

Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2017

Department of the Treasury
Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public

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

Open to Public Inspection

A For the 2017 calendar year, or tax year beginning OCT 1, 2017 and ending SEP 30, 2018

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization UAW CHRYSLER SKILL DEVELOPMENT & TRAINING PROGRAM Doing business as UAW CHRYSLER NATIONAL TRAINING CENTER Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2500 E. NINE MILE ROAD City or town, state or province, country, and ZIP or foreign postal code WARREN, MI 48091		D Employer identification number 38-2691478
	F Name and address of principal officer GLENN SHAGENA & CINDY ESTRADA SAME AS C ABOVE SEE SCHEDULE O		E Telephone number (586) 427-4001
	I Tax-exempt status <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c)(5) (insert no) 4947(a)(1) of 527		G Gross receipts \$ 27,402,289.
	J Website: UAW-CHRYSLER.COM		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation 1986 M State of legal domicile MI

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities SEE SCHEDULE O.			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	3	8
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	7
	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	52
	6	Total number of volunteers (estimate if necessary)	6	0
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1b)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	0.	232,999.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 5)	28,346,949.	22,037,378.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	1,627,883.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	167,940.	1,110,899.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	28,514,889.	25,009,159.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	140,750.	61,250.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	3,636,809.	3,367,214.
	b	Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	24,394,878.	19,059,031.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	28,172,437.	22,487,495.
Net Assets or Fund Balances	19	Revenue less expenses Subtract line 18 from line 12	342,452.	2,521,664.
	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	28,711,508.	31,256,135.
	22	Net assets or fund balances Subtract line 21 from line 20	8,438,330.	8,461,414.
			20,273,178.	22,794,721.

Part II 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.

Signature of officer: Michael Novak Date: 9/29/19
 Here: MICHAEL NOVAK, ASSISTANT TREASURER
 Type or print name and title

Paid: Print/Type preparer's name SAMANTHA BOKORI Preparer's signature: Samantha Bokori Date: 07/26/19 Check if self-employed PTIN: P01057347
 Preparer: Firm's name DELOITTE TAX LLP Firm's EIN: 86-1065772
 Use Only: Firm's address 111 MONUMENT CIRCLE, STE. 4200 INDIANAPOLIS, IN 46204-5108 Phone no. (317) 464-8600

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

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Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission
SEE SCHEDULE O.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)
SEE SCHEDULE O.

4b (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)
SEE SCHEDULE O.

4c (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)
SEE SCHEDULE O.

4d Other program services (Describe in Schedule O)
(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		X
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	N/A	
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? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part XI</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>	N/A	
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	N/A	
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	N/A	
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. 37	<input type="checkbox"/>	<input type="checkbox"/>
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. 0	<input type="checkbox"/>	<input type="checkbox"/>
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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. 52	<input type="checkbox"/>	<input type="checkbox"/>
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	<input type="checkbox"/>	<input type="checkbox"/>
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)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4b	If "Yes," enter the name of the foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	<input type="checkbox"/>	<input type="checkbox"/>
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<input type="checkbox"/>	<input type="checkbox"/>
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<input type="checkbox"/>	<input type="checkbox"/>
7	Organizations that may receive deductible contributions under section 170(c). N/A	<input type="checkbox"/>	<input type="checkbox"/>
7a	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?	<input type="checkbox"/>	<input type="checkbox"/>
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<input type="checkbox"/>	<input type="checkbox"/>
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<input type="checkbox"/>	<input type="checkbox"/>
7d	If "Yes," indicate the number of Forms 8282 filed during the year	<input type="checkbox"/>	<input type="checkbox"/>
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/>	<input type="checkbox"/>
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<input type="checkbox"/>	<input type="checkbox"/>
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<input type="checkbox"/>	<input type="checkbox"/>
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<input type="checkbox"/>	<input type="checkbox"/>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? N/A	<input type="checkbox"/>	<input type="checkbox"/>
9	Sponsoring organizations maintaining donor advised funds.	<input type="checkbox"/>	<input type="checkbox"/>
9a	Did the sponsoring organization make any taxable distributions under section 4966? N/A	<input type="checkbox"/>	<input type="checkbox"/>
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	<input type="checkbox"/>	<input type="checkbox"/>
10	Section 501(c)(7) organizations. Enter N/A	<input type="checkbox"/>	<input type="checkbox"/>
10a	Initiation fees and capital contributions included on Part VIII, line 12	<input type="checkbox"/>	<input type="checkbox"/>
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<input type="checkbox"/>	<input type="checkbox"/>
11	Section 501(c)(12) organizations. Enter N/A	<input type="checkbox"/>	<input type="checkbox"/>
11a	Gross income from members or shareholders	<input type="checkbox"/>	<input type="checkbox"/>
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	<input type="checkbox"/>	<input type="checkbox"/>
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? N/A	<input type="checkbox"/>	<input type="checkbox"/>
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<input type="checkbox"/>	<input type="checkbox"/>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<input type="checkbox"/>	<input type="checkbox"/>
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	<input type="checkbox"/>	<input type="checkbox"/>
13b	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	<input type="checkbox"/>	<input type="checkbox"/>
13c	Enter the amount of reserves on hand	<input type="checkbox"/>	<input type="checkbox"/>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	<input type="checkbox"/>	<input type="checkbox"/>

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. 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.		
1b	Enter the number of voting members included in line 1a, above, who are independent.		
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?		X
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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?		X
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.	X	

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. SEE SCHEDULE O		X
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
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?		
15a	The organization's CEO, Executive Director, or top management official		X
15b	Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		X
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?		X
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed: NONE
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 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: ACCOUNTING DEPARTMENT - (586) 427-4001
2500 E. NINE MILE ROAD, WARREN, MI 48091

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
BRIAN HARLOW BOARD MEMBER	0.00	X					0.	0.	0.	
CARLO MATERAZZO BOARD MEMBER	0.00	X					0.	0.	0.	
CATHERINE STOXY TREASURER (BEG 08/2018)	40.00	X		X			120,818.	0.	0.	
CYNTHIA ESTRADA CO-PRESIDENT (BEG 06/2018)	0.00	X		X			0.	0.	0.	
GLENN SHAGENA CO-PRESIDENT	0.00	X		X			0.	0.	0.	
JEFFREY SHROCK BOARD MEMBER (BEG 06/2018)	0.00	X					0.	0.	0.	
MICHAEL NOVAK ASSISTANT TREASURER	0.00	X		X			0.	0.	0.	
MICHAEL STONE BOARD MEMBER (THRU 06/2018)	0.00	X					0.	0.	0.	
MIGUEL FOSTER TREASURER (THRU 03/2018)	40.00	X		X			131,011.	0.	0.	
NORWOOD JEWELL CO-PRESIDENT (THRU 12/2017)	0.00	X		X			0.	0.	0.	
SHANE DAWES BOARD MEMBER (THRU 06/2018)	40.00	X					125,049.	0.	0.	
SHAWN FAIN TREASURER (03/2018-08/2018)	40.00	X		X			125,049.	0.	0.	
TERRENCE DITTES CO-PRESIDENT (01/2018-06/2018)	0.00	X		X			0.	0.	0.	
WILLIAM KING BOARD MEMBER (BEG 06/2018)	0.00	X					0.	0.	0.	
LAMAR HARRIS SECRETARY (THRU 10/2017)	40.00			X			107,130.	0.	0.	
THOMAS ROLANDS SECRETARY (BEG 11/2017)	40.00			X			23,340.	0.	0.	
SEE SCHEDULE O FOR THOSE INDIVIDUALS LISTED AS 0.00 IN COLUMN (B)										

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	232,999.				
	g Non-cash contributions included in lines 1a-1f		232,999.				
	h Total. Add lines 1a-1f		232,999.				
Program Service Revenue	2 a FCA UAW CONTRACT	Business Code 611430	22,037,378.	22,037,378.			
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		22,037,378.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		8,294.			8,294.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	102,332.				
		(ii) Personal					
		b Less rental expenses					
		c Rental income or (loss)	102,332.				
	d Net rental income or (loss)		102,332.	102,332.			
	7 a Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other	4,012,719.				
		b Less cost or other basis and sales expenses		2,393,130.			
		c Gain or (loss)		1,619,589.			
	d Net gain or (loss)		1,619,589.	1,619,589.			
	8 a (Gross income from fundraising events (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							
9 a Gross income from gaming activities. See Part IV, line 19	a						
b Less direct expenses	b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a						
b Less cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
11 a INS. CLAIM PROCEEDS		900099	1,005,000.	1,005,000.			
b MISCELLANEOUS REVENUE		900099	3,445.	3,445.			
c COORDINATED TRAVEL SERVICES K-1*		900099	122.	122.			
d All other revenue							
e Total. Add lines 11a-11d			1,008,567.				
12 Total revenue. See instructions.			25,009,159.	24,767,866.	0.	8,294.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22	61,250.			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,074,978.			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	174,586.			
9 Other employee benefits	936,513.			
10 Payroll taxes	181,137.			
11 Fees for services (non-employees)				
a Management				
b Legal	1,112,566.			
c Accounting	84,659.			
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O)	9,825,582.			
12 Advertising and promotion	30,280.			
13 Office expenses	373,297.			
14 Information technology	18,638.			
15 Royalties				
16 Occupancy	1,237,901.			
17 Travel	765,652.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	19,902.			
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,113,253.			
23 Insurance	157,376.			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a TRAINING EXPENSE	2,238,774.			
b TUITION ASSIST. PROGRAM	2,023,402.			
c 990 LATE FILING PENALTY	50,000.			
d UBIT	7,749.			
e All other expenses				
25 Total functional expenses Add lines 1 through 24e	22,487,495.			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing	1,795,326.	1	622,970.	
	2 Savings and temporary cash investments		2	4,851,490.	
	3 Pledges and grants receivable, net		3		
	4 Accounts receivable, net	7,796,060.	4	9,063,022.	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges		9		
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 23,390,018.			
	b Less accumulated depreciation	10b 6,671,365.	19,120,122.	10c 16,718,653.	
	11 Investments - publicly traded securities		11		
	12 Investments - other securities See Part IV, line 11		12		
	13 Investments - program-related See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets See Part IV, line 11		15		
16 Total assets. Add lines 1 through 15 (must equal line 34)		28,711,508.	16	31,256,135.	
Liabilities	17 Accounts payable and accrued expenses	8,421,698.	17	8,461,414.	
	18 Grants payable		18		
	19 Deferred revenue		19		
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21		
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		16,632.	25	
	26 Total liabilities. Add lines 17 through 25		8,438,330.	26	8,461,414.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets		27		
	28 Temporarily restricted net assets		28		
	29 Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds	0.	30	0.	
	31 Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.	
	32 Retained earnings, endowment, accumulated income, or other funds	20,273,178.	32	22,794,721.	
33 Total net assets or fund balances	20,273,178.	33	22,794,721.		
34 Total liabilities and net assets/fund balances		28,711,508.	34	31,256,135.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	25,009,159.
2	Total expenses (must equal Part IX, column (A), line 25)	2	22,487,495.
3	Revenue less expenses Subtract line 2 from line 1	3	2,521,664.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	20,273,178.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-121.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	22,794,721.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ 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? 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 8, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.**

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

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization UAW CHRYSLER SKILL DEVELOPMENT & TRAINING PROGRAM **Employer identification number** 38-2691478

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
1c	
1d	
1e	
1f	

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment %
- b Permanent endowment %
- c Temporarily restricted endowment %

The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,460,000.		1,460,000.
b Buildings		5,090,000.	2,462,848.	2,627,152.
c Leasehold improvements		14,428,571.	3,847,210.	10,581,361.
d Equipment		1,558,592.	263,989.	1,294,603.
e Other		852,855.	97,318.	755,537.
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)				16,718,653.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total (Col (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c See Form 990, Part X, line 13

(a) Description of investment	(b) Book value	(c) Method of valuation. Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total (Col (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

1	Total revenue, gains, and other support per audited financial statements		1	25,459,221.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments			
b	Donated services and use of facilities	2b	168,750.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	168,750.
3	Subtract line 2e from line 1		3	25,290,471.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b	-281,312.	
c	Add lines 4a and 4b		4c	-281,312.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	25,009,159.

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

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

1	Total expenses and losses per audited financial statements		1	22,937,678.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a	168,750.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d	281,433.	
e	Add lines 2a through 2d		2e	450,183.
3	Subtract line 2e from line 1		3	22,487,495.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	22,487,495.

Part XIII Supplemental Information.

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

PART XI, LINE 4B - OTHER ADJUSTMENTS.

COORDINATED TRAVEL SERVICES, LLC K-1 122.

EXPENSES RELATED TO SALE OF ASSETS -281,434.

TOTAL TO SCHEDULE D, PART XI, LINE 4B -281,312.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

EXPENSES RELATED TO SALE OF ASSETS 281,434.

ROUNDING -1.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 281,433.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**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.

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

OMB No 1545-0047

2017

Open to Public
Inspection

Name of the organization **UAW CHRYSLER SKILL DEVELOPMENT &
TRAINING PROGRAM**

Employer identification number
38-2691478

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

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

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 0.

3 Enter total number of other organizations listed in the line 1 table ▶ 0.

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

Schedule I (Form 990) (2017)

Schedule I (Form 990) (2017)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
EDUCATIONAL	26	61,250.	0.		

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

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization

UAW CHRYSLER SKILL DEVELOPMENT &
TRAINING PROGRAM

Employer identification number

38-2691478

Part III Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as, maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III.

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		
5b		
6a		
6b		
7		
8		
9		

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

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note. The sum of columns (B)(i) (ii) 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		(B) Breakdown of W 2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i) (D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
CATHERINE STOXY	(i)	120,818.	0.	0.	0.	0.	120,818.	0.
TREASURER (BEG 08/2018)	(ii)	0.	0.	0.	0.	0.	0.	0.
MIGUEL FOSTER	(i)	131,011.	0.	0.	0.	0.	131,011.	0.
TREASURER (THRU 03/2018)	(ii)	0.	0.	0.	0.	0.	0.	0.
SHANE DAWES	(i)	125,049.	0.	0.	0.	0.	125,049.	0.
BOARD MEMBER (THRU 06/2018)	(ii)	0.	0.	0.	0.	0.	0.	0.
SHAWN FAIN	(i)	125,049.	0.	0.	0.	0.	125,049.	0.
TREASURER (03/2018-08/2018)	(ii)	0.	0.	0.	0.	0.	0.	0.
LAMAR HARRIS	(i)	107,130.	0.	0.	0.	0.	107,130.	0.
SECRETARY (THRU 10/2017)	(ii)	0.	0.	0.	0.	0.	0.	0.
THOMAS ROLANDS	(i)	23,340.	0.	0.	0.	0.	23,340.	0.
SECRETARY (BEG 11/2017)	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

FORM 990, PART VII, SECTION A, LINE 5 AND SCHEDULE J

THE ORGANIZATION REIMBURSED THE UAW AND FCA FOR SALARIES OF CERTAIN

INDIVIDUALS INVOLVED IN ACTIVITIES RELEVANT TO THE ORGANIZATION. THESE

INDIVIDUALS RECEIVED BASE COMPENSATION FROM THE FOLLOWING ENTITIES

UAW - SHANE DAWES - \$125,049

UAW- SHAWN FAIN - \$125,049

UAW - MIGUEL POSTER - \$131,011

UAW - CATHERINE STOEY - \$120,818

FCA - LAMAR HARRIS - \$107,130

FCA - THOMAS ROLANDS - \$23,340

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2017

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization **UAW CHRYSLER SKILL DEVELOPMENT & TRAINING PROGRAM** Employer identification number **38-2691478**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (EQUIPMENT - ROBOTS)	X	2	232,999	OTHER
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II		X
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? b If "Yes," describe in Part II		X
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2017

Open to Public
Inspection

Name of the organization	UAW CHRYSLER SKILL DEVELOPMENT & TRAINING PROGRAM	Employer identification number	38-2691478
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FORM 990, BOX F.

GLENN SHAGENA'S CURRENT TERM AS A CO-PRESIDENT BEGAN IN JUNE 2015 AND

CINDY ESTRADA'S TERM AS A CO-PRESIDENT BEGAN IN JUNE 2018.

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE UAW-CHRYSLER SKILL DEVELOPMENT AND TRAINING PROGRAM IS A JOINT
ACTIVITY OF THE UAW AND FCA ESTABLISHED THROUGH COLLECTIVE BARGAINING
TO PROVIDE EDUCATION, TRAINING, RE-TRAINING AND OTHER PROGRAMS TO
CREATE AND SUSTAIN A WORLD CLASS WORKFORCE THAT CAN EFFECTIVELY COMPETE
WITH GLOBAL MANUFACTURERS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION.

THE UAW-CHRYSLER SKILL DEVELOPMENT AND TRAINING PROGRAM IS A JOINT
ACTIVITY OF THE UAW AND FCA ESTABLISHED THROUGH COLLECTIVE BARGAINING
TO PROVIDE EDUCATION, TRAINING, RE-TRAINING AND OTHER PROGRAMS TO
CREATE AND SUSTAIN A WORLD CLASS WORKFORCE THAT CAN EFFECTIVELY COMPETE
WITH GLOBAL MANUFACTURERS.

FORM 990, PART III, LINES 4A - 4C, PROGRAM SERVICE ACCOMPLISHMENTS.

NEW HIRE ORIENTATION - A TWO-DAY TRAINING PROGRAM DELIVERED BY THE NTC
TO ALL NEWLY-HIRED FCA EMPLOYEES REPRESENTED BY THE UAW IN ALL U.S.
LABOR MARKETS. IN CALENDAR YEAR 2017, NTC SPONSORED TRAINING FOR 5,834
NEW HIRES, REPRESENTING ALL THE NEWLY-HIRED FCA EMPLOYEES REPRESENTED
BY THE UAW DURING THE YEAR. OVER THE PERIOD FROM 2011 THROUGH 2017, THE
NTC TRAINED OVER 30,559 NEW FCA EMPLOYEES REPRESENTED BY UAW HIRED IN

ALL U.S. LABOR MARKETS. THE TRAINING PROGRAM CONSISTS OF INFORMATION

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

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization UAW CHRYSLER SKILL DEVELOPMENT &
TRAINING PROGRAM

Employer identification number
38-2691478

PRESENTED IN ACCORDANCE WITH GUIDELINES ESTABLISHED BY FCA AND THE UAW,
INCLUDING FCA BENEFITS, STANDARDS OF CONDUCT/INTEGRITY CODE AND A
NUMBER OF PROGRAMS LISTED BELOW. APPLICABLE NEW HIRE ORIENTATION
TRAINING RECORDS ARE MAINTAINED AND ENTERED INTO THE FCA LEARNING
CENTER SYSTEM BY THE ORGANIZATION'S STAFF AND FCA PLANT STAFF
SUPPORTING BELVIDERE, KOKOMO AND OUT-OF-STATE MOPAR FACILITIES.
("EMPLOYEE" MEANS A FCA EMPLOYEE REPRESENTED BY UAW.)

SKILLED TRADES PROGRAM - TRAINING PROGRAMS IN TRADES SUCH AS SHEET
METAL, WELDING, ELECTRICAL, ETC., VARY IN LENGTH AND ARE DESIGNED TO
UPGRADE THE CORE SKILLS OF ALL FCA JOURNEY PERSONS REPRESENTED BY UAW
TO INCLUDE NEW PROCESS TRAINING ON STATE-OF-THE-ART TECHNOLOGIES WITH
THE GOAL OF DEVELOPING AND SUSTAINING A WORLD-CLASS TECHNICALLY SKILLED
WORKFORCE. THE NTC PROVIDES FOR CORE SKILLED TRADES AND TECHNICAL
CLASSES FOR FCA MANUFACTURING EMPLOYEES. CONTRACTUAL COMMITMENTS FROM
THE 2009 BANKRUPTCY PROCEEDINGS MANDATED THAT THE SKILLED TRADES
WORKFORCE BE CONSOLIDATED INTO THREE WORK GROUPS - ELECTRICAL,
MECHANICAL, AND TOOL & DIE. CLASSES WERE IDENTIFIED AND DEVELOPED AT
THE NTC TO FACILITATE THIS PROCESS. NTC TRAINED 1,676 PARTICIPANTS
THROUGH THE SKILLED TRADES PROGRAM IN CALENDAR YEAR 2017. 19,006
PARTICIPANTS COMPLETED SKILLED TRADES TRAINING DURING THE PERIOD 2011
THROUGH 2017. THE TRAINING CURRICULA ENABLES FCA TO COMPETE IN THE
GLOBAL AUTOMOTIVE MARKET WHILE HELPING TO SECURE JOBS FOR FCA EMPLOYEES
REPRESENTED BY UAW, MAKING THE SKILLED TRADES PROGRAM AN IMPORTANT
COMPONENT OF FCA/UAW JOINT ACTIVITY. PARTICIPANTS REGISTER FOR CLASSES
THROUGH THE FCA LEARNING CENTER SYSTEM AND THE ORGANIZATION'S STAFF
ENTERS THE COURSE COMPLETION INFORMATION INTO THE FCA LEARNING CENTER
SYSTEM.

Name of the organization UAW CHRYSLER SKILL DEVELOPMENT &
TRAINING PROGRAM

Employer identification number
38-2691478

SKILLED ENHANCEMENT PROGRAM - A SIX-WEEK TRAINING PROGRAM CONSISTING OF

80 HOURS OF HEALTH & SAFETY, 80 HOURS OF TRADE SPECIFIC, 40 HOURS OF

GENERIC CORE SKILLS AND 32 HOURS OF WCM METHODOLOGY TO PROVIDE NEW

APPRENTICES WITH BASIC KNOWLEDGE OF THEIR INDIVIDUAL TRADE, TOOL

RECOGNITION, HEALTH & SAFETY AND WCM FUNDAMENTALS. IN ADDITION,

APPRENTICES MEET WITH REPRESENTATIVES FROM THEIR RESPECTIVE COMMUNITY

COLLEGES TO DISCUSS COURSE REGISTRATION AND CLASS SCHEDULING PRIOR TO

ATTENDING THEIR RELATED TRAINING CLASSES. IN 2017, 51 EMPLOYEES

PARTICIPATED IN THE SKILLED ENHANCEMENT PROGRAM. BETWEEN 2011 AND 2017,

226 EMPLOYEES WERE TRAINED. APPLICABLE TRAINING RECORDS ARE MAINTAINED

BY NTC STAFF.

DIVERSITY - A ONE-HOUR TRAINING PROGRAM PROVIDED THROUGHOUT U.S. PLANTS

& PARTS DISTRIBUTION CENTERS. THE PURPOSE IS TO EDUCATE EMPLOYEES ON

THE IMPORTANCE OF VALUING EMPLOYEE DIFFERENCES AND PROVIDE AN

UNDERSTANDING ON THE BENEFITS OF MUTUAL RESPECT, INCLUDING

COMPREHENSIVE INFORMATION ON A DIVERSE CULTURE. PARTICIPANTS WILL GAIN

INSIGHT ABOUT WORKPLACE INTERACTIONS AND STEPS TO PROMOTE A RESPECTFUL

WORKPLACE. THE TRAINING PROGRAM ALSO EDUCATES EMPLOYEES ON FCA'S POLICY

3-6 (DISCRIMINATION AND HARASSMENT PREVENTION) AND RELATED CONTRACTUAL

PROVISIONS. IN 2017, 8,151 EMPLOYEES PARTICIPATED IN DIVERSITY

TRAINING. DURING THE 2011-2017 TIME PERIOD, 40,452 PARTICIPANTS WERE

TRAINED IN THIS PROGRAM. IT IS THE RESPONSIBILITY OF EACH RESPECTIVE

PLANT LOCATION TO MAINTAIN TRAINING RECORDS AND ENTER COURSE COMPLETION

INTO THE CORPORATE LEARNING CENTER SYSTEM.

SEXUAL HARASSMENT PREVENTION - A ONE-HOUR TRAINING PROGRAM PROVIDED

Name of the organization UAW CHRYSLER SKILL DEVELOPMENT &
TRAINING PROGRAM

Employer identification number
38-2691478

THROUGHOUT U.S. PLANTS & PARTS DISTRIBUTION CENTERS, THE PURPOSE IS TO

EDUCATE EMPLOYEES ON THE IMPORTANCE OF PROMOTING A SAFE WORKING

ENVIRONMENT TO WORK TOWARDS PREVENTING SEXUAL HARASSMENT IN THE

WORKPLACE AND PROVIDES COMPREHENSIVE INFORMATION ON SEXUAL HARASSMENT

PREVENTION. PARTICIPANTS WILL GAIN INSIGHT ABOUT WHAT CONSTITUTES

SEXUAL HARASSMENT AND STEPS TO PROMOTE A WORKPLACE FREE OF SEXUAL

HARASSMENT. THE TRAINING PROGRAM ALSO EDUCATES EMPLOYEES ON FCA'S

POLICY 3-6 (DISCRIMINATION AND HARASSMENT PREVENTION) AND RELATED

CONTRACTUAL PROVISIONS. IN 2017, 5,834 EMPLOYEES PARTICIPATED IN SEXUAL

HARASSMENT PREVENTION TRAINING. DURING THE 2011-2017 TIME PERIOD,

34,841 PARTICIPANTS WERE TRAINED IN THIS PROGRAM. IT IS THE

RESPONSIBILITY OF EACH RESPECTIVE PLANT LOCATION TO MAINTAIN TRAINING

RECORDS AND ENTER COURSE COMPLETION INTO THE CORPORATE LEARNING CENTER

SYSTEM.

SEXUAL HARASSMENT INVESTIGATION - A FOUR-DAY TRAINING PROGRAM PROVIDED

TO INDIVIDUALS WHO ARE RESPONSIBLE FOR CONDUCTING JOINT SEXUAL

HARASSMENT COMPLAINT INVESTIGATIONS INVOLVING U.S. REPRESENTED

EMPLOYEES. IN CONJUNCTION WITH THE CORPORATE EEO COMPLIANCE AND

GOVERNANCE OFFICE THIS TRAINING IS PROVIDED TO ENSURE THE INVESTIGATORS

POSSESS THE KNOWLEDGE AND SKILL TO EFFECTIVELY PERFORM THE

INVESTIGATIONS. 45 EMPLOYEES PARTICIPATED IN SEXUAL HARASSMENT

PREVENTION TRAINING IN 2017. DURING THE 2011-2017 TIME PERIOD, 156

PARTICIPANTS WERE TRAINED IN THIS PROGRAM.

DISCRIMINATION PREVENTION - A ONE-HOUR TRAINING PROGRAM PROVIDED

THROUGH U.S. PLANTS & PARTS DISTRIBUTION CENTERS, THE PURPOSE IS TO

EDUCATE EMPLOYEES ON THE IMPORTANCE OF PROMOTING A SAFE WORKING

Name of the organization UAW CHRYSLER SKILL DEVELOPMENT &
TRAINING PROGRAM

Employer identification number
38-2691478

ENVIRONMENT TO WORK TOWARDS PREVENTING DISCRIMINATION IN THE WORKPLACE

AND PROVIDE COMPREHENSIVE INFORMATION ON DISCRIMINATION PREVENTION.

PARTICIPANTS WILL GAIN INSIGHT ABOUT THE MEET ON COMMON GROUND

PRINCIPLES AND STEPS TO PROMOTE A WORKPLACE FREE OF DISCRIMINATION. THE

TRAINING PROGRAM ALSO EDUCATES EMPLOYEES ON FCA'S POLICY 3-6

(DISCRIMINATION AND HARASSMENT PREVENTION) AND RELATED CONTRACTUAL

PROVISIONS. IN 2017, 8,151 EMPLOYEES PARTICIPATED IN DISCRIMINATION

PREVENTION TRAINING. DURING THE 2011-2017 TIME PERIOD, 37,241

PARTICIPANTS WERE TRAINED IN THIS PROGRAM. IT IS THE RESPONSIBILITY OF

EACH RESPECTIVE PLANT LOCATION TO MAINTAIN TRAINING RECORDS AND ENTER

COURSE COMPLETION INTO THE CORPORATE LEARNING CENTER SYSTEM.

EMPLOYEE ASSISTANCE PROGRAM (EAP) - A SIX-HOUR TRAINING PROGRAM

PROVIDED TO NEWLY APPOINTED EAP REPRESENTATIVES SERVING EMPLOYEES. THE

PURPOSE OF THE TRAINING IS TO INFORM AND EDUCATE NEWLY APPOINTED UAW

EAP REPRESENTATIVES OF THE RESPONSIBILITIES AND DUTIES OF THEIR

POSITION. AS A PART OF THE TRAINING, AN EAP REFERENCE MANUAL IS

PROVIDED. THIS MANUAL CONTAINS PERTINENT POLICIES AND PROCEDURES

RELATED TO THE ORGANIZATION'S EAP PROGRAM, ALONG WITH TRAINING ON THE

OPERATION OF THE EAP DATABASE. IN 2017, 118 EAP REPRESENTATIVES

PARTICIPATED IN EAP SPECIALIST TRAINING. IN ADDITION, 5,834 NEW HIRES

WERE TRAINED ON THE EAP PROGRAM AND APPLICABLE SERVICES AVAILABLE TO

THEM DURING NEW HIRE ORIENTATION SESSIONS. THIS TRAINING IS

APPROXIMATELY 40 MINUTES. DURING THE 2011-2017 TIME PERIOD, 519 EAP

REPRESENTATIVES PARTICIPATED IN SPECIALIST TRAINING. ADDITIONALLY,

30,559 NEW HIRES WERE TRAINED IN EAP PROGRAMS. EAP TRAINING RECORDS ARE

ENTERED INTO THE FCA LEARNING CENTER SYSTEM BY THE ORGANIZATION'S STAFF

AND FCA PLANT STAFF SUPPORTING BELVIDERE, KOKOMO AND OUT-OF-STATE MOPAR

Name of the organization UAW CHRYSLER SKILL DEVELOPMENT &
TRAINING PROGRAM

Employer identification number
38-2691478

FACILITIES. NTC MAINTAINS THE TRAINING RECORDS FOR EAP SPECIALIST

CERTIFICATION TRAINING.

WORKPLACE VIOLENCE PREVENTION (WPVP) - A ONE-HOUR TRAINING PROGRAM

PROVIDED FOR FCA EMPLOYEES REPRESENTED BY UAW IN ALL U.S. LABOR MARKETS

THAT INCLUDES AWARENESS, METHODS AND TECHNIQUES TO PREVENT WORKPLACE

VIOLENCE. THE PURPOSE OF THIS TRAINING IS TO EDUCATE EMPLOYEES ON THE

IMPORTANCE OF RESPECT, RESPECTING OTHERS, VALUING EMPLOYEE DIFFERENCES,

AND TO PROMOTE A SAFE WORKING ENVIRONMENT. THE TRAINING PROGRAM ALSO

EDUCATES EMPLOYEES ON FCA'S POLICY 3-7 (WORKPLACE VIOLENCE PREVENTION).

A TOTAL OF 35,372 EMPLOYEES WERE TRAINED DURING THE 2011-2017 TIME

PERIOD. THE ORGANIZATION'S STAFF AND FCA PLANT STAFF SUPPORTING

BELVIDERE, KOKOMO AND OUT-OF-STATE MOPAR FACILITIES MAINTAINS TRAINING

RECORDS AND ENTERS COURSE COMPLETION INTO THE FCA LEARNING CENTER

SYSTEM.

WPVP LOCAL RESPONSE TEAM (LRT) - A 2.5 DAY TRAINING PROGRAM PROVIDED TO

ALL LRT MEMBERS FROM ALL FCA U.S. LOCATIONS. IT PROVIDES AN OVERVIEW OF

THE WORKPLACE VIOLENCE PREVENTION PROGRAM STRUCTURE AND PROCESS THAT

ENABLES MEMBERS TO CONDUCT ASSESSMENT AND INTERVENTION STRATEGIES

NECESSARY TO PREVENT AN ACT OR ESCALATION OF VIOLENCE IN THE WORKPLACE.

IN 2017, 30 LRT MEMBERS WERE TRAINED. DURING THE TIME PERIOD 2011-2017,

691 EMPLOYEES WERE TRAINED AS LRT MEMBERS. NTC MAINTAINS THE TRAINING

RECORDS AND COURSE COMPLETION IS ENTERED INTO THE CORPORATE LEARNING

CENTER SYSTEM.

HEALTH, SAFETY AND ERGONOMICS TRAINING - TRAINING INCLUDES AN OVERVIEW AND

UPDATES TO OSHA HEALTH AND SAFETY ('H&S') REQUIREMENTS, NEW OR PROPOSED

Name of the organization UAW CHRYSLER SKILL DEVELOPMENT &
TRAINING PROGRAM

Employer identification number
38-2691478

CHANGES TO FCA H&S POLICIES/PROCEDURES, WORLD CLASS MANUFACTURING

SAFETY PILLAR TOPICS, BEST PRACTICE SHARING, ERGONOMICS, INJURY

REDUCTION, UAW-CHRYSLER FERRIS STATE UNIVERSITY H&S CERTIFICATION, AS

WELL AS TRENDS IN H&S. THE TRAINING IS PROVIDED TO ALL PLANT UAW H&S

REPRESENTATIVES, UAW SKILLED TRADES TRAINERS, UAW ERGONOMIC ANALYSTS,

FCA H&S MANAGEMENT PROFESSIONALS, MEDICAL STAFF AND SELECT ENGINEERING

STAFF. H&S IS A CENTRAL COMPONENT OF THE ORGANIZATION'S COMMITMENT TO

PROVIDE A SAFE WORK ENVIRONMENT. THE ORGANIZATION TRAINED 3,355

EMPLOYEES IN CALENDAR YEAR 2017. CUMULATIVE TRAINING FOR HEALTH &

SAFETY PROFESSIONALS DURING THE 2011 THROUGH 2017 TIME PERIOD TOTALED

5,652. ALL TRAINING RECORDS ARE MAINTAINED THROUGH THE FCA CORPORATE

LEARNING CENTER SYSTEM.

PAID EDUCATION LEAVE (PEL) - DEVELOPED IN 2015, THIS FOUR-DAY TRAINING

PROGRAM IS OFFERED THROUGHOUT FCA U.S. LOCATIONS. THE PEL TRAINING

PROGRAM UTILIZES INDUSTRY EXPERTS AND UNIVERSITY ANALYSTS TO EXAMINE

AND DISCUSS THE ECONOMIC, TECHNOLOGICAL AND POLITICAL FORCES

INFLUENCING THE FUTURE OF THE WORLDWIDE AUTOMOBILE INDUSTRY, ALONG WITH

A REVIEW OF FCA'S CURRENT BUSINESS. IN CALENDAR YEAR 2017, 118

EMPLOYEES PARTICIPATED IN THIS PROGRAM. A TOTAL OF 469 EMPLOYEES WERE

TRAINED DURING THE 2015-2017 TIME PERIOD. NTC MAINTAINS THE TRAINING

RECORDS, AND COURSE COMPLETION IS ENTERED INTO THE CORPORATE LEARNING

CENTER SYSTEM.

WORLD CLASS MANUFACTURING (WCM) LAB - THE WCM CENTRAL TEAM IS

RESPONSIBLE FOR THE DEVELOPMENT OF KNOW-HOW TO RUN THE BUSINESS USING

THE 10 TECHNICAL PILLARS AND 10 MANAGERIAL PILLARS OF THE WORLD CLASS

MANUFACTURING SYSTEM. THE WCMA OFFERS OVER 70 DIFFERENT COURSES, LAB

Name of the organization UAW CHRYSLER SKILL DEVELOPMENT & TRAINING PROGRAM	Employer identification number 38-2691478
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SIMULATIONS AND IN-PLANT WORKSHOPS THAT ARE STRUCTURED TO PROVIDE PARTICIPANTS WITH A HANDS-ON APPROACH TO LEARNING, USING PIONEERING MANUFACTURING PROCESSES AND EDUCATION. THE WCM TEAM TRAINED 6,101 FCA EMPLOYEES IN WORLD CLASS MANUFACTURING METHODS IN CALENDAR YEAR 2017. THE WCM TEAM TRAINED 27,665 EMPLOYEES DURING THE 2011-2017 TIME PERIOD. PRIOR TO ATTENDING TRAINING THE PARTICIPANTS ARE ASKED TO UTILIZE THE ONLINE WCMA OFFERINGS IN ORDER TO PROVIDE PARTICIPANTS WITH AN OVERVIEW AND TO BECOME FAMILIAR WITH WORLD CLASS MANUFACTURING TERMINOLOGY. AFTER THE TRAINING, THE PARTICIPANTS COMPLETE PROJECTS TO ATTACK WASTE AND LOSS IN THEIR PLANT, USING THE WORLD CLASS MANUFACTURING METHODS, TOOLS AND APPLICATIONS. ALL TRAINING RECORDS ARE MAINTAINED THROUGH THE FCA CORPORATE LEARNING CENTER SYSTEM.

WCM MOBILE UNIT - THE WCM MOBILE UNIT WAS DEVELOPED IN 2013 THROUGH THE NECESSITY OF QUICKLY SPREADING THE BASIC KNOWLEDGE OF WCMA MANUFACTURING SYSTEMS TO OPERATORS AND MAINTENANCE PERSONNEL IN THE PLANTS. DURING THE 2013 THROUGH 2017 TIME PERIOD 11,434 EMPLOYEES PARTICIPATED IN TRAINING. TRAINING WAS PROVIDED IN CALENDAR YEAR 2017 FOR A TOTAL OF 1,643 EMPLOYEES. THE MOBILE UNIT TRAVELS FROM THE NTC/WCMA TO EACH PLANT, OFFERING AN OPPORTUNITY FOR TEAM MEMBERS TO LEAVE THE SHOP FLOOR AND ENTER A WORLD OF LEARNING WITHIN A STATE-OF-THE-ART CLASSROOM TRAILER. ALL TRAINING RECORDS ARE MAINTAINED THROUGH THE FCA CORPORATE LEARNING CENTER SYSTEM.

WCM TECHNICAL MOBILE UNIT - IN 2015, THE TECHNICAL MOBILE UNIT WAS ADDED TO FOCUS ON IMPROVING OUR MANUFACTURING FACILITIES MAINTENANCE KNOWLEDGE BY APPLYING WCM METHODS ALONGSIDE OF FLOOR TECHNOLOGIES. TRAINING WAS PROVIDED IN CALENDAR YEAR 2017 FOR A TOTAL OF 258

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EMPLOYEES. DURING THE 2015 THROUGH 2017 TIME PERIOD, 545 EMPLOYEES

PARTICIPATED IN TRAINING. THIS MOBILE UNIT ALSO TRAVELS FROM THE

NTC/WJMA TO EACH PLANT, OFFERING AN OPPORTUNITY FOR TEAM MEMBERS TO

LEAVE THE SHOP FLOOR AND ENTER A WORLD OF LEARNING WITHIN A

STATE-OF-THE-ART CLASSROOM TRAILER. ALL TRAINING RECORDS ARE MAINTAINED

THROUGH THE FCA CORPORATE LEARNING CENTER SYSTEM.

WCM PLANT ACADEMY - IN 2016 A NEW APPROACH TO TRAINING IN THE PLANTS

WAS DEVELOPED AND SUPPORTED BY THE WCMA WITH STANDARD WCM MODULES, A

TRAIN-THE-TRAINER WORKSHOP AND ON-GOING COACHING TO SPREAD BASIC WCM

CONCEPTS. EACH PLANT CASCADES KNOWLEDGE FROM THEIR SPECIALISTS TO THE

SHOP FLOOR. TRAINING INVOLVES SHORT MODULES FOLLOWED BY APPLICATION OF

THE BASIC TOOLS DIRECTLY TO THEIR WORK AREA. IN 2017, 8,477 EMPLOYEES

WERE TRAINED THROUGH THE WCMA PLANT ACADEMY. DURING THE 2016 THROUGH

2017 TIME PERIOD, 8,742 EMPLOYEES PARTICIPATED. ALL TRAINING RECORDS

ARE MAINTAINED THROUGH THE FCA CORPORATE LEARNING CENTER SYSTEM.

WCM ACADEMY - KOKOMO CENTER - WITH A SIMILAR APPROACH TO THE WCMA IN

WARREN, THE KOKOMO CENTER WAS CREATED IN 2016 AND IS RESPONSIBLE FOR

THE DELIVERY OF KNOW-HOW OF THE WCM METHODOLOGY AND CHANGE MANAGEMENT

SYSTEM, OFFERING COURSES WITH A FOCUS ON POWERTRAIN SPECIFIC CONCEPTS

AND EXAMPLES. WORKSHOPS, WCM COURSES AND TECHNICAL TRAINING ARE

CONDUCTED FROM TWO LOCATIONS IN INDIANA. IN 2017, 644 EMPLOYEES

PARTICIPATED IN THESE SESSIONS. DURING THE 2016 THROUGH 2017 TIME

PERIOD, 834 EMPLOYEES PARTICIPATED. ALL TRAINING RECORDS ARE

MAINTAINED THROUGH THE FCA CORPORATE LEARNING CENTER SYSTEM.

WCMA INNOVATION WORKSHOP & EVENTS - THE WCMA OFFERS WORKSHOPS AND

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EVENTS TO INTERNAL GROUPS AS WELL AS SELECT EXTERNAL ORGANIZATIONS

(INCLUDING OTHER OEM'S FROM ALL OVER THE WORLD) TO GIVE THEM AN

UNDERSTANDING OF HOW THE WCMA APPROACHES TRAINING IN A FUN AND HANDS-ON

WAY. INNOVATION EVENTS AND WORKSHOPS ARE A WAY FOR ANY TEAM TO COME IN

WITH A COMMON PROBLEM AND OPEN THEIR MINDS TO NEW IDEAS, USING IDEATION

TOOLS THAT ENABLE PARTICIPANTS TO DEVELOP IMPROVEMENT PLANS. IN 2017,

945 PARTICIPANTS ATTENDED THESE WORKSHOPS & EVENTS AND A TOTAL OF

15,358 PARTICIPATING DURING THE 2011-2017 TIMEFRAME. ALL TRAINING

RECORDS ARE MAINTAINED THROUGH THE FCA CORPORATE LEARNING CENTER SYSTEM

FOR INTERNAL ORGANIZATIONS.

NTC H&S WEB-BASED AND HANDS ON INSTRUCTOR LED TRAINING - A LARGE

PORTION OF HEALTH, SAFETY AND ERGONOMICS TRAINING IS OFFERED BY THE

ORGANIZATION THROUGH A WEB-BASED MODULAR PLATFORM. THE H&S TRAINING

MODULES COVER A WIDE RANGE OF TOPICS SPECIFIC TO THE AUTO INDUSTRY AND

PLANT OPERATIONS. EACH TRAINING MODULE IS DELIVERED WITH THE INTENT TO

PROVIDE THE EMPLOYEE WITH THE KNOWLEDGE, SKILLSET AND TOOLS NEEDED TO

WORK SAFELY, WHILE CONFORMING WITH FCA POLICY AND REGULATORY

REQUIREMENTS. A PLANT SPECIFIC SAFETY TRAINING NEEDS ASSESSMENT AND

TRAINING MATRIX IS USED TO DETERMINE WHAT H&S TRAINING MODULES ARE

PROVIDED TO EACH EMPLOYEE BASED ON HIS/HER SPECIFIC JOB ASSIGNMENT. THE

TRAINING, WHILE WEB-BASED, IS INSTRUCTOR LED. THE MODULAR TRAINING

OFTEN REQUIRES HANDS ON INSTRUCTION. THE MORE CRITICAL TRAINING

PROGRAMS ALSO REQUIRE IN-PLANT GUIDANCE TO ENSURE EMPLOYEE PROFICIENCY,

SUCH AS POWERED INDUSTRIAL VEHICLE TRAINING, LOCKOUT ENERGY CONTROL AND

CONFINED SPACE TRAINING. (THERE ARE OVER 85 TOPICS OFFERED. THE SAFETY

TRAINING MODULES ARE BASED ON PLANT LOCATION AND SPECIFIC WORK

ASSIGNMENT.) IN CALENDAR YEAR 2017, EMPLOYEES COMPLETED 75,901

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DIFFERENT MODULES CONTAINED IN THE ONLINE HEALTH & SAFETY KIOSK SAFETY MODULES. DIFFERENT SUBJECTS CONTAINED IN THE VARIOUS HEALTH & SAFETY MODULES MUST BE COMPLETED IN ORDER TO COMPLETE AND PASS ONE MODULE. DURING THE TIME PERIOD 2011 THROUGH 2017, 387,797 MODULES WERE COMPLETED BY EMPLOYEES IN CONNECTION WITH ONGOING EFFORTS TO PROMOTE HEALTH AND SAFETY IN FCA PLANTS. ALL TRAINING RECORDS ARE MAINTAINED THROUGH THE FCA CORPORATE LEARNING CENTER SYSTEM.

WORLD CLASS MANUFACTURING ONLINE OFFERINGS - IN 2013 THE WCM CENTRAL TEAM DEVELOPED ONLINE COURSES TO HELP EMPLOYEES LEARN WCM PILLAR-SPECIFIC CONCEPTS AND TOOLS AT THEIR OWN PACE. SHORT MODULES AND VIDEOS PROVIDE A STANDARDIZED KNOWLEDGE SET FOR WCM TOOLS AND ACRONYMS. THESE OFFERINGS WERE UTILIZED ON 21,759 OCCASIONS BY WCM PARTICIPANTS DURING THE 2017 CALENDAR YEAR. DURING THE 2013-2017 TIME PERIOD, 59,632 ONLINE COURSES WERE COMPLETED. ALL ONLINE ACTIVITIES ARE CONDUCTED THROUGH THE FCA CORPORATE LEARNING CENTER SYSTEM AND WCMA E-LEARNING WEBSITE.

FORM 990, PART VI, SECTION A, LINE 7A:
 THE UAW AND FCA EACH APPOINT THE SAME NUMBER OF INDIVIDUALS TO THE BOARD OF THE ORGANIZATION.

FORM 990, PART VI, SECTION A, LINE 8B.
 THE ORGANIZATION DID NOT HAVE ANY COMMITTEES DURING THE YEAR ENDED SEPTEMBER 30, 2018.

FORM 990, PART VI, SECTION B, LINE 11B.
 ONCE THE FORM 990 IS PREPARED BY THE ORGANIZATION, WITH ASSISTANCE FROM THE

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EXTERNAL TAX ACCOUNTING FIRM, THE FORM AND ALL APPLICABLE SCHEDULES ARE
PROVIDED TO THE ASSISTANT TREASURER FOR REVIEW WITH THE EXTERNAL ACCOUNTING
FIRM. AFTER THE ASSISTANT TREASURER HAS COMPLETED THEIR REVIEW, THE FORM
AND ALL APPLICABLE SCHEDULES ARE PROVIDED TO THE FULL BOARD OF DIRECTORS IN
ADVANCE OF THE FORM BEING FILED WITH THE IRS, ALLOWING TIME FOR REVIEW AND
COMMENT BY THE FULL BOARD.

FORM 990, PART VI, SECTION C, LINE 19:

DOCUMENTS SUBJECT TO PUBLIC INSPECTION ARE MADE AVAILABLE UPON REQUEST.

FORM 990, PART VI, SECTION A, LINE 9:

NORWOOD JEWELL - 2296 MACSCOTT CT., SWARTZ CREEK, MI 48423

MIGUEL FOSTER - 8000 E. JEFFERSON AVENUE, DETROIT, MI 48214

SHANE DAWES - 8000 E. JEFFERSON AVENUE, DETROIT, MI 48214

MICHAEL STONE - 8000 E. JEFFERSON AVENUE, DETROIT, MI 48214

SHAWN FAIN - 8000 E. JEFFERSON AVENUE, DETROIT, MI 48214

JEFFREY SHROCK - 8000 E. JEFFERSON AVENUE, DETROIT, MI 48214

TERRY DITTES - 8000 E. JEFFERSON AVENUE, DETROIT, MI 48214

LAMAR HARRIS - 1000 CHRYSLER DRIVE, AUBURN HILLS, MI 48326

BRIAN HARLOW - 1000 CHRYSLER DRIVE, AUBURN HILLS, MI 48326

FORM 990, PART VI, SECTION B, LINE 12C:

THE CONFLICT OF INTEREST POLICY COVERS DIRECTORS, OFFICERS OR OTHER
PERSONS WITH POWERS DELEGATED TO THEM BY THE ORGANIZATION'S BOARD OF
DIRECTORS (THE "BOARD") WHO HAVE A DIRECT OR INDIRECT FINANCIAL
INTEREST ("INTERESTED PERSONS"). "FINANCIAL INTEREST" IS DEFINED IN THE
POLICY. AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF A FINANCIAL
INTEREST AND ALL MATERIAL FACTS TO THE BOARD. IF THE BOARD DETERMINES A

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CONFLICT OF INTEREST EXISTS THE BOARD SHALL NOT ENTER INTO THE PROPOSED TRANSACTION.

FORM 990, PART VII, SECTION A, LINE 1A:
WHERE 0.00 IS LISTED THE HOURS PER WEEK OF THE INDIVIDUAL VARIED THROUGHOUT THE YEAR.

FORM 990, PART VII, SECTION A, LINE 1A, COLUMN (D):
COMPENSATION IS FOR CALENDAR YEAR 2017.

FORM 990, PART VII, SECTION B, LINE 1:
AMOUNTS PAID BY THE ORGANIZATION TO THE UAW AND FCA ARE FOR THE SERVICES OF UAW AND FCA EMPLOYEES PERFORMED TO ADVANCE THE MISSION OF THE ORGANIZATION.

FORM 990, PART VIII, LINE 11A:
THE ORGANIZATION HAS A 25% OWNERSHIP INTEREST IN COORDINATED TRAVEL SERVICES, LLC.

FORM 990, PART IX, LINE 11G, OTHER FEES:

UAW INTERNATIONAL PROGRAM SUPPORT	4,051,727.
FCA MANAGEMENT PROGRAM SUPPORT	1,084,380.
FCA TRAINERS	4,084,964.
OTHER	604,511.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	9,825,582.

THE ORGANIZATION BELIEVES THAT A PORTION OF THE AMOUNT IT PAID TO THE UAW FOR PROGRAM SUPPORT EXCEEDS THE AMOUNT WHICH SHOULD HAVE BEEN PAID. THE

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ORGANIZATION IS IN DISCUSSIONS WITH THE UAW REGARDING ANY OVERPAYMENT.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

BOOK/TAX DIFFERENCE FROM COORDINATED TRAVEL SERVICES, LLC	-121.
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