR YEAR, ALLOCATIONS INTO INDIVIDUAL ACCOUNT BALANCES TOTALED \$108.000 AND DISBURSEMENTS MADE TO RETIRING PARTICIPANTS WERE \$98.984 PART I. LINE 4C CERTAIN MEMBERS OF THE INTERNATIONAL EXECUTIVE COMMITTEE AS WELL AS INTERNATIONAL SECRETARY TREASURER WILLIAM CREEDEN SERVE ON THE BOARD OF DIRECTORS OF BROTHERHOOD BANCSHARES, INC. (THE "HOLDING COMPANY") AND BANK OF LABOR (THE "BANK"), RELATED ORGANIZATIONS. THESE INDIVIDUALS ARE NEWTON JONES, WILLIAM CREEDEN. AND TRUMAN WARREN FAIRLEY JR. THESE DIRECTORS PARTICIPATE IN A LONG TERM DEFERRED COMPENSATION PLAN OFFERED BY THE HOLDING COMPANY AND THE BANK REFERRED TO AS THE BANK OF LABOR STOCK INCENTIVE COMPENSATION PLAN (THE "PLAN") UNDER THIS ARRANGEMENT, AMOUNTS ARE ALLOCATED ANNUALLY TO EACH PARTICIPANT'S INDIVIDUAL ACCOUNT IN THE PLAN. THESE ACCOUNT BALANCES APPRECIATE AND DEPRECIATE IN VALUE BASED ON THE HOLDING COMPANIES BOOK VALUE. WHICH IS DETERMINED ANNUALLY WHEN A PARTICIPANT SEPARATES FROM SERVICE FROM THE HOLDING COMPANY AND THE BANK, THE PARTICIPANT IS PAID THE BALANCE OF THEIR INDIVIDUAL ACCOUNT FROM THE ASSETS OF THE PLAN DURING THE

**DURING 2017** 

Supplemental Information

Schedule J (Form 990) 2017

Part III

PART I. LINE 1A

2017 CALENDAR YEAR, ALLOCATIONS INTO INDIVIDUAL ACCOUNT BALANCES TOTALED \$15,000 THERE WERE NO DISBURSEMENTS TO THESE INDIVIDUALS

Page 3

5WARREN FAIRLEY

**6**JOHN FULTZ

CSP

**BSO** 

BSO

ISO

- PAST

INTERNATIONAL VICE PRES

INTERNATIONAL VICE PRES

(i)

(i)

(II)

(i)

(II)

(1)

7DALE A BRANSCUM II

SPC ASST TO INTL PRES

8WILLIAM MARK VANDIVER

**EXECUTIVE DIRECTOR -**

**EXECUTIVE DIRECTOR -**

SPC ASST TO INTL PRES

**EXECUTIVE DIRECTOR -**

12DAVID HAGGERTY

INTERNATIONAL VICE PRES

9JAMES SNOWDEN

10BRIDGET MARTIN

11TYLER BROWN

## Software ID:

**Software Version:** 

(ii)

Bonus & incentive

compensation

**EIN:** 48-6031851

(iii)

Other reportable

compensation

Name: INTERNATIONAL BROTHERHOOD OF

BOILERMAKERS IRON SHIP BUILDERS

other deferred

compensation

183,031

138,997

105,885

112,453

129,184

120,093

129,529

156,795

5,000

benefits

18,688

22,748

17,098

17,803

21,216

14,390

15,701

6,037

(E) Total of columns

(B)(i)-(D)

537,639

51,070

479,416

318,758

324,155

371,964

348,917

370,516

712,079

6,000

98,984

(F) Compensation in

column (B)

reported as deferred on

prior Form 990

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (D) Nontaxable (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and

6,000

NTERNATIONAL	(1)	389,560	0	5,831	188,178	24,690	608,259	0
PRESIDENT	(11)	347,694	8,000	1,980	18,334	2,085	378,093	0
<b>1</b> WILLIAM CREEDEN INTERNATIONAL SEC -	(1)	334,359	0	1,314	183,031	29,393	548,097	0
<del>-</del>	(11)	258,724	8,000	6,212	16,515	2,288	291,739	0
<b>2</b> TOM BACA INTERNATIONAL VICE PRES	(1)	334,359	0	1,027	183,031	28,477	546,894	0
	(11)	0	0	0	0	0	0	0
<b>3</b> JOSEPH MALONEY INTERNATIONAL VICE PRES	(1)	433,145	0	0	183,031	15,954	632,130	0
	(11)	0	0	0	0	0	0	0
4LAWRENCE J MCMANAMON	(1)	343,616	0	2,552	184,060	28,071	558,299	0

1,562

2,488

1,018

608

152

12

2,023

455,871

## (i) 1NEWTON B JONES 389.560

334,358

46,070

315,183

194,757

193,291

221,412

214,422

223,263

93,376

(i) Base Compensation

efile GRAPH	IIC print - DO	ON C	T PROCESS	As Fi	led Data -					DL	N: 93	4931	330	25899
Schedule I (Form 990 or 99	90-EZ) ► Cor		e if the organi 27, 28a, 28	zation a Bb, or 28 ▶ Attac	nswered "Yes sc, or Form 990 th to Form 990	" on Form 9 0-EZ, Part \ ) or Form 9	ed Persons 990, Part IV, lir /, line 38a or 46 90-EZ. Z) and its instru	nes 2! 0b.			,	1B No <b>20</b>		
Department of the T Internal Revenue Se	reasurv				www.irs.gov/		,				C	pen t Insp		
Name of the or INTERNATIONAL									<b>iploy</b> -6031		ntifica	tion n		
							d 501(c)(29) org				- 401-			
	(a) Name of dis				Relationship bet		or 25b, or Form 9 alified person and	$\overline{}$	<b>c)</b> D	escripti escripti insactio	on of	n of (d) Corre		rected?
4958 . 3 Enter the  Part II L Concentration (a) Name of	oans to and, omplete if the ceported an amo	or For Forgania	rom Interes zation answered Form 990, Par (c) Purpose of	ted Per "Yes" or t X, line!	sons. The Form 990-EZ, 5, 6, or 22 The to or from the	Part V, line	during the year	O, Par	t IV,	line 26	1)	(i	<b>)</b> Writ	tten
interested person	with organiza	tion	loan	org	anızatıon?	principal amount		defa	ult?	Approv boar comm	d or	ag	reem	ent?
(1)	MAJORITY		INVESTMENT	То	From X	4,000,000	4,000,000	Yes	No	Yes	No	Yes		No
(1) BANK OF LABOR	MAJORITY SHAREHOLDE		INVESTMENT		^	4,000,000	4,000,000		No	Yes		Yes		
(2) BANK OF LABOR	MAJORITY SHAREHOLDE		GENERAL OPERATING	Х		1,400,000	800,000		No	Yes		Yes		
Total Part III G	rants or Assi	stan	ce Benefitin	a Inter		\$ 15.	4,800,000							
	omplete if the	orga (b)	nization answ Relationship be erested person a organization	ered "Ye etween and the		90, Part IV	(d) Type of	f assis	stance	e (	( <b>e)</b> Pur	pose o	f ass	stance
Ear Danamusuk D	advation Ast No.		ee the Instructio	ne for Fe	000 av 000 E	7	Cat No 50056A		6-1		<b>/</b> F	990 or		==> ===

**Explanation** 

Schedule I (Form 990 or 990-F7) 2017

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

Return Reference

## **Additional Data**

## **Software ID:**

**Software Version: EIN:** 48-6031851

Name: INTERNATIONAL BROTHERHOOD OF

BOILERMAKERS IRON SHIP BUILDERS

Form 990, Schedule L, Part IV - Busin	ess Transactions Inv	volving Interested F	Persons		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sh o organiz rever	f :ation's
				Yes	No
(1) BANK OF LABOR	MAJORITY SHAREHOLDER, CUSTODIAL AND COMMERICAL BANK, LOAN SERVICER, TENANT	5,309,722	THE IBB OWNS A MAJORITY OF THE OUTSTANDING BANCSHARES ISSUED BY THE BANK OF LABOR (THE BANK), THE IBB HOLDS BANK ACCOUNTS AND CUSTODIAL INVESTMENT ACCOUNTS AT THE BANK, THE BANK IS ALSO A TENANT IN THE OFFICE BUILDING THAT IS OWNED AND OPERATED BY THE IBB PREVIOUSLY, THE INTERNATIONAL ENTERED INTO A LOAN ARRANGEMENT WITH THE BANK, THIS LOAN IS CONSIDERED AN INVESTMENT TO THE INTERNATIONAL CERTAIN MEMBERS OF THE INTERNATIONAL EXECUTIVE COMMITTEE SIT ON THE BOARD OF DIRECTORS OF THE BANK, THESE INCLUDE NEWTON JONES, INTERNATIONAL PRESIDENT WHO IS ALSO CHAIRMAN OF THE BOARD OF DIRECTORS OF THE BANK AND TRUMAN WARREN FAIRLEY JR, INTERNATIONAL VICE PRESIDENT OF THE IBB WHO IS ALSO ON THE BOARD OF DIRECTORS OF DIRECTORS OF THE BANK OF LABOR		No
(1) BOILERMAKER NATIONAL FUNDS	TENANT	449,909	THE BOILERMAKERS NATIONAL FUNDS ARE TENANTS IN THE OFFICE BUILDING THAT IS OWNED AND OPERATED BY THE INTERNATIONAL THESE FUNDS PAY RENT TO THE INTERNATIONAL NUMEROUS MEMBERS OF THE INTERNATIONAL EXECUTIVE COMMITTEE SIT ON THE BOARD OF TRUSTEES OF THE BOILERMAKERS NATIONAL FUNDS AS UNION TRUSTEES THESE INCLUDE INTERNATIONAL VICE PRESIDENTS TOM BACA, TRUMAN WARREN FAIRLEY JR , JOHN FULTZ AND LAWRENCE MCMANAMON		No

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (d) Description of transaction (e) Sharing (b) Relationship (c) Amount of between interested transaction of person and the organization's organization revenues? Yes No (3) CHARLES A JONES **EMPLOYEE** 306,155 CHARLES A JONES IS THE Nο DIRECTOR OF ARCHIVE PRESERVATION AT THE INTERNATIONAL THE IBB PAYS CHARLES A JONES A SALARY AND CONTRIBUTES TO EMPLOYEE BENEFIT PLANS ON HIS BEHALF CHARLES A JONES IS A FAMILY MEMBER OF INTERNATIONAL PRESIDENT NEWTON JONES (1) RYAN CREEDEN **EMPLOYEE** 288.411 RYAN CREEDEN IS THE DIRECTOR No OF I T SERVICES FOR THE INTERNATIONAL THE IBB PAYS RYAN CREEDEN A SALARY AND CONTRIBUTES TO EMPLOYEE BENEFIT PLANS ON HIS BEHALF RYAN CREEDEN IS A FAMILY MEMBER OF INTERNATIONAL SECRETARY TREASURER WILLIAM

CREEDEN

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Sharing between interested transaction of person and the organization's organization revenues? Yes No (5) MARK GARRETT **EMPLOYEE** 252,898 MARK GARRETT IS THE Nο DIRECTOR OF HEALTH AND SAFETY SERVICES FOR THE INTERNATIONAL THE IBB PAYS MARK GARRETT A SALARY AND CONTRIBUTES TO EMPLOYEE BENEFIT PLANS ON HIS BEHALF MARK GARRETT IS A FAMILY MEMBER OF INTERNATIONAL VICE PRESIDENT TRUMAN WARREN FAIRLEY JR **EMPLOYEE** 165,380 CULLEN JONES IS THE I T VIDEO (1) CULLEN JONES No COMMUNICATION TECHNICIAN FOR THE INTERNATIONAL THE IBB PAYS CULLEN JONES A SALARY AND CONTRIBUTES TO EMPLOYEE BENEFIT PLANS ON HIS BEHALF CULLEN JONES IS A FAMILY MEMBER OF INTERNATIONAL PRESIDENT **NEWTON JONES** 

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Sharing between interested transaction of person and the organization's organization revenues? Yes No (7) BRIAN CREEDEN **EMPLOYEE** 121,970 BRIAN CREEDEN IS AN ENGINEER Nο FOR THE INTERNATIONAL THE IBB PAYS BRIAN CREEDEN A SALARY AND CONTRIBUTES TO EMPLOYEE BENEFIT PLANS ON HIS BEHALF BRIAN CREEDEN IS A FAMILY MEMBER OF INTERNATIONAL SECRETARY TREASURER WILLIAM CREEDEN (1) KATERYNA JONES **EMPLOYEE** 112,159 KATERYNA JONES IS A SPECIAL No ASSISTANT TO THE INTERNATIONAL PRESIDENT THE IBB PAYS KATERYNA JONES A SALARY AND CONTRIBUTES TO EMPLOYEE BENEFIT PLANS ON HER BEHALF KATERYNA JONES IS A FAMILY MEMBER OF INTERNATIONAL PRESIDENT **NEWTON JONES** 

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Sharing between interested transaction of person and the organization's organization revenues? Yes No (9) HEATHER BACA **EMPLOYEE** 107,502 HEATHER BACA IS A SECRETARY Nο FOR THE INTERNATIONAL THE IBB PAYS HEATHER BACA A SALARY AND CONTRIBUTES TO EMPLOYEE BENEFIT PLANS ON HER BEHALF HEATHER BACA IS A FAMILY MEMBER OF INTERNATIONAL VICE PRESIDENT TOM BACA (1) MEGHAN MCMANAMON **EMPLOYEE** 14,761 MEGHAN MCMANAMON IS A No SECRETARY ASSISTANT FOR THE INTERNATIONAL THE IBB PAYS MEGHAN MCMANAMON A SALARY AND CONTRIBUTES TO EMPLOYEE BENEFIT PLANS ON HER BEHALF MEGHAN MCMANAMON IS A FAMILY MEMBER OF INTERNATIONAL VICE PRESIDENT

LAWRENCE MCMANAMON

efile GRAPH	IC print	- DO NOT PROCESS	As Filed Data -		DLI	N: 93493133025899				
SCHEDUL (Form 990 or EZ)	reasury	Complete to p Form 99	orovide information fo O or 990-EZ or to prov ▶ Attach to Forn out Schedule O (Form	on to Form 990 or or responses to specific quest yide any additional informati on 990 or 990-EZ. 990 or 990-EZ) and its instr ov/form990.	tions on ion.	OMB No 1545-0047  2017  Open to Public Inspection				
Internal Revenue Service Name of the organization INTERNATIONAL BROTHERHOOD OF BOILERMAKERS IRON SHIP BUILDERS  990 Schedule O, Supplemental Information						ntification number				
Return Reference		Explanation								
FORM 990, PART VI, SECTION A, LINE 6	STANDIN P ELECT	THE INTERNATIONAL'S GENERAL MEMBERSHIP IS COMPRISED OF INDIVIDUALS WHO ARE MEMBERS IN GOOD STANDING AT VARIOUS LOCAL LODGES AFFILIATED WITH THE INTERNATIONAL THE GENERAL MEMBERSHIP LECTS DELEGATES TO ATTEND THE INTERNATIONAL CONVENTION WHICH PERIODICALLY IS CONVENED AS REQUIRED BY THE INTERNATIONAL'S GOVERNING DOCUMENTS								

Return Explanation
Reference

LINE 7A

FORM 990,	THE INTERNATIONAL EXECUTIVE COMMITTEE IS ELECTED EVERY 5 YEARS AT THE CONVENTION BY DELEGATES
PART VI,	WHO ARE ELECTED BY THE GENERAL MEMBERSHIP
SECTION A,	

Explanation Return Reference

FORM 990. CERTAIN EXECUTIVE COMMITTEE DECISIONS ARE SUBJECT TO APPROVAL BY THE FLECTED DELEGATES AT THE CONVENTION WHICH IS CONVENED EVERY FIVE YEARS PART VI.

990 Schedule O, Supplemental Information

LINE 7B

SECTION A.

Return Explanation
Reference

FORM 990,	THE INTERNATIONAL SECRETARY TREASURER PROVIDES THE FORM 990 TO THE INTERNATIONAL EXECUTIVE
PART VI,	COUNCIL FOR THEIR CAREFUL REVIEW AND APPROVAL ONCE APPROVED, THE FORM IS SIGNED AND SUBM
SECTION B,	ITTED
LINE 11B	

Return Explanation
Reference

FORM 990, ANNUALLY ALL OFFICERS AND EMPLOYEES OF THE INTERNATIONAL ARE REQUIRED TO DISCLOSE ALL REAL AND APPARENT CONFLICTS OF INTEREST THAT THEY DISCOVER OR WHICH HAVE BEEN BROUGHT TO THEIR SECTION B, ATTENTION IN CONNECTION WITH THE INTERNATIONAL BROTHERHOOD'S ACTIVITIES

Return Explanation

FORM 990, PART VI, SECTION B, LINE 15

I THE SALARY OF THE INTERNATIONAL PRESIDENT IS DETERMINED AND VOTED UPON BY DELEGATES FROM E ACH LOCAL LODGE AT THE INTERNATIONAL CONVENTION HELD EVERY FIVE YEARS. THE SALARIES OF THE INTERNATIONAL SECRETARY TREASURER AND INTERNATIONAL VICE PRESIDENTS ARE A PERCENTAGE OF THE INTERNATIONAL PRESIDENT'S ANNUAL SALARY, THESE PERCENTAGES ARE SET FORTH IN THE INTERN ATIONAL'S CONSTITUTION WHICH HAS ALSO BEEN FORMALLY APPROVED BY THE DELEGATES AT THE CONVENTION

Return Explanation
Reference

LINE 19

FORM 990, THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST AND FINANCIAL STATEMENTS ARE AVAILABLE UPON PART VI, REQUEST AT THE OFFICE OF THE INTERNATIONAL BROTHERHOOD SECTION C,

Return Explanation
Reference

LINE 9

FORM 990, PART XI.

Return Explanation

COLUMN B

FORM 990, THE PRIMARY ACTIVITY OF THE INT'L BROTHERHOOD OF BOILERMAKERS CAMPAIGN ASSISTANCE FUND IS SCHEDULE TO PROVIDE FINANCIAL ASSISTANCE TO FEDERAL CANDIDATES FOR POLITICAL OFFICE R, PART II,

Return Explanation
Reference

FORM 990, THE PRIMARY ACTIVITY OF THE INT'L BROTHERHOOD OF BOILERMAKERS LEGISLATIVE EDUCATION FUND I
SCHEDULE S TO EDUCATE MEMBERS ON CURRENT LEGISLATIVE TOPICS AND PROVIDE ASSISTANCE TO STATE AND LOC
R, PART II,
COLUMN B

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R** 

(Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization **Related Organizations and Unrelated Partnerships** 

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

DLN: 93493133025899 OMB No 1545-0047

Open to Public Inspection

**Employer identification number** 

INTERNATIONAL BROTHERHOOD OF BOILERMAKERS IRON SHIP BUILDERS						' '	meacion number			
	o if the organization answ	orod 1	'Voc" on Form	000 Part	IV line 3	48-6031851				
Part I Identification of Disregarded Entities Complet		erea	(c)					,		
(a)  Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity				( <b>d)</b> Income	(e) End-of-year assets	(f) Direct controlling entity			
(1) BOILERMAKERS INTERNATIONAL CAJUN REALTY CORPORATION 753 STATE AVENUE SUITE 565 KANSAS CITY, KS 66101 43-1806811	TO HOLD TITLE OF PRO IN LOUISIANA	TO HOLD TITLE OF PROPERTY IN LOUISIANA				73,713	N/A			-
(2) INTERNATIONAL BROTHERHOOD BUILDING CORPORATION 753 STATE AVENUE SUITE 565 KANSAS CITY, KS 66101 48-6031851	TO HOLD TITLE OF PRO IN CANADA	PERTY	KS			539,798	N/A			
(3) INTERNATIONAL REAL ESTATE HOLDING COMPANY LLC 753 STATE AVENUE SUITE 565 KANSAS CITY, KS 66101	TO HOLD TITLE OF INVESTMENTS AND CO INCOME FROM THOSE INVESTMENTS	LLECT	KS			4,492,578	N/A			
										_
										-
Part II Identification of Related Tax-Exempt Organiza related tax-exempt organizations during the tax year	ar.	anızat				·		ne or mo		
(a) Name, address, and EIN of related organization	(b) Primary activity		(c) al domicile (state foreign country)	(d) Exempt Cod		(e) Public charity status (if section 501(c)(3))	(f) Direct contro entity		(g Section (13) cor enti	512(l ntrolle ity?
(1)INT'L BROTHERHOOD OF BOILERMAKERS CAMPAIGN ASSISTANCE FUND 753 STATE AVENUE	SEE SCHEDULE O		KS	527		N/A	N/A		Yes	No No
KANSAS CITY, KS 66101 73-1642980							N/A			
(2)INT'L BROTHERHOOD OF BOILERMAKERS LEGISLATIVE EDUCATION FUND 753 STATE AVENUE	SEE SCHEDULE O		KS	527		N/A	N/A			No
KANSAS CITY, KS 66101 73-1642974							1,7,7			
(3)INT'L BROTHERHOOD OF BOILERMAKERS ARCHIVES 753 STATE AVENUE	TO DEVELOP A CENTRALIZED, DOCUMENTED AND		KS	501(C)(3)		PUBLICLY SUPPORTED	N/A			No
KANSAS CITY, KS 66101 48-1140537	PUBLICLY AVAILABLE HISTORY OF IBB						.,,			
(4)INT'L BROTHERHOOD OF BOILERMAKERS OFFICERS AND EMP PENSION 753 STATE AVENUE	TO PROVIDE RETIREMENT BENEFITS FOR ELIGIBLE PARTICIPANTS		KS	401(A)		N/A	N/A			No
KANSAS CITY, KS 66101 48-6031851	FAMICIFANTS						IV/A			
										_
									-	
For Panerwork Peduction Act Notice, see the Instructions for For	rm 000		Cat No. 5013	EV.			Schodulo D /	Form 00	חכ נחו	117

Part III Identification of Related Orgone or more related organization				te if the	e orga	anızatıon	ansv	wered "Ye	s" on Forn	n 990,	Part I	V, line 3	4 be	cause	ıt had	
(a)  Name, address, and EIN of related organization			(c) Legal domicile (state or foreign country)	<b>(d</b> Dire contro enti	ct Iling	(e) Predominant income(related, unrelated, excluded from tax under sections 512-		, total income		(h) Disproprtionate allocations?				/-UBI General in box managir of partner le K-1		(k) entage nership
						514)				Yes	No			Yes N	0	
Part IV Identification of Related Org.	anizations Taxable as a C	orporation	or Trus	st Com	plete	ıf the org	ganız	ation ans	wered "Yes	s" on F	orm 9	 90, Part	IV,	line 34		
because it had one or more rela  (a)  Name, address, and EIN of related organization	ted organizations treated as  (b)  Primary activity	l do (state	(c) _egal omicile or foreign		Direct	e tax yea (d) controlling entity	Type (C cor	(e) of entity p, S corp, trust)	(f) Share of tota income		(g) e of end- year assets		(h) ercen owner	tage	Section (13) co en	( <b>i)</b> n 512(b) ontrolled tity?
(1)BANK OF LABOR	BANKING		untry) KS		N/A		С					54	<b>1</b> 810	%	Yes	No No
756 MINNESOTA AVENUE KANSAS CITY, KS 66101 48-1081524																
												Schedul	0 D 4	Form	100) 3	017

(d)

Method of determining amount involved

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Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Pa	art IV, line 34, 35b, or 36.									
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			Yes	No						
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?										
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity		1a		No						
<b>b</b> Gift, grant, or capital contribution to related organization(s)		1b	Yes							
c Gift, grant, or capital contribution from related organization(s)		1c		No						
<b>d</b> Loans or loan guarantees to or for related organization(s)		1d	Yes							
e Loans or loan guarantees by related organization(s)		1e		No						
f Dividends from related organization(s)		1f		No						
g Sale of assets to related organization(s)		<b>1</b> g		No						
<b>h</b> Purchase of assets from related organization(s)		1h		No						
i Exchange of assets with related organization(s)		1i		No						
j Lease of facilities, equipment, or other assets to related organization(s)		1j	Yes							
k Lease of facilities, equipment, or other assets from related organization(s)		1k		No						
l Performance of services or membership or fundraising solicitations for related organization(s)		11		No						
m Performance of services or membership or fundraising solicitations by related organization(s)		1m	1	No						
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		1n	Yes							
		10	Voc	+						

i Exchange of assets with related organization(s)	<b>1</b> i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	Yes	
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)	1k		No
Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	10	Yes	
n. Reimbursement haid to related organization(s) for expenses	1n	Yes	

1q Yes **q** Reimbursement paid by related organization(s) for expenses . . . 1r Yes 1s No 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(b)

Transaction type (a-s)

(c)

Amount involved

(a)

Name of related organization

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

- See management of garileactors see and accords regarding exclusion																		
<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?						(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(i) Ode V-UBI Odent in box 20 Schedule K-1 Orm 1065)  (j) General or managing partner?		(k) Percentage ownership	
			514)	Yes	No			Yes	No		Yes	No						
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Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017