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Form 990

Department of the TreasuryInternal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047

2018

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 01-01-2018, and ending 12-31-2018

B Check if applicable

Address change

Name change

Initial return

Final return/terminated

Amended return

Application pending

C Name of organization

INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Doing business as

Number and street (or P O box if mail is not delivered to street address)

Room/suite

25 LOUISIANA AVE NW

City or town, state or province, country, and ZIP or foreign postal code

WASHINGTON, DC 20001

F Name and address of principal officer

KEN HALL

25 LOUISIANA AVE NW

WASHINGTON, DC 20001

H(a) Is this a group return for subordinates?

Yes

No

H(b) Are all subordinates included?

Yes

No

If "No," attach a list (see instructions)

H(c) Group exemption number

0320

D Employer identification number

53-0215427

E Telephone number

(202) 624-6800

G Gross receipts \$

200,020,240

I Tax-exempt status

501(c)(3)

501(c) ( 5 )

(insert no )

4947(a)(1) or

527

J Website: WWW TEAMSTER ORG

K Form of organization

Corporation

Trust

Association

Other

L Year of formation

1903

M State of legal domicile

DC

Part I Summary

1 Briefly describe the organization's mission or most significant activities

THE OBJECTS OF THIS INTERNATIONAL UNION ARE TO ORGANIZE UNDER ONE BANNER ALL WORKERS ENGAGED IN INDUSTRY, TO EDUCATE THEM TO COOPERATE IN EVERY MOVEMENT WHICH TENDS TO BENEFIT THE ORGANIZATION, AND TO IMPROVE THE CON

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

157

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

3

Yes

No

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

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

THE OBJECTIVES OF THIS INTERNATIONAL UNION ARE TO ORGANIZE UNDER ONE BANNER ALL WORKERS ENGAGED IN INDUSTRY, TO EDUCATE THEM TO COOPERATE IN EVERY MOVEMENT WHICH TENDS TO BENEFIT THE ORGANIZATION, AND TO IMPRESS UPON OUR MEMBERSHIP, EMPLOYERS, AND THE PUBLIC THAT IT IS TO THE ADVANTAGE OF ALL CONCERNED THAT WORKERS BE ORGANIZED THE ORGANIZATION OF OUR INDUSTRY REQUIRES HONEST AND INTELLIGENT MEMBERSHIP, ADAPTED TO THE BUSINESS WE TEACH OUR MEMBERSHIP THE ADVANTAGE, BENEFITS, AND IMPORTANCE OF THEIR INDUSTRIAL POSITION, AND WE ENDEAVOR TO BUILD-UP AND PERFECT A LABOR ORGANIZATION IN CONFORMITY WITH THE HIGHEST STANDARDS OF OUR AMERICAN AND CANADIAN CITIZENSHIP WE SEEK TO ENSURE THAT THE CONTRIBUTIONS MADE BY OUR MEMBERS TO IMPROVE THEIR INDUSTRIES ARE RECOGNIZED AND THAT WORKERS RECEIVE THE BENEFITS DERIVED FROM THEIR LABORS IN THE FORM OF REASONABLE HOURS, FAIR WAGES, IMPROVED WORKING CONDITIONS, AND RESPECTFUL TREATMENT BY THEIR EMPLOYERS

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 Additional Data

4b

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )



















4d

Other program services (Describe in Schedule O )

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses ►

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .	<b>1</b>	No
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	<b>2</b>	Yes
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 	<b>3</b>	Yes
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II . . . . .	<b>4</b>	
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 	<b>5</b>	Yes
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	<b>6</b>	No
<b>7</b> 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 	<b>7</b>	No
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	<b>8</b>	No
<b>9</b> Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	<b>9</b>	No
<b>10</b> 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 	<b>10</b>	No
<b>11</b> 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		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	<b>11a</b>	Yes
<b>b</b> Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	<b>11b</b>	No
<b>c</b> Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	<b>11c</b>	No
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	<b>11d</b>	No
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	<b>11e</b>	Yes
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	<b>11f</b>	Yes
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	<b>12a</b>	No
<b>b</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 	<b>12b</b>	Yes
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<b>13</b>	No
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	<b>14a</b>	Yes
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . .	<b>14b</b>	No
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . .	<b>15</b>	No
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . . .	<b>16</b>	No
<b>17</b> 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? If "Yes," complete Schedule G, Part I (see instructions) . . . . .	<b>17</b>	No
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II . . . . .	<b>18</b>	No
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III . . . . .	<b>19</b>	No
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .	<b>20a</b>	No
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20b</b>	
<b>21</b> 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 . . . . . 	<b>21</b>	Yes
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . 	<b>22</b>	No

**Part IV Checklist of Required Schedules (continued)**

		Yes	No	
<b>23</b>	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	
<b>24a</b>	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> . . . . .	24a		No
<b>b</b>	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .	24b		
<b>c</b>	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		
<b>d</b>	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	24d		
<b>25a</b>	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> 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> . . . . .	25a		
<b>b</b>	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25b		
<b>26</b>	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> . . . . .	26		No
<b>27</b>	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> . . . . .	27		No
<b>28</b>	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)			
<b>a</b>	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
<b>b</b>	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		No
<b>c</b>	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> . . . . .	28c		No
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29		No
<b>30</b>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30		No
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
<b>32</b>	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> . . . . .	32		No
<b>33</b>	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> . . . . .	33		No
<b>34</b>	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> . . . . .	34	Yes	
<b>35a</b>	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
<b>b</b>	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35b		
<b>36</b>	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	36		
<b>37</b>	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> . . . . .	37		No
<b>38</b>	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

**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	
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . .	1a	967	
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .	1b	0	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c		

<b>2a</b> 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 . . . . .		<b>2a</b>	560	<b>2b</b>	Yes	
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				<b>2b</b>	Yes	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . .				<b>3a</b>		No
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O . . . .				<b>3b</b>		
<b>4a</b> 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)? . . . .				<b>4a</b>	Yes	
<b>b</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)						
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . .				<b>5a</b>		No
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				<b>5b</b>		No
<b>c</b> If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .				<b>5c</b>		
<b>6a</b> 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? . . . .				<b>6a</b>		No
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .				<b>6b</b>		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>						
<b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .				<b>7a</b>		
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .				<b>7b</b>		
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .				<b>7c</b>		
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year . . . . .				<b>7d</b>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				<b>7e</b>		
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . .				<b>7f</b>		
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .				<b>7g</b>		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .				<b>7h</b>		
<b>8 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? . . . . .				<b>8</b>		
<b>9a</b> Did the sponsoring organization make any taxable distributions under section 4966? . . . .				<b>9a</b>		
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . .				<b>9b</b>		
<b>10 Section 501(c)(7) organizations.</b> Enter						
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 . . . . .				<b>10a</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				<b>10b</b>		
<b>11 Section 501(c)(12) organizations.</b> Enter						
<b>a</b> Gross income from members or shareholders . . . . .				<b>11a</b>		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) . . . . .				<b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?				<b>12a</b>		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year				<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>						
<b>a</b> 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				<b>13a</b>		
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . .				<b>13b</b>		
<b>c</b> Enter the amount of reserves on hand . . . . .				<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? . . . . .				<b>14a</b>		No
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . .				<b>14b</b>		
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . .				<b>15</b>		No
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O . . . . .				<b>16</b>		No

**Part VI**

**Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year	<b>1a</b> 27		
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>b</b> Enter the number of voting members included in line 1a, above, who are independent	<b>1b</b> 0		
<b>2</b> 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?	<b>2</b>		No
<b>3</b> 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?	<b>3</b>		No
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>		No
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>		No
<b>6</b> Did the organization have members or stockholders?	<b>6</b>	Yes	
<b>7a</b> 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?	<b>7a</b>	Yes	
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7b</b>		No
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
<b>a</b> The governing body?	<b>8a</b>	Yes	
<b>b</b> Each committee with authority to act on behalf of the governing body?	<b>8b</b>	Yes	
<b>9</b> 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.	<b>9</b>		No

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

	Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates?	<b>10a</b>	Yes
<b>b</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?	<b>10b</b>	Yes
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<b>11a</b>	Yes
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13.	<b>12a</b>	Yes
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>12b</b>	Yes
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	<b>12c</b>	Yes
<b>13</b> Did the organization have a written whistleblower policy?	<b>13</b>	Yes
<b>14</b> Did the organization have a written document retention and destruction policy?	<b>14</b>	Yes
<b>15</b> 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?		
<b>a</b> The organization's CEO, Executive Director, or top management official	<b>15a</b>	No
<b>b</b> Other officers or key employees of the organization	<b>15b</b>	No
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16a</b>	No
<b>b</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?	<b>16b</b>	

**Section 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-A 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.  
 ►INTERNATIONAL BROTHERHOOD OF TEAMSTERS 25 LOUISIANA AVE NW WASHINGTON, DC 20001 (202) 624-6800

## 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 ☐

**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, 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 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

[illegible]

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

[illegible]



Form 990 (2018)		Page 9						
Part VIII		Statement of Revenue						
Check if Schedule O contains a response or note to any line in this Part VIII . . . . .								
		(A)	(B)	(C)	(D)			
		Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514			
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . .	1a					
	b	Membership dues . .	1b					
	c	Fundraising events . .	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	4,034,131				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f					
	g	Noncash contributions included in lines 1a - 1f \$						
	h	Total. Add lines 1a-1f . . . . .		4,034,131				
Program Service Revenue	2a	PER CAPITA TAXES AND I	Business Code					
			900099	187,390,169	187,390,169			
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f . . . . .		187,390,169				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . .		8,162,722			8,162,722	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties . . . . .		139,958			139,958	
	6a	Gross rents	(i) Real	(ii) Personal				
			30,000					
		b	Less rental expenses		0			
		c	Rental income or (loss)		30,000			
	d	Net rental income or (loss) . . . . .		30,000			30,000	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
			87,242	32,111				
		b	Less cost or other basis and sales expenses		74,317	547		
		c	Gain or (loss)		12,925	31,564		
	d	Net gain or (loss) . . . . .		44,489			44,489	
	8a	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 . .						
	9a	Gross income from gaming activities See Part IV, line 19 . . . . .	a					
	b	Less direct expenses . . . . .	b					
	c	Net income or (loss) from gaming activities . .						
	10a	Gross sales of inventory, less returns and allowances . . . . .	a	30,602				
b	Less cost of goods sold . . . . .	b	0					
c	Net income or (loss) from sales of inventory . .		30,602				30,602	
	Miscellaneous Revenue	Business Code						
11a	OTHER	900099	113,305				113,305	
b								
c								
d	All other revenue . . . . .							
e	Total. Add lines 11a-11d . . . . .		113,305					
12	Total revenue. See Instructions . . . . .		199,945,376	187,390,169	0		8,521,076	

Form 990 (2018)

**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
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	3,723,857			
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22.				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	5,000			
<b>4</b> Benefits paid to or for members.	15,137,112			
<b>5</b> Compensation of current officers, directors, trustees, and key employees.	9,288,943			
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
<b>7</b> Other salaries and wages.	37,715,265			
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	4,767,133			
<b>9</b> Other employee benefits.	19,734,528			
<b>10</b> Payroll taxes.	3,614,529			
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management.				
<b>b</b> Legal.	4,852,362			
<b>c</b> Accounting.	286,961			
<b>d</b> Lobbying.				
<b>e</b> Professional fundraising services. See Part IV, line 17.				
<b>f</b> Investment management fees.	104,327			
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	12,900,652			
<b>12</b> Advertising and promotion.	877,752			
<b>13</b> Office expenses.	7,203,165			
<b>14</b> Information technology.	1,694,052			
<b>15</b> Royalties.				
<b>16</b> Occupancy.	2,141,374			
<b>17</b> Travel.	12,429,415			
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials.				
<b>19</b> Conferences, conventions, and meetings.	1,324,811			
<b>20</b> Interest.				
<b>21</b> Payments to affiliates.	11,469,759			
<b>22</b> Depreciation, depletion, and amortization.	1,748,864			
<b>23</b> Insurance.	687,213			
<b>24</b> 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):				
<b>a</b> REIMBURSED SALARIES	10,213,892			
<b>b</b> REIMBURSED BENEFITS	3,818,027			
<b>c</b> REIMBURSED EXPENSES	2,857,518			
<b>d</b> TAXES-SALES, PERSONAL P	1,151,844			
<b>e</b> All other expenses	973,655			
<b>25</b> Total functional expenses. Add lines 1 through 24e.	170,722,010			
<b>26</b> 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 <input type="checkbox"/> 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 IX . . . . . ☐

				(A) Beginning of year		(B) End of year	
<b>Assets</b>	<b>1</b>	Cash—non-interest-bearing . . . . .		-677,289	<b>1</b>	-186,729	
	<b>2</b>	Savings and temporary cash investments . . . . .		36,961,685	<b>2</b>	33,023,769	
	<b>3</b>	Pledges and grants receivable, net . . . . .		552,702	<b>3</b>	551,262	
	<b>4</b>	Accounts receivable, net . . . . .		20,210,848	<b>4</b>	21,592,099	
	<b>5</b>	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .			<b>5</b>		
	<b>6</b>	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L . . . . .			<b>6</b>		
	<b>7</b>	Notes and loans receivable, net . . . . .			<b>7</b>		
	<b>8</b>	Inventories for sale or use . . . . .		325,360	<b>8</b>	292,673	
	<b>9</b>	Prepaid expenses and deferred charges . . . . .		694,560	<b>9</b>	699,908	
	<b>10a</b>	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D . . . . .	<b>10a</b>	75,727,653			
	<b>b</b>	Less: accumulated depreciation . . . . .	<b>10b</b>	39,743,428	33,694,924	<b>10c</b>	35,984,225
	<b>11</b>	Investments—publicly traded securities . . . . .		231,579,998	<b>11</b>	242,377,943	
	<b>12</b>	Investments—other securities. See Part IV, line 11 . . . . .			<b>12</b>		
	<b>13</b>	Investments—program-related. See Part IV, line 11 . . . . .			<b>13</b>		
	<b>14</b>	Intangible assets . . . . .			<b>14</b>		
	<b>15</b>	Other assets. See Part IV, line 11 . . . . .		426,741	<b>15</b>	401,082	
<b>16</b>	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .		323,769,529	<b>16</b>	334,736,232		
<b>Liabilities</b>	<b>17</b>	Accounts payable and accrued expenses . . . . .		17,097,800	<b>17</b>	23,663,390	
	<b>18</b>	Grants payable . . . . .			<b>18</b>		
	<b>19</b>	Deferred revenue . . . . .			<b>19</b>		
	<b>20</b>	Tax-exempt bond liabilities . . . . .			<b>20</b>		
	<b>21</b>	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .			<b>21</b>		
	<b>22</b>	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 . . . . .			<b>22</b>		
	<b>23</b>	Secured mortgages and notes payable to unrelated third parties . . . . .			<b>23</b>		
	<b>24</b>	Unsecured notes and loans payable to unrelated third parties . . . . .			<b>24</b>		
	<b>25</b>	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 . . . . .		3,209,064	<b>25</b>	3,260,586	
	<b>26</b>	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .		20,306,864	<b>26</b>	26,923,976	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>						
	<b>27</b>	Unrestricted net assets . . . . .		302,956,269	<b>27</b>	307,310,580	
	<b>28</b>	Temporarily restricted net assets . . . . .		506,396	<b>28</b>	501,676	
	<b>29</b>	Permanently restricted net assets . . . . .			<b>29</b>		
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here ► <input type="checkbox"/> and complete lines 30 through 34.</b>						
	<b>30</b>	Capital stock or trust principal, or current funds . . . . .			<b>30</b>		
	<b>31</b>	Paid-in or capital surplus, or land, building or equipment fund . . . . .			<b>31</b>		
	<b>32</b>	Retained earnings, endowment, accumulated income, or other funds . . . . .			<b>32</b>		
<b>33</b>	<b>Total net assets or fund balances</b> . . . . .		303,462,665	<b>33</b>	307,812,256		
<b>34</b>	<b>Total liabilities and net assets/fund balances</b> . . . . .		323,769,529	<b>34</b>	334,736,232		

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	199,945,376
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	170,722,010
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	29,223,366
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	303,462,665
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-10,194,154
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	-14,679,621
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	307,812,256

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☒

	Yes	No
<b>1</b> 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		
<b>2a</b> 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		No
<b>b</b> 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 type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
<b>c</b> 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	Yes	
<b>3a</b> 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?	Yes	
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

# Additional Data

**Software ID:**

**Software Version:**

**EIN:** 53-0215427

**Name:** INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Form 990 (2018)

**Form 990, Part III, Line 4a:**

INTERNATIONAL BROTHERHOOD OF TEAMSTERS-TO ORGANIZE ALL WORKERS AND SECURE IMPROVED WAGES, HOURS, WORKING CONDITIONS & OTHER ADVANTAGES THROUGH ORGANIZING & COLLECTIVE BARGAINING

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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			
RONALD HERRERA ..... VICE PRESIDENT - TRADE DIV	35 00 .....	X						143,182	169,460	109,417
JIM KABELL ..... INTERNATIONAL TRUSTEE	35 00 .....	X						90,360	83,631	71,969
KEVIN MOORE ..... INTERNATIONAL TRUSTEE	35 00 .....	X						149,770	118,317	84,464
GREGORY FLOYD ..... VICE PRESIDENT	35 00 .....	X						85,212	317,734	48,377
DENIS TAYLOR ..... INTERNATIONAL TRUSTEE	35 00 .....	X						165,295	137,153	42,791
JAMES P HOFFA ..... GENERAL PRESIDENT	35 00 .....			X				398,929	993	64,847
JOHN F MURPHY ..... VICE PRESIDENT - CONF DIR	35 00 .....			X				183,324	37,463	65,505
DANIEL J KANE SR ..... VICE PRESIDENT - EASTERN R	35 00 .....			X				100,047	15,502	40,375
FREDRICK P POTTER ..... VICE PRESIDENT - AT LARGE	35 00 .....			X				125,613	150,196	39,220
FREDDIE N SIMPSON ..... VICE PRESIDENT - AT LARGE	35 00 .....			X				99,353	196,628	69,895

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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			
GEORGE TEDESCHI ..... VICE PRESIDENT - AT LARGE	35 00 .....			X				100,277	217,171	75,734
WILLIAM HAMILTON ..... VICE PRESIDENT - EASTERN R	35 00 .....			X				119,609	194,730	117,077
STANLEY J HENNESSY ..... VICE PRESIDENT - CANADA	35 00 .....			X				65,544	131,894	40,378
RICK MIDDLETON ..... VICE PRESIDENT - WESTERN R	35 00 .....			X				143,846	201,664	86,386
GEORGE MIRANDA ..... VICE PRESIDENT - AT LARGE	35 00 .....			X				93,737	243,083	33,819
CRAIG MCINNES ..... VICE PRESIDENT - CANADA	35 00 .....			X				63,527	213,823	39,744
SEAN O'BRIEN ..... VICE PRESIDENT - EASTERN R	35 00 .....			X				89,353	197,523	33,705
STEVEN VAIRMA ..... VICE PRESIDENT - WESTERN R	35 00 .....			X				142,760	147,266	65,798
RICHARD KEN HALL ..... GENERAL SEC -TREAS	35 00 .....			X				289,780	0	53,129
FRANCOIS LAPORTE ..... VICE PRESIDENT - CANADA	35 00 .....			X				284,149	58,613	69,143

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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			
WILLIAM M FRISKY ..... VICE PRESIDENT - CENTRAL R	35 00 .....			X				88,434	89,040	71,629
CHARLES A JONES ..... VICE PRESIDENT - CENTRAL R	35 00 .....			X				87,573	110,532	72,203
ROBERT KOPYSTYNSKY ..... VICE PRESIDENT - CENTRAL R	35 00 .....			X				88,426	0	33,587
JOHN PALMER ..... VICE PRESIDENT - SOUTHERN	35 00 .....			X				92,183	0	35,359
KIMBERLY SCHULTZ ..... VICE PRESIDENT - SOUTHERN	35 00 .....			X				87,798	0	33,302
AVRAL THOMPSON ..... VICE PRESIDENT - CENTRAL R	35 00 .....			X				87,606	118,095	50,596
GARY S WITLEN ..... DEPARTMENT DIRECTOR/LEGAL	35 00 .....				X			265,467	0	57,081
CHRISTINE BAILEY ..... DEPARTMENT DIRECTOR, FIELD	35 00 .....				X			198,564	0	48,601
JEFFREY FARMER ..... DEPARTMENT DIRECTOR/ORGANI	35 00 .....				X			198,527	0	48,413
BRET CALDWELL ..... DEPARTMENT DIRECTOR/COMMUN	35 00 .....				X			197,034	0	51,237



Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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			
MICHAEL MANLEY ..... STAFF ATTORNEY	35 00 .....				X			194,367	0	50,289
LAMONT BYRD ..... DEPARTMENT DIRECTOR/SAFETY	35 00 .....				X			194,910	0	49,142
RICHARD GIBSON ..... STAFF ATTORNEY	35 00 .....				X			190,975	0	49,814
NEIL DITCHEK ..... GENERAL PRES ASSISTANT GEN	35 00 .....				X			202,350	0	52,203
IAIN GOLD ..... DEPARTMENT DIRECTOR/STRATE	35 00 .....				X			183,832	0	47,016
TODD J THOMPSON ..... SPECIAL ASST TO GP	35 00 .....				X			200,354	0	48,743
FREDERICK DUBINSKY ..... INTERNATIONAL REPRESENTATI	35 00 .....				X			172,348	0	43,932
CYNTHIA IMPALA ..... DEPARTMENT DIRECTOR/TRAINI	35 00 .....				X			187,123	0	47,297
JOHN SLATERY ..... DEPARTMENT DIRECTOR/BENEFI	35 00 .....				X			173,050	32,500	44,222
LEAH FORD ..... ASSISTANT DIRECTOR/SPECIAL	35 00 .....				X			221,529	0	51,330

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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			
DAVID BOURNE ..... TRADE DIVISION DIRECTOR, A	35 00 .....				X			199,321	81,955	47,308
ANTHONY MATHIS ..... ASST TO GST AND AUDITOR	35 00 .....				X			195,299	0	57,462
CARIN ZELENKO ..... DEPARTMENT DIRECTOR, CAPIT	35 00 .....				X			182,471	0	46,904
RONALD SCHWAB ..... ASSISTANT DIRECTOR	35 00 .....				X			177,388	0	44,498
LOUIS S BANIECKI ..... INTERNATIONAL AUDITOR	35 00 .....				X			167,408	0	42,468
HEATHER R WIEKER ..... INTERNATIONAL AUDITOR	35 00 .....					X		167,253	0	42,696
SCOTT HEGLAND ..... INTERNATIONAL REPRESENTATI	35 00 .....					X		171,122	0	43,541
NICOLAS MANICONE ..... STAFF ATTORNEY	35 00 .....					X		173,780	0	45,585
SCOTT HILTON ..... INTERNATIONAL AUDITOR	35 00 .....					X		168,618	0	42,468
MARION DAVIS ..... DEPT DIRECTOR, BLDG & CON	35 00 .....					X		170,155	0	43,539

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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			
JOSEPH POLO ..... INTERNATIONAL AUDITOR	35 00 .....					X		169,717	0	43,383
KEN WOOD ..... VICE PRESIDENT - SOUTHERN	0 00 .....						X	5,124	105,947	648
BECKY STRZECOWSKI ..... VICE PRESIDENT - CENTRAL R	0 00 .....						X	85,459	249,044	88,900
WILLIAM C SMITH III P ..... EXECUTIVE ASST TO GEN PRES	35 00 .....						X	37,364	128,846	1,542

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**

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

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.  
▶Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047

**2018**

**Open to Public Inspection**

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization INTERNATIONAL BROTHERHOOD OF TEAMSTERS	Employer identification number 53-0215427
--	--

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1** Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")
- 2** Political campaign activity expenditures (see instructions) ▶ \$
- 3** Volunteer hours for political campaign activities (see instructions) ▶

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1** Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2** Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3** If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a** Was a correction made? ☐ Yes ☐ No
- b** If "Yes," describe in Part IV

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1** Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2** Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3** Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$
- 4** Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
- 5** Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1				
2				
3				
4				
5				
6				

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

**A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

**B** Check ☐ if the filing organization checked box A and "limited control" provisions apply

**Limits on Lobbying Expenditures**  
(The term "expenditures" means amounts paid or incurred.)**(a)** Filing  
organization's  
totals**(b)** Affiliated  
group totals

**1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)

**b** Total lobbying expenditures to influence a legislative body (direct lobbying)

**c** Total lobbying expenditures (add lines 1a and 1b)

**d** Other exempt purpose expenditures

**e** Total exempt purpose expenditures (add lines 1c and 1d)

**f** Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

**g** Grassroots nontaxable amount (enter 25% of line 1f)

**h** Subtract line 1g from line 1a If zero or less, enter -0-

**i** Subtract line 1f from line 1c If zero or less, enter -0-

**j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

☐ Yes ☐ No**4-Year Averaging Period Under section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

		(a)		(b)
		Yes	No	Amount
<b>1</b>	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			
<b>a</b>	Volunteers?			
<b>b</b>	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
<b>c</b>	Media advertisements?			
<b>d</b>	Mailings to members, legislators, or the public?			
<b>e</b>	Publications, or published or broadcast statements?			
<b>f</b>	Grants to other organizations for lobbying purposes?			
<b>g</b>	Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b>	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
<b>i</b>	Other activities?			
<b>j</b>	Total. Add lines 1c through 1i			
<b>2a</b>	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b>	If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b>	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	<b>1</b> Yes	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<b>2</b>	No
<b>3</b> Did the organization agree to carry over lobbying and political expenditures from the prior year?	<b>3</b>	No

**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."**

<b>1</b>	Dues, assessments and similar amounts from members	<b>1</b>	
<b>2</b>	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b>	Current year	<b>2a</b>	
<b>b</b>	Carryover from last year	<b>2b</b>	
<b>c</b>	Total	<b>2c</b>	
<b>3</b>	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>	
<b>4</b>	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?	<b>4</b>	
<b>5</b>	Taxable amount of lobbying and political expenditures (see instructions)	<b>5</b>	

**Part IV Supplemental Information**

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

Return Reference	Explanation
PART I-A, LINE 1	DURING THE YEAR IBT MEMBERS AND EMPLOYEES WERE PRESENT AT VARIOUS POLITICAL RALLIES TO SUPPORT VARIOUS CANDIDATES RUNNING FOR POLITICAL OFFICE. THE IBT HAS TWO SEPARATE DEPARTMENTS ASSOCIATED WITH POLITICAL ACTIVITY: THE DEPARTMENT OF FEDERAL LEGISLATION AND REGULATION AND THE DEPARTMENT OF POLITICAL AND LEGISLATIVE ACTION. EMPLOYEES IN BOTH DEPARTMENTS SPEND 97.00% OF THEIR WORK TIME ON POLITICAL ACTIVITIES. APPROXIMATELY 3.00% OF THE IBT OFFICERS' WORK TIME IS SPENT ON POLITICAL ACTIVITIES AND APPROXIMATELY 6.00% OF THE IBT EMPLOYEES' WORK TIME IS SPENT ON POLITICAL ACTIVITIES.

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493302005079	
<div>SCHEDULE D (Form 990)</div> <div>Department of the Treasury Internal Revenue Service</div>		<div>Supplemental Financial Statements</div> <div>▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990. ▶ Go to <a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a> for the latest information.</div>			<div>OMB No 1545-0047</div> <div>2018</div> <div>Open to Public Inspection</div>
Name of the organization INTERNATIONAL BROTHERHOOD OF TEAMSTERS				Employer identification number 53-0215427	
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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>			
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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>			
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) <div><input type="checkbox"/> Preservation of land for public use (e g , recreation or education) <input type="checkbox"/> Preservation of an historically important land area <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure <input type="checkbox"/> Preservation of open space</div>					
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 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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>					
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)? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>					
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 ▶ \$					
For Paperwork Reduction Act Notice, see the Instructions for Form 990.					
		Cat No 52283D		Schedule D (Form 990) 2018	

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

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 in 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

b

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

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

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	794,117		794,117
b	Buildings	52,938,868	23,297,517	29,641,351
c	Leasehold improvements			
d	Equipment	26,847	26,847	0
e	Other	21,967,821	16,419,064	5,548,757
Total.	Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))			35,984,225



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. (Column (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. (Column (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.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
ACCRUED PENSION COSTS RFPP	2,517,611
ACCRUED POSTRETIREMENT HEALTH CARE COSTS	742,975
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) ▶	3,260,586

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.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	189,354,193
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	-10,194,154
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	-292,702
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	-10,486,856
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	199,841,049
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	104,327
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	104,327
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	199,945,376

**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.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	170,617,683
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	0
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	170,617,683
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	104,327
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	104,327
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	170,722,010

**Part XIII Supplemental Information**

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

Return Reference	Explanation
See Additional Data Table	

**Part XIII**   **Supplemental Information** *(continued)*

Return Reference	Explanation

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 53-0215427  
**Name:** INTERNATIONAL BROTHERHOOD OF TEAMSTERS

**Supplemental Information**

Return Reference	Explanation
PART X, LINE 2	ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE INTERNATIONAL UNION AND RECOGNIZE A TAX LIABILITY IF THE INTERNATIONAL UNION HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY THE U S FEDERAL, STATE, OR LOCAL TAXING AUTHORITIES THE INTERNATIONAL UNION IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS, HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS TYPICALLY, TAX YEARS WILL REMAIN OPEN FOR THREE YEARS, HOWEVER THIS MAY DIFFER DEPENDING UPON THE CIRCUMSTANCES OF THE INTERNATIONAL UNION

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	LOSS ON FOREIGN CURRENCY EXCHANGE -292,702

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

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](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

2018

Open to Public  
Inspection

Name of the organization  
INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Employer identification number  
53-0215427

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

(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
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . 33

3 Enter total number of other organizations listed in the line 1 table . . . . . 19

**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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(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.

Return Reference	Explanation
PART I, LINE 2	DOCUMENTATION IS MAINTAINED TO SUBSTANTIATE THE AMOUNT OF THE GRANT OR ASSISTANCE AND ANY GRANT IN EXCESS OF \$25,000 REQUIRES EXECUTIVE BOARD APPROVAL

Additional Data

Software ID:  
Software Version:  
EIN: 53-0215427  
Name: INTERNATIONAL BROTHERHOOD OF TEAMSTERS

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

(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 non-cash assistance	(h) Purpose of grant or assistance
AEROSPACE MAINTENANCE COUNCIL 72 AUBURN STREET SAUGUS, MA 01906	46-4733307	N/A	6,000				FINANCIAL SUPPORT
ALIGN THE ALLIANCE FOR A GREATER NEW YORK INC 50 BROADWAY NEW YORK, NY 10004	20-0559291	501(C)(3)	136,360				FINANCIAL SUPPORT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
ALL CHARITIES TEAMSTERS FUND 250 EXECUTIVE PARK BLVD STE 3100 SAN FRANCISCO, CA 94134	94-3039754	501(C)(3)	152,000				FINANCIAL SUPPORT
AMERICAN IRISH HISTORICAL SOCIETY INC 991 5TH AVE NEW YORK, NY 10028	13-1656636	501(C)(3)	5,000				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
ARISE CHICAGO 1436 W RANDOLPH ST STE 202 CHICAGO, IL 60607	20-1072983	501(C)(3)	10,000				FINANCIAL SUPPORT
AVIATION WORKFORCE ALLIANCE PO BOX 972 GOLDEN, CO 80402		N/A	5,000				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
CAPITAL & MAIN 1910 W SUNSET BLVD NO 740 LOS ANGELES, CA 90026	81-0895767	501(C)(3)	25,000				FINANCIAL SUPPORT
CARECEN 1460 COLUMBIA RD NW STE C-1 WASHINGTON, DC 20009	52-1271888	501(C)(3)	5,000				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC LEGAL IMMIGRATION NETWORK INC (CLINIC) 8757 GEORGIA AVE STE 850 SILVER SPRING, MD 20910	52-1584951	501(C)(3)	5,000				FINANCIAL SUPPORT
CENTER FOR HEALTH ENVIRONMENT & JUSTICE FOR ACTION FUND PO BOX 6806 FALLS CHURCH, VA 22040	20-4053063	501(C)(3)	5,000				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S HOME SOCIETY OF WEST VIRGINIA PO BOX 2942 CHARLESTON, WV 25330	55-0360199	501(C)(3)	5,000				FINANCIAL SUPPORT
COLETTE'S CHILDREN'S HOME 7372 PRINCE DR STE 106 HUNTINGTON BEACH, CA 92647	91-1939140	501(C)(3)	5,000				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY PARTNERS FOR I AM 2018 1000 N ALAMEDA ST STE 240 LOS ANGELES, CA 90012	95-4302067	501(C)(3)	100,000				FINANCIAL SUPPORT
DEMOS 220 FIFTH AVE 2ND FLR NEW YORK, NY 10001	13-4105066	501(C)(3)	5,000				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
GEORGE WASHINGTON UNIVERSITY LIBRARY 2033 K ST NW STE 300 WASHINGTON, DC 20052	53-0196584	501(C)(3)	11,100				FINANCIAL SUPPORT
GOOD JOBS FIRST 1616 P STREET NW STE 210 WASHINGTON, DC 20036	82-0542649	501(C)(3)	20,000				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
INTERNATIONAL UNION - UAW 8000 EAST JEFFERSON AVE DETROIT, MI 48214	38-0679801	501(C)(5)	7,500				FINANCIAL SUPPORT
INSTITUTO LABORAL DE LA RAZA INC 2947 16TH STREET SAN FRANCISCO, CA 94103	94-2890401	501(C)(3)	5,000				FINANCIAL SUPPORT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
JAMES R HOFFA MEMORIAL SCHOLARSHIP FUND INC 25 LOUISIANA AVE NW WASHINGTON, DC 20001	52-2206826	501(C)(3)	12,499				FINANCIAL SUPPORT
JEWISH LABOR COMMITTEE 140 WEST 31ST STREET 3RD FLR NEW YORK, NY 10001	13-1675650	501(C)(3)	10,000				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
LABOR COMMUNITY SERVICES PO BOX 920041 LOS ANGELES, CA 90006	95-4147259	501(C)(3)	10,000				FINANCIAL SUPPORT
LABOR COUNCIL FOR LATIN AMERICAN ADVANCEMENT 815 16TH ST NW 3RD FLR WASHINGTON, DC 20006	52-1002207	501(C)(3)	5,000				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
LABOR PROJECT WORKING FAMILIES 2521 CHANNING WAY STE 5555 BERKELEY, CA 94720	94-3284312	501(C)(3)	5,000				FINANCIAL SUPPORT
LOS ANGELES ALLIANCE FOR A NEW ECONOMY 464 LUCAS AVENUE SUITE 202 LOS ANGELES, CA 90017	95-4459527	501(C)(3)	329,002				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
NAACP 27 BRENTSHIRE SQ STE A JACKSON, TN 38305	62-1832558	501(C)(3)	5,000				FINANCIAL SUPPORT
NATIONAL DEMOCRATICE CLUB 30 IVY ST SE WASHINGTON, DC 20003	53-0233594	501(C)(7)	10,000				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
NATIONAL FEDERATION OF FEDERAL EMPLOYEES LEGAL FUND 1225 NY AVE NW STE 450 WASHINGTON, DC 20005		501(C)(5)	10,000				FINANCIAL SUPPORT
NATIONAL MAINTENANCE AGREEMENT LABOR-MANAGEMENT POLICY COMMITTEE 1501 LEE HIGHWAY STE 202 ARLINGTON, VA 22209	52-1289622	501(C)(6)	5,500				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
NORTHERN VIRGINIA LABOR FEDERATION PO BOX 565 ANNANDALE, VA 22003	54-1569127	501(C)(5)	5,000				FINANCIAL SUPPORT
OLD NEWSBOYS' GOODFELLOW FUND OF DETROIT PO BOX 44444 DETROIT, MI 48244	38-6061491	501(C)(3)	5,000				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
PHILANDO FEEDS THE CHILDREN PO BOX 22111 MINNEAPOLIS, MN 55411	81-4627038	501(C)(3)	5,000				FINANCIAL SUPPORT
ROOSEVELT INSTITUTE	33-7343503	501(C)(3)	25,000				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
RUTGERS UNIVERSITY LABOR EDUCATION CENTER 50 LABOR WAY NEW BRUNSWICK, NJ 08903	23-7318742	501(C)(3)	5,000				FINANCIAL SUPPORT
SOUTHERN CHRISTIAN LEADERSHIP CONFERENCE PO BOX 92544 ATLANTA, GA 30314	58-0807748	501(C)(3)	5,000				FINANCIAL SUPPORT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
SOUTHERN CHRISTIAN LEADERSHIP CONFERENCE OF SOUTHERN CALIFORNIA 8107 LOYOLA BLVD LOS ANGELES, CA 90045	46-2373196	501(C)(3)	5,000				FINANCIAL SUPPORT
TEAMSTERS LOCAL UNION 299 COMMUNITY SERVICES FNDTN 2741 TRUMBALL AVE DETROIT, MI 48216	61-1533183	501(C)(3)	5,000				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
TEAMSTERS LOCAL UNION 391 PO BOX 35405 GREENSBORO, NC 27425	56-0429505	501(C)(5)	60,000				DISASTER RELIEF ASSITANCE
TEAMSTERS LOCAL UNION 991 112 S BROAD STREET MOBILE, AL 36602	63-0152728	501(C)(5)	125,000				DISASTER RELIEF ASSITANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
TEAMSTERS NATIONAL BLACK CAUCUS PO BOX 16707 MEMPHIS, TN 38186	35-1827988	501(C)(10)	10,000				FINANCIAL SUPPORT
TEAMSTERS JOINT COUNCIL 16 265 WEST 14TH STREET NEW YORK, NY 10023	13-5505746	501(C)(5)	140,000				DISASTER RELIEF ASSITANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
TEAMSTERS JOINT COUNCIL 7 250 EXECUTIVE PARK BLVD STE 3100 SAN FRANCISCO, CA 94134	94-1137093	501(C)(5)	50,000				DISASTER RELIEF ASSITANCE
THE AMERICAN ANTITRUST INSTITUTE 1025 CONNECTICUT AVE NW STE 1000 WASHINGTON, DC 20036	52-2093834	501(C)(3)	5,000				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
THE AMERICAN CONSTITUTION SOCIETY FOR LAW & POLICY 1333 H STREET NW 11TH FLOOR WASHINGTON, DC 20005	52-2313694	501(C)(3)	5,000				FINANCIAL SUPPORT
THE AMERICAN IRELAND FUND 345 PARK AVE 1705 NEW YORK, NY 10154	25-1306992	501(C)(3)	5,000				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
THE LADIES OF PIPEFITTERS LOCAL UNION 798 MEMORIAL FUND PO BOX 125 BIXBY, OK 74008	77-0683346	501(C)(3)	5,000				FINANCIAL SUPPORT
THE PEGGY BROWING FUND 100 S BROAD STREET STE 1208 PHILADELPHIA, PA 19103	23-2887086	501(C)(3)	10,000				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
THE WAYNE COUNTY SHERIFF YOUTH & SENIOR EDUCATION FUND 4747 WOODWARD AVENUE DETROIT, MI 48201	38-2983116	501(C)(3)	5,000				FINANCIAL SUPPORT
UCLA DOWNTOWN LABOR CENTER 675 S PARK VIEW STREET LOS ANGELES, CA 90057	95-2250801	501(C)(3)	5,000				FINANCIAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
UFCW CHARITY FOUNDATION 1775 K STREET NW WASHINGTON, DC 20006	52-1979561	501(C)(3)	5,000				FINANCIAL SUPPORT
UNITED STUDENTS AGAINST SWEATSHOPS 1150 17TH STREET WASHINGTON, DC 20036	52-2094677	501(C)(3)	15,000				FINANCIAL SUPPORT



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
WAREHOSUE WORKERS RESOURCE CENTER PO BOX 3892 ONTARIO, CA 91761	45-2287926	501(C)(3)	5,000				FINANCIAL SUPPORT
WORKING PARTNERSHIPS USA 2102 ALMADEN RD STE 112 SAN JOSE, CA 98125	77-0387535	501(C)(3)	25,000				FINANCIAL SUPPORT

<b>Schedule J</b> <b>(Form 990)</b>  <div>Department of the Treasury</div> <div>Internal Revenue Service</div>	<b>Compensation Information</b>  <b>For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees</b> <b>▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.</b> <b>▶ Attach to Form 990.</b> <b>▶ Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.</b>		OMB No 1545-0047
			<b>2018</b>
			<b>Open to Public Inspection</b>
Name of the organization INTERNATIONAL BROTHERHOOD OF TEAMSTERS		Employer identification number 53-0215427	

Part I Questions Regarding Compensation			Yes	No
<b>1a</b> 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 checked="" type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input checked="" type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input checked="" type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)			
<b>b</b> If any of the boxes in 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.			<b>1b</b>	Yes
<b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?			<b>2</b>	Yes
<b>3</b> 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"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee			
<b>4</b> 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:				
<b>a</b> Receive a severance payment or change-of-control payment?			<b>4a</b>	No
<b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?			<b>4b</b>	No
<b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement?			<b>4c</b>	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
<b>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b>				
<b>5</b> 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:				
<b>a</b> The organization?			<b>5a</b>	
<b>b</b> Any related organization?			<b>5b</b>	
If "Yes," on line 5a or 5b, describe in Part III.				
<b>6</b> 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:				
<b>a</b> The organization?			<b>6a</b>	
<b>b</b> Any related organization?			<b>6b</b>	
If "Yes," on line 6a or 6b, describe in Part III.				
<b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.			<b>7</b>	
<b>8</b> 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.			<b>8</b>	
<b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?			<b>9</b>	

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.

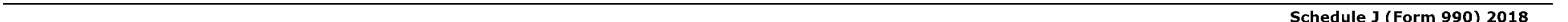
See Additional Data Table

**Schedule J (Form 990) 2018**

**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.

Return Reference	Explanation
PART I, LINE 1A	THE GENERAL PRESIDENT, THE GENERAL SECRETARY-TREASURER AND EXECUTIVE ASST TO THE GENERAL PRESIDENT ARE PROVIDED HOUSING, THE FAIR VALUE IS INCLUDED ON THEIR W-2. EMPLOYEES RECEIVE A FICA MATCH WHICH IS A GROSS-UP PAYMENT INCLUDED ON THEIR W-2.



Additional Data

Software ID:  
Software Version:  
EIN: 53-0215427  
Name: INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(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				
RONALD HERRERA VICE PRESIDENT - TRADE DIV	(i)	131,923	0	11,259	17,097	23,031	183,310	0
	(ii)	162,860	0	6,600	46,740	22,549	238,749	0
JIM KABELL INTERNATIONAL TRUSTEE	(i)	81,923	0	8,437	10,617	23,145	124,122	0
	(ii)	82,842	0	789	17,888	20,319	121,838	0
KEVIN MOORE INTERNATIONAL TRUSTEE	(i)	135,962	0	13,808	17,621	24,645	192,036	0
	(ii)	116,740	0	1,577	0	42,198	160,515	0
GREGORY FLOYD VICE PRESIDENT	(i)	78,038	0	7,174	10,114	23,031	118,357	0
	(ii)	303,660	0	14,074	15,232	0	332,966	0
DENIS TAYLOR INTERNATIONAL TRUSTEE	(i)	151,148	0	14,147	19,589	23,202	208,086	0
	(ii)	137,153	0	0	0	0	137,153	0
JAMES P HOFFA GENERAL PRESIDENT	(i)	321,449	0	77,480	41,660	23,187	463,776	0
	(ii)	993	0	0	0	0	993	0
JOHN F MURPHY VICE PRESIDENT - CONF DIR	(i)	159,246	0	24,078	20,638	23,031	226,993	0
	(ii)	35,267	0	2,196	0	21,836	59,299	0
DANIEL J KANE SR VICE PRESIDENT - EASTERN R	(i)	88,006	0	12,041	11,406	24,588	136,041	0
	(ii)	14,400	0	1,102	0	4,381	19,883	0
FREDRICK P POTTER VICE PRESIDENT - AT LARGE	(i)	112,002	0	13,611	14,515	24,645	164,773	0
	(ii)	136,968	2,634	10,594	0	60	150,256	0
FREDDIE N SIMPSON VICE PRESIDENT - AT LARGE	(i)	88,006	0	11,347	11,406	171	110,930	0
	(ii)	174,302	0	22,326	26,545	31,773	254,946	0
GEORGE TEDESCHI VICE PRESIDENT - AT LARGE	(i)	88,006	0	12,271	11,406	23,145	134,828	0
	(ii)	205,886	0	11,285	2,693	38,490	258,354	0
WILLIAM HAMILTON VICE PRESIDENT - EASTERN R	(i)	106,443	0	13,166	13,795	23,145	156,549	0
	(ii)	174,175	0	20,555	49,535	30,602	274,867	0
STANLEY J HENNESSY VICE PRESIDENT - CANADA	(i)	63,527	0	2,017	8,223	25,555	99,322	0
	(ii)	115,779	1,755	14,360	0	6,600	138,494	0
RICK MIDDLETON VICE PRESIDENT - WESTERN R	(i)	131,923	0	11,923	17,097	23,145	184,088	0
	(ii)	201,664	0	0	26,770	19,374	247,808	0
GEORGE MIRANDA VICE PRESIDENT - AT LARGE	(i)	81,923	0	11,814	10,617	23,202	127,556	0
	(ii)	243,083	0	0	0	0	243,083	0
CRAIG MCINNES VICE PRESIDENT - CANADA	(i)	63,527	0	0	8,233	25,554	97,314	0
	(ii)	201,551	0	12,272	0	5,957	219,780	0
SEAN O'BRIEN VICE PRESIDENT - EASTERN R	(i)	81,923	0	7,430	10,617	23,088	123,058	0
	(ii)	197,523	0	0	0	0	197,523	0
STEVEN VAIRMA VICE PRESIDENT - WESTERN R	(i)	131,923	0	10,837	17,097	0	159,857	0
	(ii)	113,534	0	33,732	26,187	22,514	195,967	0
RICHARD KEN HALL GENERAL SEC -TREAS	(i)	218,461	0	71,319	28,313	24,816	342,909	0
	(ii)	0	0	0	0	0	0	0
FRANCOIS LAPORTE VICE PRESIDENT - CANADA	(i)	284,149	0	0	36,826	25,681	346,656	0
	(ii)	39,646	5,250	13,717	0	6,636	65,249	0

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
(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				
WILLIAM M FRISKY VICE PRESIDENT - CENTRAL R	(i)	77,495	0	10,939	10,043	23,373	121,850	0
	(ii)	76,600	0	12,440	17,891	20,322	127,253	0
CHARLES A JONES VICE PRESIDENT - CENTRAL R	(i)	77,495	0	10,078	10,043	23,088	120,704	0
	(ii)	102,132	0	8,400	21,496	17,576	149,604	0
AVRAL THOMPSON VICE PRESIDENT - CENTRAL R	(i)	77,495	0	10,111	10,043	23,088	120,737	0
	(ii)	99,750	5,755	12,590	16,512	953	135,560	0
GARY S WITLEN DEPARTMENT DIRECTOR/LEGAL	(i)	250,716	0	14,751	32,493	24,588	322,548	0
	(ii)	0	0	0	0	0	0	0
CHRISTINE BAILEY DEPARTMENT DIRECTOR, FIELD	(i)	183,530	0	15,034	23,785	24,816	247,165	0
	(ii)	0	0	0	0	0	0	0
JEFFREY FARMER DEPARTMENT DIRECTOR/ORGANI	(i)	182,954	0	15,573	23,711	24,702	246,940	0
	(ii)	0	0	0	0	0	0	0
BRET CALDWELL DEPARTMENT DIRECTOR/COMMUN	(i)	185,175	0	11,859	23,999	27,238	248,271	0
	(ii)	0	0	0	0	0	0	0
MICHAEL MANLEY STAFF ATTORNEY	(i)	184,636	0	9,731	23,929	26,360	244,656	0
	(ii)	0	0	0	0	0	0	0
LAMONT BYRD DEPARTMENT DIRECTOR/SAFETY	(i)	181,959	0	12,951	23,582	25,560	244,052	0
	(ii)	0	0	0	0	0	0	0
RICHARD GIBSON STAFF ATTORNEY	(i)	181,194	0	9,781	23,483	26,331	240,789	0
	(ii)	0	0	0	0	0	0	0
NEIL DITCHEK GENERAL PRES ASSISTANT GEN	(i)	193,068	0	9,282	25,022	27,181	254,553	0
	(ii)	0	0	0	0	0	0	0
IAIN GOLD DEPARTMENT DIRECTOR/STRATE	(i)	171,515	0	12,317	22,228	24,788	230,848	0
	(ii)	0	0	0	0	0	0	0
TODD J THOMPSON SPECIAL ASST TO GP	(i)	185,499	0	14,855	24,041	24,702	249,097	0
	(ii)	0	0	0	0	0	0	0
FREDERICK DUBINSKY INTERNATIONAL REPRESENTATI	(i)	151,019	0	21,329	19,572	24,360	216,280	0
	(ii)	0	0	0	0	0	0	0
CYNTHIA IMPALA DEPARTMENT DIRECTOR/TRAINI	(i)	171,269	0	15,854	22,196	25,101	234,420	0
	(ii)	0	0	0	0	0	0	0
JOHN SLATERY DEPARTMENT DIRECTOR/BENEFI	(i)	160,092	0	12,958	20,748	23,474	217,272	0
	(ii)	32,500	0	0	0	0	32,500	0
LEAH FORD ASSISTANT DIRECTOR/SPECIAL	(i)	206,343	0	15,186	26,742	24,588	272,859	0
	(ii)	0	0	0	0	0	0	0
DAVID BOURNE TRADE DIVISION DIRECTOR, A	(i)	175,305	0	24,016	22,720	24,588	246,629	0
	(ii)	81,955	0	0	0	0	81,955	0
ANTHONY MATHIS ASST TO GST AND AUDITOR	(i)	171,211	0	24,088	22,189	35,273	252,761	0
	(ii)	0	0	0	0	0	0	0
CARIN ZELENKO DEPARTMENT DIRECTOR, CAPIT	(i)	173,072	0	9,399	22,430	24,474	229,375	0
	(ii)	0	0	0	0	0	0	0

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
(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				
RONALD SCHWAB ASSISTANT DIRECTOR	(i)	153,184	0	24,204	19,853	24,645	221,886	0
	(ii)	0	0	0	0	0	0	0
LOUIS S BANIECKI INTERNATIONAL AUDITOR	(i)	139,723	0	27,685	18,108	24,360	209,876	0
	(ii)	0	0	0	0	0	0	0
HEATHER R WIEKER INTERNATIONAL AUDITOR	(i)	139,723	0	27,530	18,108	24,588	209,949	0
	(ii)	0	0	0	0	0	0	0
SCOTT HEGLAND INTERNATIONAL REPRESENTATI	(i)	148,001	0	23,121	19,181	24,360	214,663	0
	(ii)	0	0	0	0	0	0	0
NICOLAS MANICONE STAFF ATTORNEY	(i)	162,453	0	11,327	21,054	24,531	219,365	0
	(ii)	0	0	0	0	0	0	0
SCOTT HILTON INTERNATIONAL AUDITOR	(i)	139,723	0	28,895	18,108	24,360	211,086	0
	(ii)	0	0	0	0	0	0	0
MARION DAVIS DEPT DIRECTOR, BLDG & CON	(i)	146,664	0	23,491	19,008	24,531	213,694	0
	(ii)	0	0	0	0	0	0	0
JOSEPH POLO INTERNATIONAL AUDITOR	(i)	146,780	0	22,937	19,023	24,360	213,100	0
	(ii)	0	0	0	0	0	0	0
KEN WOOD VICE PRESIDENT - SOUTHERN	(i)	5,000	0	124	648	0	5,772	0
	(ii)	12,620	0	93,327	0	0	105,947	0
BECKY STRZECOWSKI VICE PRESIDENT - CENTRAL R	(i)	75,563	0	9,896	9,793	23,145	118,397	0
	(ii)	228,500	0	20,544	53,928	2,034	305,006	0
WILLIAM C SMITH III P EXECUTIVE ASST TO GEN PRES	(i)	11,897	0	25,467	1,542	0	38,906	0
	(ii)	108,310	0	20,536	0	0	128,846	0



**SCHEDULE O**  
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

**2018****Open to Public  
Inspection**

Department of the Treasury

Name of the organization

INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Employer identification number

53-0215427

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE INTERNATIONAL BROTHERHOOD OF TEAMSTERS (IBT) IS A MEMBERSHIP ORGANIZATION MEMBERSHIP TO THE ORGANIZATION IS DISCUSSED IN ARTICLE II, SECTION 2(A) OF ITS BY-LAWS WHICH ARE LOCATED ON IBT'S WEB-SITE WWW TEAMSTER ORG

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	ELECTION OF OFFICERS AND DELEGATES OF THE INTERNATIONAL BROTHERHOOD OF TEAMSTERS (IBT) IS DISCUSSED IN ARTICLE IV OF ITS BY-LAWS WHICH ARE LOCATED ON IBT'S WEB-SITE WWW TEAMSTER OR G

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE INTERNATIONAL BROTHERHOOD OF TEAMSTERS FORM 990 IS PREPARED BY ITS INDEPENDENT PUBLIC ACCOUNTANT WHO THEN FORWARDS THE COMPLETED RETURN TO IBT'S GENERAL-SECRETARY TREASURER FOR REVIEW AND SIGNATURE

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE INTERNATIONAL BROTHERHOOD OF TEAMSTERS MONITORS ITS CONFLICT OF INTEREST POLICY ANNUALLY

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE INTERNATIONAL BROTHERHOOD OF TEAMSTERS MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART XI, LINE 9	LOSS ON FOREIGN CURRENCY EXCHANGE -292,702 FASB ASC 715 ADJUSTMENT -14,386,919

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE INTERNATIONAL BROTHERHOOD OF TEAMSTERS (IBT) FINANCIAL STATEMENTS WERE AUDITED AS PART OF A CONSOLIDATED STATEMENT IBT'S OFFICERS ARE RESPONSIBLE FOR OVERSEEING THE FINANCIAL STATEMENT AUDIT AND SELECTION OF THE INDEPENDENT ACCOUNTANT THAT PERFORMS THE AUDIT NO CHANGE TO THE PROCESS WAS MADE FROM THE PRIOR YEAR

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization  
INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Employer identification number  
53-0215427

Part I

Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

See Additional Data Table

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No



**Part III Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
<b>(1)</b> TEAMSTERS NATIONAL HEADQUARTERS BUILDING CORPORATION  25 LOUISIAN AVENUE NW WASHINGTON, DC 20001 53-0226398	BUILDING CORPORATION	DC	INTERNATIONAL BROTHERHOOD OF TEAMSTERS	C			100 000 %		No

**Part V Transactions With Related Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule**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?

	Yes	No
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity . . . . .		No
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .	Yes	
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .		No
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .		No
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .		No
<b>f</b> Dividends from related organization(s) . . . . .		No
<b>g</b> Sale of assets to related organization(s) . . . . .		No
<b>h</b> Purchase of assets from related organization(s) . . . . .		No
<b>i</b> Exchange of assets with related organization(s) . . . . .		No
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .		No
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .		No
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .		No
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .		No
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .	Yes	
<b>o</b> Sharing of paid employees with related organization(s) . . . . .	Yes	
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .		No
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .	Yes	
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .	Yes	
<b>s</b> Other transfer of cash or property from related organization(s) . . . . .		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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) INTERNATIONAL BROTHERHOOD OF TEAMSTERS VOLUNTARY EMPLOYEE BENEFITS TRUST	Q	283,893	FMV
(2) INTERNATIONAL BROTHERHOOD OF TEAMSTERS SUPPLEMENTAL BENEFITS TRUST	Q	210,502	FMV
(3) THE TEAMSTER AFFILIATES PENSION PLAN	Q	796,228	FMV
(4) RETIREMENT AND FAMILY PROTECTION PLAN	Q	271,052	FMV
(5) THE COMMITTEE FOR DEMOREPINDEPENDENT VOTER EDUCATION (DRIVE)	R	52,133	FMV

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.

[illegible]

**Part VII**    **Supplemental Information**

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

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 53-0215427

Name: INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 53-0261255	POLITICAL ACTION COMMITTEE	DC	SECTION 527				No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 52-6128127	PENSION FUND	DC	401(A)/501(A)				No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 53-0215427	PENSION FUND	DC	401(A)/501(A)				No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 52-1967784	PENSION FUND	DC	401(A)/501(A)				No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 01-6196051	VEBA TRUST	DC	501(C)(9)				No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 52-1790540	CHARITABLE RELIEF FUND	DC	501(C)(3)	170(B)(1)(A)(VI)			No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 20-0412571	SUPPLEMENTAL BENEFITS TRUST	DC	501(C)(5)				No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 26-2912925	POLITICAL ACTION COMMITTEE	DC	SECTION 527				No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 26-3361356	LEGAL DEFENSE FUND	DC	501(C)(9)				No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 27-4722755	VEBA TRUST	DC	501(C)(4)				No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 27-0765573	POLITICAL ACTION COMMITTEE	FL	SECTION 527				No