For Paperwork Reduction Act Notice, see the separate instructions.

Department of the

Treasury

Return of Organization Exempt From Income Tax

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

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

P 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.

2018

DLN: 93493182013020OMB No. 1545-0047

Open to Public Inspection

		e 2019 c		ning 07-01-2018 , and ending 06-	30-2019			
		pplicable:	C Name of organization		50 2015	D Employe	er identifi	ication number
		change	INTERNATIONAL BROTHERHOOD OF BOILERMAKERS IRON SHIP BUILDER			48-6031	1851	
□ Na		-					1031	
☐ Ini			Doing business as					
		n/terminated d return		ail is not delivered to street address) Room/	suite	E Telephon	e number	
		on pending	752 STATE AVE NO 565	an is not delivered to stroot address, incomy	barco	(913) 3	71-2640	
			City or town, state or province, coun	try, and ZIP or foreign postal code		(111)1		
			KANSAS CITY, KS 66101			G Gross re	ceipts \$ 55	5,450,938
			F Name and address of principa	l officer:	H(a)	Is this a group ret	turn for	
			WILLIAM CREEDEN		(=)	subordinates?	carri Tor	□Yes ☑No
			753 STATE AVE NO 565 KANSAS CITY, KS 66101		H(b)	Are all subordinat	es	☐ Yes ☐No
[Tax	-exer	npt status:	☐ 501(c)(3) ☑ 501(c)(5)◀	(insert no.) 4947(a)(1) or 527		included?	ist (sss	
1 147	- h - i t	- N/VA	/W.BOILERMAKERS.ORG	(Insert no.) — 4947(a)(1) or — 527	H(c)	If "No," attach a l Group exemption	•	•
J 44	edsit	:e:► vv vv	W.BOILERMAKERS.ORG			Group exemption	Hamber	1232
V Form	2 of 0	rannization	: Corporation 🗹 Trust C Asso	sisting Other •	L Year o	of formation: 1893	M State	of legal domicile: KS
K FUIII	1 01 01	ganization.	. La Corporation La Trust La Assor	Clation				
Pa	ırt I	Sum	mary					
			scribe the organization's mission o	most significant activities:				
ey.	<u> </u>	INTERNAT	TONAL LABOR UNION					
Ē	_							
Ë	-							
Governance				continued its operations or disposed of	more tha	n 25% of its net a	ssets.	1
	3	Number o	of voting members of the governin	g body (Part VI, line 1a)			3	6
დ ლ	4	Number o	of independent voting members of	the governing body (Part VI, line 1b)			4	0
Activities &	5	Total nun	nber of individuals employed in cal	endar year 2018 (Part V, line 2a) .			5	120
⋛	6	Total nun	nber of volunteers (estimate if nec	essary)			6	0
ĕ	7a	Total unr	elated business revenue from Part	VIII, column (C), line 12			7a	-3,091
	b	Net unrel	lated business taxable income fron	1 Form 990-T, line 34			7b	-3,091
						Prior Year		Current Year
Qi.	8	Contribut	tions and grants (Part VIII, line 1h)				0	0
Ravenue	9	Program	service revenue (Part VIII, line 2g)			40,660,9	944	47,403,245
ř	10	Investme	329	2,343,725				
_	11	Other rev	213	534,364				
	12	Total reve	enue—add lines 8 through 11 (mu	st equal Part VIII, column (A), line 12)		42,711,9	986	50,281,334
	13	Grants ar	nd similar amounts paid (Part IX, c	olumn (A), lines 1–3)		369,4	119	497,807
	14	Benefits p	paid to or for members (Part IX, co	lumn (A), line 4)		121,7	781	152,944
SS.	15	Salaries,	other compensation, employee be	nefits (Part IX, column (A), lines 5-10)		28,178,3	332	30,892,906
nse	16 a	Professio	onal fundraising fees (Part IX, colur	nn (A), line 11e)......			0	0
Expenses	b	Total fundr	raising expenses (Part IX, column (D), I	ine 25) ▶0				
Щ	17	Other exp	penses (Part IX, column (A), lines :	11a-11d, 11f-24e)		14,843,1	120	15,504,403
	18	Total exp	enses. Add lines 13–17 (must equ	al Part IX, column (A), line 25)		43,512,6	552	47,048,060
	19	Revenue	less expenses. Subtract line 18 fro	om line 12		-800,6	566	3,233,274
\$ &					Beg	inning of Current Y	ear	End of Year
anc								
Net Assets or Fund Balances	20	Total ass	ets (Part X, line 16)			54,654,6	582	59,241,471
₹ ₹	21	Total liab	ilities (Part X, line 26)			3,652,3	323	4,909,135
zű	22	Net asset	ts or fund balances. Subtract line 2	1 from line 20		51,002,3	359	54,332,336
	rt II		ature Block					
				ned this return, including accompanyir Declaration of preparer (other than of				
any k			, 10 10 01 00, 0011 000, 0110 0011 p1000	Decidion of preparer (editor than or				The preparer rias
		\ *****				2222 24 22		
		B	↑ ure of officer			2020-06-30 Date		
Sign Here								
пеге	i		AM CREEDEN INT'L SEC. TREASURER or print name and title					
		 	Print/Type preparer's name	Preparer's signature	Date		PTIN	
Da:-			ing type preparer a name	Troparer a signature	2020-06-0	3 Check ☐ if F	201451145	;
Paid		<u> </u>	irm's name LEGACY PROFESSIONA	LS LLP	<u> </u>	self-employed Firm's EIN ► 32-	0043599	
Prej		#I	LEGIGITION ESSIONA			5 ZIN P 32-		
Use	Un	чу ғ	Firm's address ► 4 WESTBOOK CORPORA 700	ATE CENTER SUITE		Phone no. (312)	368-0500	
			WESTCHESTER, IL 601	1.54				
May t	he IR	S discuss	this return with the preparer show	vn above? (see instructions)			V	′es 🗆 No

Cat. No. 11282Y

Form **990** (2018)

Form	990 (2018)				Page 2
Pa	rt III Statement	of Program Service Acc	complishments		
	Check if Sche	dule O contains a response o	note to any line in this Part III		<u> </u>
1	Briefly describe the o	organization's mission:			
INTE	RNATIONAL LABOR UN	NION			
	Did the constitution				
2	-	· •	gram services during the year which w	ere not listed on	☐ Yes ☑ No
		ese new services on Schedule			□ fes ▼ No
3			o. gnificant changes in how it conducts, a	ny program	
•	services?	- ·	grimeant changes in now it conducts, a	my program	☐ Yes ☑ No
		ese changes on Schedule O.			□ les ⊡ llo
4			aplishments for each of its three larges	et program services, as measu	red by expenses
-	Section $501(c)(3)$ an		required to report the amount of gran		
4a	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
	See Additional Data				
4b	(Codo:	\/Fynansas.d	including graphs of t) (Bayanya d	
40	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4d		ces (Describe in Schedule O.)		D A	,
	(Expenses \$		grants of \$) (Revenue \$)
4e	Total program serv	vice expenses ▶			

Par	tiv Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	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	3	Yes	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			No
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets?	7		
	If "Yes," complete Schedule D, Part III 🐕	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
	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 🥞	11b	Yes	
	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 2	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX "	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
	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	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	_
		F	orm 990	(2018)

Par	Checklist of Required Schedules (continued)			
	Checkinst of Required Schedules (Continued)			
			Yes	No
3	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
6	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26	Yes	
7	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
8	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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
0	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
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Par	Statements Regarding Other IRS Filings and Tax Compliance Chack if Schodula O contains a response or note to any line in this Bort V			

		1		i					
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36							
37	37		No						
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O								
Pa	TV Statements Regarding Other IRS Filings and Tax Compliance								
	Check if Schedule O contains a response or note to any line in this Part V								
			Yes	No					
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 604								
	b Enter the number of Forms W-2G included in line 1a. <i>Enter -0-</i> if not applicable . 1b 0								

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

1c

	this return	2a		120			
b	If at least one is reported on line 2a, did the organization file all required federal employe				2b	Yes	
	Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (se	e insti	ructions)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the	year?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation	in Sch	nedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signa financial account in a foreign country (such as a bank account, securities account, or other				4a	Yes	
b	If "Yes," enter the name of the foreign country: ▶CA						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and	l Finar	cial Accounts (FBAR).	. L			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the				5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax	shelte	r transaction?		5b		No

4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country: ►CA			
5a	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		

	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c	No
А	If "Yes " indicate the number of Forms 8282 filed during the year		

oa	solicit any contributions that were not tax deductible as charitable contributions?	ба	INO
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form		

10a

10b

11a

11b

12b

13b

13c

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

Sponsoring organizations maintaining donor advised funds.

a Initiation fees and capital contributions included on Part VIII, line 12 . . .

against amounts due or received from them.)

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 501(c)(7) organizations. Enter:

11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders .

Enter the amount of reserves on hand .

If "Yes," complete Form 4720, Schedule O .

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

Gross income from other sources (Do not net amounts due or paid to other sources

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.

a Is the organization licensed to issue qualified health plans in more than one state?

which the organization is licensed to issue qualified health plans

Enter the amount of reserves the organization is required to maintain by the states in

14a Did the organization receive any payments for indoor tanning services during the tax year? .

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O.

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

7h

8

9a

9h

12a

13a

14a

14b

15

No

Nο

Form 990 (2018)

Form	990 (2018)			Page 6
Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "Na 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	o" respo	onse to i	lines 🗸
Se	ction A. Governing Body and Management			
		\longrightarrow	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a			
	If there are material differences in voting rights among members of the governing	1		
	body, or if the governing body delegated broad authority to an executive committee or			
	similar committee, explain in Schedule O.			
D	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more			
	members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	1
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to			
c	conflicts?	12b	Yes	
	Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b		
	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-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: WILLIAM CREEDEN 753 STATE AVE SUITE 565 KANSAS CITY, KS 66101 (913) 371-2640			

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax

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

INTERNATIONAL PRESIDEN (2) WILLIAM CREEDEN INTERNATIONAL SEC - TRI (3) TOM BACA INTERNATIONAL VICE PRE (4) JOSEPH MALONEY INTERNATIONAL VICE PRE (5) LAWRENCE J MCMANAI INTERNATIONAL VICE PRE (6) WARREN FAIRLEY INTERNATIONAL VICE PRE (7) JOHN FULTZ INTERNATIONAL VICE PRE (8) ARNIE STADNICK INTERNATIONAL VICE PRE	EAS	for related organizations below dotted line) 56.00 60.00	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
INTERNATIONAL PRESIDER (2) WILLIAM CREEDEN INTERNATIONAL SEC - TRI (3) TOM BACA INTERNATIONAL VICE PRE (4) JOSEPH MALONEY INTERNATIONAL VICE PRE (5) LAWRENCE J MCMANAI INTERNATIONAL VICE PRE (6) WARREN FAIRLEY INTERNATIONAL VICE PRE (7) JOHN FULTZ INTERNATIONAL VICE PRE (8) ARNIE STADNICK INTERNATIONAL VICE PRE	EAS	56.00 60.00									
INTERNATIONAL PRESIDEN (2) WILLIAM CREEDEN INTERNATIONAL SEC - TRI (3) TOM BACA INTERNATIONAL VICE PRE (4) JOSEPH MALONEY INTERNATIONAL VICE PRE (5) LAWRENCE J MCMANAI INTERNATIONAL VICE PRE (6) WARREN FAIRLEY INTERNATIONAL VICE PRE (7) JOHN FULTZ INTERNATIONAL VICE PRE (8) ARNIE STADNICK INTERNATIONAL VICE PRE	EAS	60.00			X				389,525	402,051	258,552
INTERNATIONAL SEC - TRI (3) TOM BACA INTERNATIONAL VICE PRE (4) JOSEPH MALONEY INTERNATIONAL VICE PRE (5) LAWRENCE J MCMANAI INTERNATIONAL VICE PRE (6) WARREN FAIRLEY INTERNATIONAL VICE PRE (7) JOHN FULTZ INTERNATIONAL VICE PRE (8) ARNIE STADNICK INTERNATIONAL VICE PRE	EAS								303,323	402,031	
INTERNATIONAL VICE PRE (4) JOSEPH MALONEY INTERNATIONAL VICE PRE (5) LAWRENCE J MCMANAI INTERNATIONAL VICE PRE (6) WARREN FAIRLEY INTERNATIONAL VICE PRE (7) JOHN FULTZ INTERNATIONAL VICE PRE (8) ARNIE STADNICK INTERNATIONAL VICE PRE		40.00			х				350,274	311,699	260,955
INTERNATIONAL VICE PRE (5) LAWRENCE J MCMANAI INTERNATIONAL VICE PRE (6) WARREN FAIRLEY INTERNATIONAL VICE PRE (7) JOHN FULTZ INTERNATIONAL VICE PRE (8) ARNIE STADNICK INTERNATIONAL VICE PRE	:S	40.00			х				349,663	0	236,237
INTERNATIONAL VICE PRE (6) WARREN FAIRLEY INTERNATIONAL VICE PRE (7) JOHN FULTZ INTERNATIONAL VICE PRE (8) ARNIE STADNICK INTERNATIONAL VICE PRE	ES - PAST	60.00			×				450,507	0	216,783
INTERNATIONAL VICE PRE (7) JOHN FULTZ INTERNATIONAL VICE PRE (8) ARNIE STADNICK INTERNATIONAL VICE PRE		38.00 2.00			х				340,265	0	232,681
INTERNATIONAL VICE PRE (8) ARNIE STADNICK INTERNATIONAL VICE PRE	 ES	70.00 30.00			х				354,464	47,070	234,448
INTERNATIONAL VICE PRE	 ES	40.00			x				358,804	0	230,508
	ES - NEW	40.00			x				169,579	0	98,862
(9) DALE A BRANSCUM II SPC. ASST. TO INTL PRES		40.00					x		230,580	0	162,914
(10) WILLIAM MARK VAND EXECUTIVE DIRECTOR - C		40.00					х		246,606	0	180,201
(11) JAMES SNOWDEN EXECUTIVE DIRECTOR - B:	iso	40.00					х		221,125	0	168,862
(12) BRIDGET MARTIN SPC. ASST. TO INTL PRES	-	40.00					х		233,159	22,313	156,107
(13) TYLER BROWN EXECUTIVE DIRECTOR - IS	SO	40.00					х		233,489	0	163,529
						1					

Form	990 (2018)													Page 8	
Pai	rt VII Section A. Officers, Direc	tors, Trustees	, Key	Emp	loye	es,	and	Higl	nest Co	mpensa	ted Employees	(cont	inued)		
	(A) Name and Title	(B) Average hours per week (list any hours		ne b	ox, ι in of	t che unles ficer	ss pers	son	Repo compo fro organiz	(D) ortable ensation m the ration (W		W-	(F) Estimated amount of other compensation from the organization and		
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/109	9-MISC)	2/1099-MISC	.)	organizat relat organiza	ed	
						\vdash									
						L									
c T	Sub-Total	•					>								
2	Total (add lines 1b and 1c) Total number of individuals (including of reportable compensation from the		to thos			bov:	e) who	o rec		928,040 re than \$	783,13	33		2,600,639	
													Yes	No	
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i> .										ed employee on	3		No	
4	For any individual listed on line 1a, is organization and related organization individual										om the	4	Yes		
5	Did any person listed on line 1a recei services rendered to the organization									tion or in	dividual for	5		No	
Se	ection B. Independent Contract	tors													
1	Complete this table for your five high from the organization. Report compe											mpen	sation		
	(A) Name and business address								(B) scription of services		(C Comper	nsation			
475 N	E & UHLIG NEW BROTHERHOOD BUILDING NAS CITY, KS 66101									LEGAL SE	RVICES			794,755	
	ED UNIONS									LANDLOR	D			141,574	
WASH	NEW YORK AVE NW HINGTON, DC 20006									A COOLUNT	ANT			112.500	
	CY PROFESSIONALS LLP STBROOK CORPORATE CTR SUITE 7									ACCOUNT	ANI			112,568	
	CHESTER, IL 60154														

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 3

		Statement of	Boycom									Page 9
Part	VIII	Statement of Check if Schedul		snonse or	note to any	line in th	is Part \/III					
		CHECK II SCHEGO	e o contains a re	sponse or	note to any	(A Total re	4)	Rel e> fu	(B) ated or cempt nction venue	b	(C) nrelated usiness evenue	(D) Revenue excluded from tax under sections 512 - 514
(0	16	Federated campaign	ns 1	a								
ints int	ı	b Membership dues	1	b								
Gra mo	,	c Fundraising events	1	с								
Ę,Ę	,	d Related organizatio	ns 1	d								
≣ੂ ਦੁ	,	e Government grants (co	ontributions) 1	e								
Sir	1	f All other contributions,		i								
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts no above	ot included 1	f								
들 돌	,	g Noncash contribution	ons included									
nd pu		in lines 1a - 1f:\$ h Total. Add lines 1a-	_1f	_	_							
<u> </u>		II Iotal. Add lines 1a	-11	• •	Business	c. 4. T						
an	22	MEMBERSHIP DUES			business		46,6	527,228	46,62	7,228		
ven		PRESCRIPTION DRUG RI	FBATES		+	900099	ϵ	508,580	60	8,580		
e 26	-	MEDICARE PART D SUBS			-	900099		.18,152	11	8,152		
rvic	_	RENTS FROM AFFILIATE			+	900099		49,285	4	9,285		
Se	u				+	531190				-+		
Program Service Revenue	e											
Prog		All other program se			47,4	03,245		•				
		Total. Add lines 2a-2		<u>►</u>				1				
		Investment income (ir similar amounts) .	ncluaing aividend	s, interest	, and other >		1,441,008	3				1,441,008
	4	Income from investme	ent of tax-exemp	t bond pro	ceeds							
	5	Royalties			. •	<u> </u>	124,90	2				124,902
	6a	Gross rents	(i) Real	(11)	Personal	1						
			246,4									
	b	Less: rental expenses	102,4	172								
	c	c Rental income or (loss) 144,013 d Net rental income or (loss)				1						
	c				•	1	144,013	3			-3,091	147,104
			(i) Securities		i) Other						·	, , , , , , , , , , , , , , , , , , ,
	7a	Gross amount from sales of	3,143,584		2,826,265							
		assets other than inventory										
	h	Less: cost or				1						
		other basis and sales expenses	3,181,3	311	1,885,821							
		Gain or (loss)	-37,	'27	940,444]						
		Net gain or (loss) .			>		902,71	7				902,717
<u>e</u>	oa	Gross income from for the control of	undraising events of									
enr		contributions reporte See Part IV, line 18	ed on line 1c).	a								
Rev	b	Less: direct expenses		ь		1						
Other Revenue	c	Net income or (loss)	from fundraising	events .								
Oth	9a	Gross income from g See Part IV, line 19										
		,		а								
		Less: direct expense		b								
		Net income or (loss)		ivities .	• •	1		-				
	100	Gross sales of invent returns and allowanc	ces									
				a	25,106	1						
		Less: cost of goods s		b	0]	25,106	5	25,106			
		Net income or (loss) Miscellaneous			ness Code		,					
	11	aOTHER INCOME			900099	1	240,34	3	240,343			
										<u> </u>		
	b	·										
	C											
		All other revenue .						1				
		Total. Add lines 11a			. •							
		. Total revenue. See					240,343					
					• •		50,281,334	4	47,668,694		-3,091	2,615,731

For	m 990 (2018)				Page 10
	Part IX Statement of Functional Expenses tion 501(c)(3) and 501(c)(4) organizations must complete all co	-			_
	Check if Schedule O contains a response or note to any	line in this Part IX .			<u> 🗆</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	413,604			
2	2 Grants and other assistance to domestic individuals. See Part IV, line 22	47,289			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	36,914			
4	Benefits paid to or for members	152,944			
5	Compensation of current officers, directors, trustees, and key employees	4,657,519			
6	6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	7 Other salaries and wages	11,201,776			
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	7,088,025			
9	Other employee benefits	5,821,104			
10	Payroll taxes	2,124,482			
11	. Fees for services (non-employees):				
	a Management				
	b Legal	728,981			
	c Accounting	82,532			
	d Lobbying				
	e Professional fundraising services. See Part IV, line 17				
	f Investment management fees	97,362			
	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,600,750			
12	Advertising and promotion	84,379			
13	Office expenses	1,552,872			
14	Information technology	643,504			
15	Royalties				
16	Occupancy	1,118,066			
17	' Travel	47,656			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,046,865			
20) Interest	74,153			
21	Payments to affiliates	919,728			
22	Depreciation, depletion, and amortization	704,710			
23	Insurance	507,392			
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a OFFICER AND REPRESENTAT	4,230,619			
	b ADMINISTRATIVE EXPENSES	229,280			
	c ORGANIZING EXPENSES	201,117			
	d MAINTENANCE FEES	164,755			
	e All other expenses	469,682			
25	Total functional expenses. Add lines 1 through 24e	47,048,060			
26	is Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				
	Sheek here F III in following 501 50 2 (A56 550 720).				1

Form 990 (2018)

Inventories for sale or use .

b Less: accumulated depreciation

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

Prepaid expenses and deferred charges

basis. Complete Part VI of Schedule D

Intangible assets

Other assets. See Part IV, line 11 . .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons. Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24).

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

Organizations that do not follow SFAS 117 (ASC 958), check here > \quad \text{and complete lines 30 through 34.}

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

Retained earnings, endowment, accumulated income, or other funds

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25 .

10a Land, buildings, and equipment: cost or other

Investments—publicly traded securities .

Investments—other securities. See Part IV, line 11 .

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

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

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

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

Investments-program-related. See Part IV, line 11

8

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10c

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27 28

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31 32

33

34

10,319,376

24,093,817

11.287.119

54.654.682

800.000

489.356

3.652.323

51.002.359

51,002,359

54,654,682

2,362,967

Page **11**

13,312,857

22,061,000

11.326.099

59.241.471

2,300,000

2,133,000

476.135

4.909.135

54.332.336

54,332,336

59,241,471

Form **990** (2018)

		(A) Beginning of year		(B) End of year
1	Cash-non-interest-bearing	1,104,304	1	6,755,549
2	Savings and temporary cash investments	3,850,066	2	2,785,966
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	4,000,000	6	3,000,000
7	Notes and loans receivable, net		7	

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

	4	,	
•	۰	-	
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33

34

Liabilities 22

Fund Balance

Assets or 30

Net

10a

10b

19,062,892

5,750,035

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

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

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

3a

3h

No

Form 990 (2018)

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

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

Software Version:

EIN: 48-6031851

Name: INTERNATIONAL BROTHERHOOD OF BOILERMAKERS IRON SHIP BUILDERS

Form 990 (2018)

WAGES, AND SIMILAR BENEFITS.

Form 990, Part III, Line 4a:

SCHEDULE C (Form 990 or 990-

Department of the Treasury

EZ)

DLN: 93493182013020

OMB No. 1545-0047

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 for instructions and the latest information.

Open to Public Inspection

nterna	al Revenue Service					
		on Form 990, Part IV, Line 3, or Form omplete Parts I-A and B. Do not comple		e 46 (Political Campaign	Activities), the	n
• 5	Section 501(c) (other than section	501(c)(3)) organizations: Complete Pa		Do not complete Part I-B.		
	Section 527 organizations: Compl		- 000 EZ D+\// I:	47 //		
		on Form 990, Part IV, Line 4, or Form at have filed Form 5768 (election unde				3
• 5	Section 501(c)(3) organizations th	at have NOT filed Form 5768 (election	under section 501(h))): Complete Part II-B. Do r	not complete Pa	art II-A.
		on Form 990, Part IV, Line 5 (Proxy T	Гах) (see separate ii	nstructions) or Form 990-	-EZ, Part V, lin	e 35 c
	xy Tax) (see separate instructio Section 501(c)(4), (5), or (6) orgar					
Nar	me of the organization			Employer iden	tification num	ıber
	ERNATIONAL BROTHERHOOD OF LERMAKERS IRON SHIP BUILDERS			48-6031851		
Par	t I-A Complete if the org	anization is exempt under sect	tion 501(c) or is		zation.	
1	Provide a description of the organization of the organization ("political campaign activities")	anization's direct and indirect political c	campaign activities in	Part IV (see instructions f	or definition of	
2	Political campaign activity exper	nditures (see instructions)		>	\$	603,561
3		npaign activities (see instructions)				
Par	t I-B Complete if the org	anization is exempt under sect	tion 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 se	ection 4955 tax, did it file Form 4720 fo	or this year?		☐ Yes	□ No
4a	Was a correction made?				☐ Yes	□ No
b	If "Yes," describe in Part IV.		_			
Par	t I-C Complete if the org	anization is exempt under sect	tion 501(c), exce	ept section 501(c)(3)	•	
1		nded by the filing organization for section	•		\$	
2		rganization's funds contributed to other			\$	
3	Total exempt function expendito	ures. Add lines 1 and 2. Enter here and	on Form 1120-POL,	line 17b ▶	\$	
4	Did the filing organization file F e	orm 1120-POL for this year?			☐ Yes	□ No
5	organization made payments. For of political contributions receive	d employer identification number (EIN) or each organization listed, enter the a d that were promptly and directly deliv ttee (PAC). If additional space is neede	mount paid from the vered to a separate p	filing organization's funds. olitical organization, such a	. Also enter the	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount	
				filing organization's funds. If none, enter	contributions and promp	
				-0	directly deliv	
					separate p	
					organization enter -	
(1)	L BROTHERHOOD OF BOILERMAKERS	753 STATE AVE SUITE 565	73-1642974			31,800
	SLATIVE EDUCATION FUND	KANSAS CITY, KS 66101				
2						
3						
4						
5						
		+			1	

Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Page 2

A	Check If the filing organization belongs to a expenses, and share of excess lobby		st in Part IV each a	affiliated group m	ember's name, a	address, EIN,
В	Check ▶ ☐ if the filing organization checked box	· ,	provisions apply.			
	Limits on Lobbyir (The term "expenditures" mean	ng Expenditures	,		a) Filing anization's totals	(b) Affiliated group totals
 1a	Total lobbying expenditures to influence public opi	inion (grass roots lobbying	ı)			
b	Total lobbying expenditures to influence a legislati	ive body (direct lobbying)				
c	Total lobbying expenditures (add lines 1a and 1b)					
d	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (add lines 1c a	and 1d)				
f	Lobbying nontaxable amount. Enter the amount fro	om the following table in	both			
	If the amount on line 1e, column (a) or (b) is	s: The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on line	e 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	excess over \$500,00	0.		
	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 6	excess over \$1,500,0	00.		
	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	r -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 section 4911 tax for this year?					☐ Yes ☐ No
	(Some organizations that made	Averaging Period Un a section 501(h) ele e the separate instru	ction do not ha	ave to comple		five
	Lobbying Ex	penditures During 4	-Year Averagiı	ng Period	T	
	Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					

	dule C (Form 990 or 990-EZ) 2018 rt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT file	ed		Pa	age 3
- 6	Form 5768 (election under section 501(h)).				
or e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)		(b)	
ctiv	ity.	Yes	No	Amou	ınt
L	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:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), o	r section		
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	Yes	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?				No
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes.")(6
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
C	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does	1			

the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see

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

PART I-A, LINE 1: THE INTERNATIONAL PROVIDES INFORMATION TO ITS MEMBERS ABOUT ELECTORAL CAMPAIGNS AND ISSUES, ENCOURAGES ITS MEMBERS TO PARTICIPATE IN THE ELECTORAL PROCESS, AND COLLABORATES WITH OTHER LABOR ORGANIZATIONS AND ALLIED GROUPS ON ELECTORAL MATTERS, ALL IN ORDER TO SERVE THE BEST INTERESTS OF THE ORGANIZATION'S MEMBERS, THEIR FAMILIES AND ALL WORKING PEOPLE. THE INTERNATIONAL ALSO SPONSORS A SEPARATE SEGREGATED FUND THAT IS REGISTERED AS

ACCORDANCE WITH RESPECTIVE FEC AND IRS REGULATIONS.

A FEDERAL POLITICAL COMMITTEE WITH THE FEDERAL ELECTION COMMISSION (FEC) AND A SEPARATE SEGREGATED FUND THAT IS REGISTERED AS A POLITICAL ORGANIZATION WITH THE INTERNAL REVENUE

4

5

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

DLN: 93493182013020

OMB No. 1545-0047

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Open to Public

Internal Revenue Service

(Form 990)

Department of the Treasury ▶ Go to www.irs.gov/Form990 for the latest information. Inspection Name of the organization **Employer identification number** INTERNATIONAL BROTHERHOOD OF BOILERMAKERS IRON SHIP BUILDERS 48-6031851 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year Number of conservation easements on a certified historic structure included in (a) 20 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? □ _{Yes} Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 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. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: 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:

Par	3111	Organizations Ma	aintaining Col	lections o	of Art, H	listori	cal T	reasi	ures, or	r Other	Similar As	ssets (coi	ntinued)
3		g the organization's acq s (check all that apply):		n, and other	records,	check	any of	the fo	ollowing t	hat are a	significant (use of its c	ollection
а		Public exhibition				d		Loan	or excha	ange pro	grams		
b		Scholarly research				e		Othe	er				
С		Preservation for future	e generations										
4	Provi Part :	de a description of the		lections and	l explain l	how the	ey furtl	ner th	e organiz	ation's e	xempt purpo	se in	
5		ng the year, did the org ts to be sold to raise fur										☐ Yes	□ No
Pai	rt IV	Escrow and Cust Complete if the or X, line 21.			" on For	m 990	, Part	IV, I	ine 9, or	r report	ed an amou	ınt on Foi	rm 990, Part
1a		e organization an agent ded on Form 990, Part I										Yes	□ No
b	If "Y€	es," explain the arrange	ement in Part XIII	and comple	ete the fo	llowing	table:				А	mount	
С	Begir	nning balance								1c			
d	Addit	tions during the year .								1d			
е	Distri	ibutions during the year	r							1e			
f	Endir	ng balance							[1f			
2a	Did t	he organization include	an amount on Fo	rm 990 Par	rt X line	21 for	escrow	or cu	Istodial a	ccount li	ahility?	□ ves	 □ No
		es," explain the arrange									•	_	
	rt V	Endowment Fund											
1.		Lildowillent Full	us. Complete ii	(a)Curren			rior yea			ears back			e)Four years back
1a	Beginn	ning of year balance .		(=/=====	,	(-)-	, , , , , , ,		(-) /		(,		, ,
b	Contrib	butions											-
С	Net inv	vestment earnings, gair	ns, and losses										
d	Grants	or scholarships											
е		expenditures for facilition	es										
f	Admin	istrative expenses .											
g	End of	year balance											_
2		de the estimated perce				(line 1	g, colu	mn (a	ı)) held a	s:			_
а	Board	d designated or quasi-e	ndowment 🟲										
b		anent endowment >											
С	Temp	oorarily restricted endo	wment >										
		percentages on lines 2a	***************************************		0%.								
3a		here endowment funds nization by:	not in the posses	sion of the	organizat	ion tha	t are h	eld ar	nd admini	istered fo	or the		Yes No
	(i) u	nrelated organizations					•					3a(i	
b		related organizations . es" on 3a(ii), are the re		 ns listed as r	equired o	 on Sche	 dule R	? .	• •			3a(i 3b	
4	Desci	ribe in Part XIII the inte	ended uses of the	organizatio	n's endov	wment 1	funds.						<u> </u>
Pai	rt VI												
	Descr	Complete if the or iption of property	ganization ansv (a) Cost or oth (investme	ner basis	" on For (b) Cost						rm 990, Pa		Book value
			`	•									
								36,683					4,286,683
	Buildin	-					9,79	90,156	1		2,211,572		7,578,584
С	Leaseh	nold improvements											
d	Equipn	ment]		4,28	32,964	1		3,208,964		1,074,000

373,590

13,312,857

329,499

703,089

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

	Investments—Other Securities. Complete if the See Form 990, Part X, line 12.	e organization ans	swered "Yes" on Form	n 990, Part IV, line 11b.
	(a) Description of security or category (including name of security)	(b) Book value		ethod of valuation: nd-of-year market value
(1) Financial o	derivatives		2031 01 01	d of year market value
(3) Other	eld equity interests			
(A) INVESTME	INT IN BANK STOCK	5,551,86	9	С
(B) ACQUIRED	O REAL ESTATE	4,388,66	4	С
(C) AFL-CIO H	OUSING INVESTMENT TRUST	1,385,56	6	С
(E)				
(F)				
(G)				
(H)				
	(b) must equal Form 990, Part X, col. (B) line 12.)	11,326,09	9	
	Investments—Program Related. Complete if the organization answered 'Yes' on Fo	orm 990, Part IV,	line 11c. See Form 9	90, Part X, line 13.
	(a) Description of investment	(b) Book valu		ethod of valuation: nd-of-year market value
(1)				,
(2)				
(3)				
(4)				
(5)				
(6)			1	
(7)				
(8)			1	
(9)				
	(b) must equal Form 990, Part X, col.(B) line 13.)	•		
	Other Assets. Complete if the organization answered	'Yes' on Form 990, I	Part IV, line 11d. See Fo	
(1)	(a) Description			(b) Book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col.(B) line 15.)			•
Part X	Other Liabilities. Complete if the organization ar See Form 990, Part X, line 25.			e 11e or 11f.
(1) Federal inc	(a) Description of liability	(b)	Book value	
PAYROLL WITH	HHOLDINGS		445,227	
CONSTITUTIO (3)	NAL OVER / SHORT		30,908	
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	(b) must equal Form 990, Part X, col.(B) line 25.)	<u> </u>	476,135	
2. Liability for	uncertain tax positions. In Part XIII, provide the text of	the footnote to the	organization's financial s	
organization's	liability for uncertain tax positions under FIN 48 (ASC 74	40). Check here if th	ie text of the footnote hi	as been provided in Part XIII 🗹

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

Page 4

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018

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.

Total expenses and losses per audited financial statements 1 47,053,170 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities . . 2a 2b Prior year adjustments 2c C

2d 102,472 Other (Describe in Part XIII.) . . .

d

Add lines 2a through 2d . 2e 102,472 е 3 Subtract line 2e from line 1 3 46,950,698 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:

4a Investment expenses not included on Form 990, Part VIII, line 7b . . . 97.362

4b b Add lines **4a** and **4b** 4c 97.362 5 5 47.048.060

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

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part

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

See Additional Data Table

	Page 5
Information (continued)	
Explanation	

Schedule D (Form 990) 2018

Additional Data

Software ID: Software Version:

> **EIN:** 48-6031851 INTERNATIONAL BROTHERHOOD OF Name:

BOILERMAKERS IRON SHIP BUILDERS

Supplemental Information Return Reference Explanation

PART X, LINE 2: THE INTERNATIONAL BROTHERHOOD IS REQUIRED TO EVALUATE ITS TAX POSITIONS AND DISCLOSE THE A MOUNT OF TAX LIABILITY IF THE INTERNATIONAL BROTHERHOOD HAS TAKEN AN UNCERTAIN POSITION TH AT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY TAX AUTHORITIES. THE IN TERNATIONAL BROTHERHOOD IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS; HOWEVER, THE

RE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS.

supplemental Information						
Return Reference	Explanation					
PART XI, LINE 2D - OTHER ADJUSTMENTS:	GAIN ON CANADIAN CURRENCY CONVERSION 96,703.					

upplemental Information								
Return Reference	Explanation							
PART XI, LINE 4B - OTHER ADJUSTMENTS:	RENTAL EXPENSES -102,472.							

upplemental Information								
Return Reference	Explanation							
PART XII, LINE 2D - OTHER ADJUSTMENTS:	RENTAL EXPENSES 102,472.							

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493182013020 OMB No. 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2018 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. **Open to Public** ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Treasury Inspection Internal Revenue Service **Employer identification number** Name of the organization INTERNATIONAL BROTHERHOOD OF BOILERMAKERS IRON SHIP BUILDERS 48-6031851 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Part I Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance 2 outside the United States. Activites per Region. (The following Part I. line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, agents, region (by type) (e.g., program service, describe for and investments and independent fundraising, program specific type of in region region service(s) in region contractors in services, investments, grants region to recipients located in the region) CANADA 2 11 ACTIVITIES TO PROMOTE ACTIVITIES TO PROMOTE 4,431,469 AND PROTECT THE AND PROTECT THE INTERESTS OF INTERESTS OF CANADIAN CANADIAN MEMBERS BY MEMBERS BY BARGAINING BARGAINING COLLECTIVELY. COLLECTIVELY. 4,431,469 11 3a Sub-total . b Total from continuation sheets to Part I . c Totals (add lines 3a and 3b) 11 4,431,469 (a) Name of

organization

and EIN (if

Schedule F (Form 990) 2018

assistance

Page 2

(book, FMV,

disbursement

ORGANIZATION

assistance

applicable)						appraisal, other)
		TO SUPPORT CARBON CAPTURE AND STORAGE RESEARCH.	. ,	DIRECT PAYMENT TO ORGANIZATION	N/A	N/A
	NORTH AMERICA	CHARITABLE	7.417	DIRECT PAYMENT TO	ln/a	N/A

PROMOTE GOODWILL ON BEHALF OF THE INTERNATIONAL BROTHERHOOD. CHARITABLE 5.811 DIRECT PAYMENT TO EUROPE (INCLUDING IN/A ICELAND & CONTRIBUTION TO ORGANIZATION

CONTRIBUTION TO

N/A GREENLAND) PROMOTE GOODWILL ON BEHALF OF THE

INTERNATIONAL BROTHERHOOD.

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as taxexempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Гуре of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other
SCHOLARSHIPS	CANADA	17	14,528	DIRECT PAYMENT TO UNIVERSITY		N/A	N/A

Sche	dule F (Form 990) 2018		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	_	_
		∐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign		
	Corporations. (see Instructions for Form 5471)	Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	☐Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	(see instructions for Form 6865)	☐Yes	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713; don't file with Form 990)	☐ Yes	✓ No

Schedule F ((Form 990) 2018	Page
Part V	amounts of investments vs.	uired by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method expenditures per region); Part II, line 1 (accounting method); Part III (accounting nn (c) (estimated number of recipients), as applicable. Also complete this part to provide
	ReturnReference	Explanation
•		

(Form 990)

Department of the

Internal Revenue Service

Treasury

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 <u>www.irs.gov/Form990</u> for the latest information.

OMB No. 1545-0047

DLN: 93493182013020

Open to Public Inspection

lame of the organization						Employer identifi	cation number
NTERNATIONAL BROTHERHOOD BOILERMAKERS IRON SHIP BUILI						48-6031851	
		and Assistance				-	
Does the organization mair the selection criteria used t	to award the grants	or assistance?				ce, and	☑ Yes ☐ No
2 Describe in Part IV the organical Part II Grants and Other A	<u>'</u>				raanization answered "Ves	" on Form 990 Part IV lin	a 21 for any recipient
			ditional space is needed.	ents: Complete il tile o	rgamzation answered res	Off Form 990, Part IV, IIII	e 21, for any recipient
(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						🟲	13
3 Enter total number of other							
or Paperwork Reduction Act Notic	e, see the Instructio	ns tor Form 990.		Cat. No. 5005!	٦٢	Sc	hedule I (Form 990) 2018

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

Schedule I (Form 990) 2018

THE USE OF DONATIONS AND GRANTS, ALL RECORDS REGARDING DISBURSEMENT OF FUNDS ARE MAINTAINED AT THE INTERNATIONAL'S OFFICE.

(5) (6)

Return Reference

PART I, LINE 2:

Explanation

Additional Data

AMERICAN IRISH HISTORICAL

SOCIETY

991 FIFTH AVENUE NEW YORK, NY 10028 13-1656636

		Software ID	:				
		Software Version	:				
		EIN	: 48-6031851				
Name: INTERNATIONAL BROTHERHOOD OF BOILERMAKERS IRON SHIP BUILDERS 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
ADOPT-A-NATIVE-ELDER 328 W GREGSON AVENUE SALT LAKE CITY, UT 84115	87-0490211	501(C)(3)	26,000				CHARITABLE CONTRIBUTION

10,000

CHARITABLE

CONTRIBUTION

501(C)(3)

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 94-0402674 501(C)(5) 15.000 CHARITABLE CENTRAL LABOR COUNCIL OF CONTRA COSTA COUNTY AFL-I CONTRIBUTION CIO

1333 PINE STREET SUITE E
MARTINEZ, CA 94553

COALITION OF LABOR UNION
WOMEN
815 16TH STREET NW SECOND

CHARITABLE
CONTRIBUTION

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

FLOOR

WASHINGTON, DC 20006

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government ECONOMIC POLICY INSTITUTE 52-1368964 501(C)(3) 20.000 CHARITABLE UTION

1333 H STREET NW SUITE 300 WASHINGTON, DC 20005		, , , ,	,		CONTRIBUTION
HELMETS TO HARDHATS 815 16TH STREET NW SUITE	43-1972568	501(C)(3)	15,000		CHARITABLE CONTRIBUTION

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

WASHINGTON, DC 20006

600

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) LABOR HERITAGE 52-1313015 501(C)(3) 10.000 CHARITABLE FOUNDATION I CONTRIBUTION 815 16TH STREET NW WASHINGTON, DC 20006

CHARITABLE

I CONTRIBUTION

7.500

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

501(C)(3)

LABOR OF LOVE INTERNATIONAL INC

5640 WARD ROAD ARVADA, CO 08002 65-0865370

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 52-1338892 501(C)(3) 25.000 CHARITABLE NATIONAL DEMOCRATIC CONTRIBUTION INSTITUTE

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

ALE MACCACHIICETTO AVENUE

1501 LEE HIGHWAY SUITE 202 ARLINGTON, VA 22209

COMMITTEE

NW 8TH FLOOR WASHINGTON, DC 20001					
NATIONAL MAINTENANCE AGREEMENT POLICY	52-1289622	501(C)(6)	5,500		CHARITABLE CONTRIBUTION

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) 05 4546066 E04(6)(3) 40 000 CLIABITABLE

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

BLACK ELECTED LEGISLATIVE WOMEN 20 F STREET NW SUITE 700 WASHINGTON, DC 20001	95-4546966	501(C)(3)	10,000		CONTRIBUTION
NATIONAL WRESTLING HALL	23-7233488	501(C)(3)	10,000		CHARITABLE

CONTRIBUTION

NATIONAL WRESTLING HALL OF FAME 405 W HALL OF FAME AVENUE

STILLWATER, OK 74075

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 53-0025755 501(C)(5) 7.500 CHARITABLE NORTH AMERICA'S BUILDING TRADES UNIONS I CONTRIBUTION 815 16TH STREET NW WASHINGTON, DC 20006 94-3335350 501(C)(3) 20.000 CHARITABLE

I CONTRIBUTION

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

ROSIE THE RIVETER TRUST 440 CIVIC CENTER PLAZA

RICHMOND, CA 94801

SUITE 221

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 80-0171936 501(C)(3) 10.000 CHARITABLE SHOOT FOR A CURE 1625 MARINA WAY I CONTRIBUTION

CHARITABLE

ICONTRIBUTION

49.580

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

501(C)(3)

BRENTWOOD, CA 94513 UNION SPORTSMEN'S ALLIANCE

4800 NORTHFIELD LANE SPRING HILL, TN 37174 27-2345009

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 91-0462125 501(C)(5) 25.000 CHARITABLE WASHINGTON STATE BUILDING & CONSTRUCTION I CONTRIBUTION TRADE COUNCIL

906 COLUMBIA STREET SW SUITE 107 OLYMPIA, WA 98501 WORKING AMERICA 20-2035052 10.000

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

WASHINGTON, DC 20006

501(C)(3) CHARITABLE EDUCATION FUND I CONTRIBUTION 815 16TH STREET NW

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Dat	ta -	DLN: 934	19318	32013	020
Sch	edule J	Co	mpensat	tion Information	00	1B No.	1545-0	0047
(For	n 990)	For certain Office	rs, Directors, 1	Trustees, Key Employees, and Hig	hest			
		► Complete if the org		ated Employees wered "Yes" on Form 990, Part IV,	line 23.	20	18	}
	64.7		➤ Attacl	h to Form 990. r instructions and the latest inforn			to Pul	
•	tment of the Treasury al Revenue Service	P do to <u>www.irs.go</u>	<u>V/F01111990</u> 101	i ilisti uctions and the latest illioni	iation.		ectio	
	ne of the organiza ERNATIONAL BROTH				Employer identificat	ion nu	ımber	
	LERMAKERS IRON S				48-6031851			
Pa	rt I Questi	ons Regarding Compensat	tion					
10	Chack the appro	prints boy(os) if the organization	nrovidad any o	of the following to or for a person listed	d on Form		Yes	No
1a				ny relevant information regarding thes				
	✓ First-class	or charter travel		Housing allowance or residence for	personal use			
		companions		Payments for business use of persor				
		nification and gross-up payments		Health or social club dues or initiation				
	☐ Discretion	nary spending account	Ш	Personal services (e.g., maid, chauf	feur, chef)			
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						Yes	
2				or allowing expenses incurred by all		2	Yes	
	directors, truste	es, officers, including the CEO/E	xecutive Directo	or, regarding the items checked in line	:la?			
3				ed to establish the compensation of th	ne			
				not check any boxes for methods CEO/Executive Director, but explain i	n Part III.			
		-						
		ation committee ent compensation consultant	H	Written employment contract Compensation survey or study				
		of other organizations	<u> </u>	Approval by the board or compensa:	tion committee			
_		-		,				
4	related organiza		990, Part VII, Se	ection A, line 1a, with respect to the fi	ling organization or a			
а	Receive a sever	ance payment or change-of-cont	rol payment? .			4a		No
b		• • •		ilified retirement plan?		4b	Yes	
c				ensation arrangement?		4c	Yes	
	If "Yes" to any o	of lines 4a-c, list the persons and	I provide the app	plicable amounts for each item in Part	III.			
	Only 501(c)(3), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-0				
5			_	the organization pay or accrue any				
		ontingent on the revenues of:		,				
a	The organization	1?				5a		
b						5b		
	•	5a or 5b, describe in Part III.						
6		ed on Form 990, Part VII, Section ontingent on the net earnings of		the organization pay or accrue any				
а	The organization	1?				6a		
b						6b		
_	•	6a or 6b, describe in Part III.						
7	For persons liste payments not d	ed on Form 990, Part VII, Section escribed in lines 5 and 6? If "Yes	n A, line 1a, did ,," describe in Pa	the organization provide any nonfixed art III	1 · · · ·	7		
8				ured pursuant to a contract that was s section 53.4958-4(a)(3)? If "Yes," de	escribe			
				· · · · · · · · · · · · · · · ·		8		
9	If "Yes" on line	8, did the organization also follo	w the rebuttable	e presumption procedure described in	Regulations section	<u> </u>		
						9		
For F	Paperwork Redu	iction Act Notice, see the Ins	tructions for Fo	orm 990. Cat. No. 5	0053T Schedule J	(Forn	1990)	2018

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.

instructions, on row (ii). Do not list any individuals that are not listed on Form 99 Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the to	90, otal	, Part VII. I amount of For	m 990, Part VII, Se	ection A, line 1a, ar	oplicable column ([)) and (E) amoun	ts for that indi	vidual.	
(A) Name and Title			kdown of W-2 and/c compensation	or 1099-MISC	(C) Retirement and other	(D) Nontaxable benefits	columns	(F) Compensation in	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990	
See Additional Data Table									
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	\exists								
	\exists								
	\dashv			<u> </u>				<u> </u>	
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Seriedates (1 Sitti 550) 2010	rage 5				
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				
	FIRST-CLASS TRAVEL OR CHARTER TRAVEL. DURING CALENDAR YEAR 2018, THE IBB ALLOWED FOR ALL MEMBERS OF THE INTERNATIONAL EXECUTIVE COUNCIL TO TRAVEL FIRST CLASS. THE FIRST-CLASS TRAVEL IS NOT CONSIDERED TAXABLE COMPENSATION TO THOSE INDIVIDUALS REPORTED. HEALTH OR SOCIAL CLUB FEES. DURING CALENDER YEAR 2018, THE INTERNATIONAL PAID HEALTH CLUB MEMBERSHIP FEES FOR INTERNATIONAL VICE PRESIDENT LAWRENCE MCMANAMON. THE MEMBERSHIP FEES FOR LAWRENCE MCMANAMON ARE CONSIDERED TAXABLE COMPENSATION AND ARE INCLUDED IN SCHEDULE J, PART II, COLUMN B (III). TAX INDEMNIFICATION AND GROSS UP PAYMENTS. DURING CALENDAR YEAR 2018, THE INTERNATIONAL INDEMNIFIED PERSONAL USE OF THE				

WERE TREATED AS TAXABLE COMPENSATION AND ARE INCLUDED IN SCHEDULE J, PART II, COLUMN B (III).

INTERNATIONAL'S AUTOMOBILES FOR ALL MEMBERS OF THE INTERNATIONAL EXECUTIVE COUNCIL AND CERTAIN OTHER EMPLOYEES. THESE INDEMNIFICATIONS

Page 3

Schedule J (Form 990) 2018

Return Reference	Explanation
PART I, LINES 4B-C	PART I, LINE 4B ALL MEMBERS OF THE INTERNATIONAL EXECUTIVE COMMITTEE AS WELL AS INTERNATIONAL SECRETARY TREASURER WILLIAM CREEDEN PARTICIPATE IN A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN. UNDER THIS PLAN, AMOUNTS ARE ALLOCATED ANNUALLY TO INDIVIDUAL ACCOUNT BALANCES. INTEREST IS ALSO CREDITED ANNUALLY. UPON RETIREMENT THE PARTICIPANT IS PAID THE BALANCE OF THEIR INDIVIDUAL ACCOUNT. THIS AMOUNT IS PAID OUT OF THE INTERNATIONAL'S GENERAL ASSETS. DURING THE 2018 CALENDAR YEAR, ALLOCATIONS INTO INDIVIDUAL ACCOUNT BALANCES TOTALED \$129,500. THERE WERE NO DISTRIBUTIONS DURING 2018 UNDER THE TERMS OF THIS PLAN TO THE PARTICIPANTS. PART I, LINE 4C CERTAIN
	MEMBERS OF THE INTERNATIONAL EXECUTIVE COMMITTEE AS WELL AS THE INTERNATIONAL SECRETARY TREASURER SERVE ON THE BOARD OF DIRECTORS OF BROTHERHOOD BANCSHARES, INC. (THE "HOLDING COMPANY") AND BANK OF LABOR (THE "BANK"), RELATED ORGANIZATIONS. ONE OF THE INTERNATIONAL'S HIGHLY-COMPENSATED EMPLOYEES IS ALSO A SHARED EMPLOYEE WITH THE BANK. THESE INDIVIDUALS ARE NEWTON JONES, WILLIAM CREEDEN, TRUMAN WARREN FAIRLEY JR., AND BRIDGET MARTIN. THESE DIRECTORS AND EMPLOYEE PARTICIPATE IN A LONG TERM DEFERRED COMPENSATION PLAN OFFERED BY THE HOLDING COMPANY AND THE BANK REFERRED TO AS THE BANK OF LABOR STOCK INCENTIVE COMPENSATION PLAN (THE "PLAN"). UNDER THIS
	ARRANGEMENT, AMOUNTS ARE ALLOCATED ANNUALLY TO EACH PARTICIPANT'S INDIVIDUAL ACCOUNT IN THE PLAN. THESE ACCOUNT BALANCES APPRECIATE AND DEPRECIATE IN VALUE BASED ON THE HOLDING COMPANIES BOOK VALUE, WHICH IS DETERMINED ANNUALLY. WHEN A PARTICIPANT SEPARATES FROM SERVICE FROM THE HOLDING COMPANY AND THE BANK, THE PARTICIPANT IS PAID THE BALANCE OF THEIR INDIVIDUAL ACCOUNT FROM THE ASSETS OF THE PLAN. DURING THE 2018 CALENDAR YEAR, ALLOCATIONS INTO INDIVIDUAL ACCOUNT BALANCES TOTALED \$29,000. THERE WERE NO DISBURSEMENTS TO THESE INDIVIDUALS DURING 2018.

I (Form 990) 2018

(A) Name and Title

INTERNATIONAL VICE PRES

INTERNATIONAL VICE PRES

ARNIE STADNICK

DALE A BRANSCUM II

SPC. ASST. TO INTL PRES

WILLIAM MARK VANDIVER

EXECUTIVE DIRECTOR -

EXECUTIVE DIRECTOR -

SPC. ASST. TO INTL PRES

EXECUTIVE DIRECTOR -

JAMES SNOWDEN

BRIDGET MARTIN

TYLER BROWN

- NEW

CSP

BSO

ISO

Software ID:

Software Version:

(B) Breakdown of W-2 and/or 1099-MISC compensation

(ii)

Bonus & incentive

EIN: 48-6031851

Name: INTERNATIONAL BROTHERHOOD OF

(iii)

Other reportable

BOILERMAKERS IRON SHIP BUILDERS

(C) Retirement and

other deferred

compensation

91,924

134,685

151,267

136,515

125,586

5,000

136,697

(D) Nontaxable

benefits

6,938

28,229

28,934

32,347

25,521

26,832

(E) Total of columns

(B)(i)-(D)

268,441

393,494

426,807

389,987

384,266

27,313

397,018

(F) Compensation in

column (B)

reported as deferred on

0

0

Form 990	, Schedule J,	, Part II	 Officers 	, Directors,	, Trustees,	, Key	Emplo	yees	, and H	łigh	est Comp	oensate	d Emplo	yees

			compensation	compensation				prior Form 990
NEWTON B JONES INTERNATIONAL	(i)	384,459	0	5,066	197,771	35,821	623,117	0
PRESIDENT	(ii)	398,241	0	3,810	22,875	2,085	427,011	0
INTERNATIONAL SEC - TREAS (i	(i)	347,857	0	2,417	196,629	40,524	587,427	0
	(ii)	309,166	0	2,533	21,784	2,018	335,501	0
TOM BACA INTERNATIONAL VICE PRES	(i)	347,857	0	1,806	196,629	39,608	585,900	0
(ii		0	0	0	0	0	0	0
	(i)	450,507	0	0	196,629	20,154	667,290	0
- PAST	(ii)	0	0	0	0	0	0	0
LAWRENCE J MCMANAMON INTERNATIONAL VICE PRES	(i)	337,618	0	2,647	193,479	39,202	572,946	0
	(ii)	0	0	0	0	0	0	0
WARREN FAIRLEY INTERNATIONAL VICE PRES	(i)	347,856	0	6,608	196,629	29,819	580,912	0
	(ii)	47,070	0	0	8,000	0	55,070	0
JOHN FULTZ	(i)	352,064	0	6,740	196,629	33,879	589,312	0

26

1,537

152

18

2,802

	(III)	398,241	
WILLIAM CREEDEN INTERNATIONAL SEC -	(i)	347,857	
TREAS	(ii)	309,166	
TOM BACA	(i)	347,857	

(ii)

(i)

(i)

(ii)

(ii)

(i) Base Compensation

169,579

230,554

245,069

220,973

233,141

22,313

230,687

Schedule L	IC Print - DO NO	OT PROCESS	As File	ed Data -					DLI	N: 93	49318	32013020
(Form 990 or 99	\	te if the organ	ization and 8b, or 28c	swered "Yes	" on Form 9 0-EZ, Part V	, line 38a or 40	es 25	ia, 2!	5b, 26	26, OMB No. 1545-0047		
		▶Go to <u>ı</u>				st information						
Department of the Tre Internal Revenue Ser	•									С		o Public ection
Name of the org								ploy		ntifica	tion nu	
Part I Exce	ess Benefit Trai	nsactions (sec	tion 501(c)(3), section 5	501(c)(4), and	d 501(c)(29) org						
	plete if the organiza					r 25b, or Form 9 lified person and					(4)	Corrected?
1 (1 (a) Name of disqualified person				rganization	imed person and	, (escripti nsactio		Ye	Corrected? s No
Со	pans to and/or longlete if the organ ported an amount of (b) Relationship with organization	ization answered n Form 990, Pai	d "Yes" on I rt X, line 5, (d) Loan t	Form 990-EZ, 6, or 22	,	88a, or Form 990	(g)	In	ine 26; (h Approv boar	n) /ed by	(i)	Written eement?
			То	From	-		Yes	No	comm Yes	ittee?	Yes	No
(1) BANK OF LABOR	MAJORITY SHAREHOLDER	INVESTMENT	10	X	4,000,000	3,000,000	165	No	Yes	NO	Yes	NO
li di												
	MAJORITY SHAREHOLDER	GENERAL OPERATING	X		2,300,000	2,300,000		No	Yes		Yes	
BÁNK OF			Х		2,300,000	2,300,000		No	Yes			
BÁNK OF			X		2,300,000	2,300,000		No	Yes			
BÁNK OF			X		2,300,000	2,300,000		No	Yes			

	 _	-	 	_	
_					

Return Reference

Additional Data

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

Software ID:

Name: INTERNATIONAL BROTHERHOOD OF

transaction

BOILERMAKERS IRON SHIP BUILDERS

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction

between interested

person and the organization's organization revenues? Yes BANK OF LABOR **MAJORITY** 5.440,575 THE IBB OWNS A MAJORITY OF SHAREHOLDER, THE OUTSTANDING BANCSHARES CUSTODIAL AND ISSUED BY THE BANK OF LABOR COMMERICAL BANK, (THE BANK); THE IBB HOLDS LOAN SERVICER, BANK ACCOUNTS AND TENANT CUSTODIAL INVESTMENT ACCOUNTS AT THE BANK, THE BANK IS ALSO A TENANT IN THE OFFICE BUILDING THAT IS OWNED AND OPERATED BY THE IBB. PREVIOUSLY, THE

INTERNATIONAL ENTERED INTO A
LOAN ARRANGEMENT WITH THE
BANK, THIS LOAN IS
CONSIDERED AN INVESTMENT TO
THE INTERNATIONAL. CERTAIN
MEMBERS OF THE
INTERNATIONAL EXECUTIVE
COMMITTEE SIT ON THE BOARD
OF DIRECTORS OF THE BANK,
THESE INCLUDE: NEWTON
JONES, INTERNATIONAL
PRESIDENT WHO IS ALSO
CHAIRMAN OF THE BOARD OF
DIRECTORS OF THE BANK AND

No No

(e) Sharing

of

TRUMAN WARREN FAIRLEY JR., INTERNATIONAL VICE PRESIDENT OF THE IBB WHO IS ALSO ON THE BOARD OF DIRECTORS OF THE BANK OF LABOR. RYAN CREEDEN **EMPLOYEE** 337.884 RYAN CREEDEN IS THE DIRECTOR No OF I.T. SERVICES FOR THE INTERNATIONAL. THE IBB PAYS RYAN CREEDEN A SALARY AND CONTRIBUTES TO EMPLOYEE BENEFIT PLANS ON HIS BEHALF. RYAN CREEDEN IS A FAMILY MEMBER OF INTERNATIONAL SECRETARY TREASURER WILLIAM CREEDEN.

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Sharing between interested transaction of person and the organization's organization revenues? No Yes MARK GARRETT **EMPLOYEE** 336.840 MARK GARRETT IS THE Nο DIRECTOR OF HEALTH AND SAFETY SERVICES FOR THE INTERNATIONAL. THE IBB PAYS MARK GARRETT A SALARY AND CONTRIBUTES TO EMPLOYEE BENEFIT PLANS ON HIS BEHALF. MARK GARRETT IS A FAMILY MEMBER OF INTERNATIONAL VICE PRESIDENT TRUMAN WARREN FAIRLEY JR. CHARLES A JONES **EMPLOYEE** 321,676 CHARLES A JONES IS THE Nο DIRECTOR OF ARCHIVE PRESERVATION AT THE INTERNATIONAL. THE IBB PAYS CHARLES A JONES A SALARY AND CONTRIBUTES TO EMPLOYEE BENEFIT PLANS ON HIS BEHALF. CHARLES A JONES IS A FAMILY MEMBER OF INTERNATIONAL PRESIDENT NEWTON JONES.

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Sharing between interested transaction person and the organization's organization revenues? Yes No CULLEN JONES **EMPLOYEE** 199.184 CULLEN JONES IS THE I.T. VIDEO Nο COMMUNICATION TECHNICIAN FOR THE INTERNATIONAL. THE IBB PAYS CULLEN JONES A SALARY AND CONTRIBUTES TO EMPLOYEE BENEFIT PLANS ON HIS BEHALF, CULLEN JONES IS A FAMILY MEMBER OF INTERNATIONAL PRESIDENT NEWTON JONES. BRIAN CREEDEN **EMPLOYEE** 129.583 l BRIAN CREEDEN IS AN ENGINEER Nο FOR THE INTERNATIONAL. THE IBB PAYS BRIAN CREEDEN A SALARY AND CONTRIBUTES TO EMPLOYEE BENEFIT PLANS ON HIS BEHALF, BRIAN CREEDEN IS A FAMILY MEMBER OF INTERNATIONAL SECRETARY TREASURER WILLIAM CREEDEN.

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Sharing between interested transaction person and the organization's organization revenues? Yes No HEATHER BACA **EMPLOYEE** 127.306 | HEATHER BACA IS A SECRETARY Nο FOR THE INTERNATIONAL. THE IBB PAYS HEATHER BACA A SALARY AND CONTRIBUTES TO EMPLOYEE BENEFIT PLANS ON HER BEHALF, HEATHER BACA IS A FAMILY MEMBER OF INTERNATIONAL VICE PRESIDENT TOM BACA. KATERYNA JONES **EMPLOYEE** 122,035 KATERYNA JONES IS A SPECIAL Nο ASSISTANT TO THE INTERNATIONAL PRESIDENT. THE IBB PAYS KATERYNA JONES A SALARY AND CONTRIBUTES TO EMPLOYEE BENEFIT PLANS ON HER BEHALF, KATERYNA JONES IS A FAMILY MEMBER OF INTERNATIONAL PRESIDENT NEWTON JONES.

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (d) Description of transaction (e) Sharing (b) Relationship (c) Amount of between interested transaction of person and the organization's organization revenues? Yes No 92,939 JOHN BACA IS A COORDINATOR JOHN BACA **EMPLOYEE** Nο FOR THE INTERNATIONAL'S M.O.R.E. WORK INVESTMENT FUND. THE IBB PAYS JOHN BACA A SALARY AND CONTRIBUTES TO EMPLOYEE BENEFIT PLANS ON HIS BEHALF, JOHN BACA IS A FAMILY MEMBER OF INTERNATIONAL VICE PRESIDENT TOM BACA. MEGHAN MCMANAMON **EMPLOYEE** 79.330 MEGHAN MCMANAMON IS A No SECRETARY ASSISTANT FOR THE INTERNATIONAL, THE IBB PAYS MEGHAN MCMANAMON A SALARY AND CONTRIBUTES TO EMPLOYEE BENEFIT PLANS ON HER BEHALF. MEGHAN MCMANAMON IS A FAMILY MEMBER OF INTERNATIONAL VICE PRESIDENT

LAWRENCE MCMANAMON.

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Sharing between interested transaction person and the organization's organization revenues? Yes No SHAF JONES EMPLOYEE 12.890 SHAE JONES IS A GRAPHIC Nο ARTIST TECHNICIAN FOR THE INTERNATIONAL. THE IBB PAYS SHAF JONES A SALARY AND CONTRIBUTES TO EMPLOYEE BENEFIT PLANS ON HER BEHALF. SHAE JONES IS A FAMILY MEMBER OF INTERNATIONAL

PRESIDENT NEWTON JONES.

efile GRAPH	IC print - DO	NOT PROCESS	As Filed Data -		DLN	: 93493182013020		
SCHEDULE O (Form 990 or 990- EZ) Department of the Treasury 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. Solve Www.irs.qov/Form990 for the latest information.						OMB No. 1545-0047 2018 Open to Public Inspection		
Namel Setherofg INTERNATIONAL B BOILERMAKERS IR 990 Schedule	ROTHERHOOD OF ON SHIP BUILDER		on		Employer ident 48-6031851	ification number		
Return Reference		Explanation						
FORM 990, PART VI, SECTION A, LINE 6	THE INTERNATIONAL'S GENERAL MEMBERSHIP IS COMPRISED OF INDIVIDUALS WHO ARE MEMBERS IN GOOD STANDING AT VARIOUS LOCAL LODGES AFFILIATED WITH THE INTERNATIONAL. THE GENERAL MEMBERSHI P ELECTS DELEGATES TO ATTEND THE INTERNATIONAL CONVENTION WHICH PERIODICALLY IS CONVENED A S REQUIRED BY THE INTERNATIONAL'S GOVERNING DOCUMENTS.							

Return Explanation

FORM 990, PART VI, SECTION A, LINE 7A

Explanation Return Reference

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

PART VI. SECTION A.

990 Schedule O, Supplemental Information

LINE 7B

Return Explanation
Reference

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

Return Explanation
Reference

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

Return Explanation
Reference

FORM 990,	THE SALARY OF THE INTERNATIONAL PRESIDENT IS DETERMINED AND VOTED UPON BY DELEGATES FROM E
PART VI,	ACH LOCAL LODGE AT THE INTERNATIONAL CONVENTION HELD EVERY FIVE YEARS . THE SALARIES OF TH
SECTION B,	E INTERNATIONAL SECRETARY TREASURER AND INTERNATIONAL VICE PRESIDENTS ARE A PERCENTAGE OF
LINE 15	THE INTERNATIONAL PRESIDENT'S ANNUAL SALARY, THESE PERCENTAGES ARE SET FORTH IN THE INTERN
	ATIONAL'S CONSTITUTION WHICH HAS ALSO BEEN FORMALLY APPROVED BY THE DELEGATES AT THE CONVE
	NTION.

Return Explanation
Reference

FORM 990, THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST AND FINANCIAL STATEMENTS ARE AVAILABLE UPON PART VI, SECTION C, LINE 19

Return Explanation Reference

FORM 990. GAIN ON CANADIAN CURRENCY CONVERSION 96.703. PART XI.

LINE 9:

990 Schedule O, Supplemental Information

Return Explanation
Reference

FORM 990,
SCHEDULE
R, PART II,
COLUMN B

Return Explanation
Reference

FORM 990,
SCHEDULE
S TO EDUCATE MEMBERS ON CURRENT LEGISLATIVE TOPICS AND PROVIDE ASSISTANCE TO STATE AND LOC
R, PART II,
COLUMN B

THE PRIMARY ACTIVITY OF THE INT'L BROTHERHOOD OF BOILERMAKERS LEGISLATIVE EDUCATION FUND I
SCHEDULE
S TO EDUCATE MEMBERS ON CURRENT LEGISLATIVE TOPICS AND PROVIDE ASSISTANCE TO STATE AND LOC
NOTE: THE PRIMARY ACTIVITY OF THE INT'L BROTHERHOOD OF BOILERMAKERS LEGISLATIVE EDUCATION FUND I
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NOTE: THE PRIMARY ACTIVITY OF THE INT'L BROTHERHOOD OF BOILERMAKERS LEGISLATIVE EDUCATION FUND I
S TO EDUCATE MEMBERS ON CURRENT LEGISLATIVE TOPICS AND PROVIDE ASSISTANCE TO STATE AND LOC
NOTE: THE PRIMARY ACTIVITY OF THE INT'L BROTHERHOOD OF BOILERMAKERS LEGISLATIVE EDUCATION FUND I
S TO EDUCATE MEMBERS AND PROVIDE ASSISTANCE TO STATE AND LOCATION FUND I
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SCHEDULE R

As Filed Data -

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 <u>www.irs.gov/Form990</u> for instructions and the latest information.

OMB No. 1545-0047

DLN: 93493182013020

Open to Public Inspection

Name of the organization INTERNATIONAL BROTHERHOOD OF BOILERMAKERS IRON SHIP BUILDERS

(Form 990)

Department of the Treasury

Internal Revenue Service

Employer identification number

48-6031851

Part I Identification of Disregarded Entities Complete	(b)		(c)	•	(d)	(e)	(f)		
Name, address, and EIN (if applicable) of disregarded entity	Primary activity		Legal domicile (state or foreign country)		Total income	End-of-year assets	Direct controlli entity	ng	
(1) BOILERMAKERS INTERNATIONAL CAJUN REALTY CORPORATION 753 STATE AVENUE SUITE 565 KANSAS CITY, KS 66101 43-1806811	TO HOLD TITLE OF PR IN LOUISIANA	ROPERTY	KS			70,311	N/A		_
(2) INTERNATIONAL BROTHERHOOD BUILDING CORPORATION 753 STATE AVENUE SUITE 565 KANSAS CITY, KS 66101 48-6031851	TO HOLD TITLE OF PR IN CANADA	TO HOLD TITLE OF PROPERTY IN CANADA				522,929	N/A		
(3) INTERNATIONAL REAL ESTATE HOLDING COMPANY LLC 753 STATE AVENUE SUITE 565 KANSAS CITY, KS 66101	TO HOLD TITLE OF INVESTMENTS AND C INCOME FROM THOSE INVESTMENTS		KS			4,390,701	N/A		
									_
									_
Part II Identification of Related Tax-Exempt Organizate related tax-exempt organizations during the tax yea		ganiza	l tion answered	"Yes	 " on Form 990), Part IV, line 34 b	ecause it had one o	r more	_
(a) Name, address, and EIN of related organization	(b) Primary activity		(c) al domicile (state foreign country)	Exen	(d) npt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) co	ontrolle tity?
(1)INT'L BROTHERHOOD OF BOILERMAKERS CAMPAIGN ASSISTANCE FUND 753 STATE AVENUE	SEE SCHEDULE O		KS 527			N/A	N/A	Yes	No No
KANSAS CITY, KS 66101 73-1642980							NA		
(2)INT'L BROTHERHOOD OF BOILERMAKERS LEGISLATIVE EDUCATION FUND 753 STATE AVENUE	SEE SCHEDULE O		KS 527			N/A	N/A		No
KANSAS CITY, KS 66101 73-1642974									
(3)INT'L BROTHERHOOD OF BOILERMAKERS ARCHIVES 753 STATE AVENUE KANSAS CITY, KS 66101	TO DEVELOP A CENTRALIZED, DOCUMENTED AND PUBLICLY AVAILABLE HISTORY OF IBB.		KS	501(C)(3)		PUBLICLY SUPPORTED	N/A		No
48-1140537 (4)INT'L BROTHERHOOD OF BOILERMAKERS OFFICERS AND EMP PENSION 753 STATE AVENUE	TO PROVIDE RETIREMENT BENEFITS FOR ELIGIBLE		KS	401(A)	N/A			No
KANSAS CITY, KS 66101 48-6031851	PARTICIPANTS						N/A		
For Paperwork Reduction Act Notice, see the Instructions for For	m 990.		Cat. No. 5013	5Y			Schedule R (Fori	n 990) 2	018

(a)		(b)	(c)	(d)	(e)	1	(f)	(g)	(H	n)	(i)	ı	(j)	ı	(k)
(a) Name, address, and EIN of related organization		Primary	Legal domicile (state or foreign country)	Direct controlling entity	Predomir income(rel unrelate excluded tax und sections!	nant lated, to ed, from der 512-	Share of cotal income	Share of	Dispropi allocai	tionate		box K-1	Genera manag partn	alor Pe jing o	ercentage wnership
					514)				Yes No				Yes No		
													- 1		
							tion answ	vered "Yes	" on Fo	orm 99	90, Part	IV, I	line 3	84	
Part IV Identification of Related Orga because it had one or more relat (a) Name, address, and EIN of related organization		a corporation (c) Lei dom (state of	n or trus c) gal nicile r foreign	st during th		Type of	e)	vered "Yes' (f) Share of total income	Share	(g) of end- year issets	of- Pe	IV, I (h) ercent	age	Secti	(i) ion 512(controlle entity?
because it had one or more relat (a) Name, address, and EIN of related organization	ed organizations treated as	a corporation (c) Lei dom (state of	or trus c) gal nicile r foreign ntry)	st during th	(d) controlling	Type of	e) of entity , S corp,	(f) Share of total	Share	(g) of end- year	of- Pe	(h) rcent	age ship	Secti	ion 512(controlle entity?
because it had one or more relat (a) Name, address, and EIN of related organization 1)BANK OF LABOR 56 MINNESOTA AVENUE ANSAS CITY, KS 66101	ed organizations treated as (b) Primary activity	a corporation ((Le) dom (state o) cour	or trus c) gal nicile r foreign ntry)	ot during th	(d) controlling	Type of	e) of entity , S corp,	(f) Share of total	Share	(g) of end- year	of- Pe	(h) ercent wners	age ship	Secti	ion 512(controlle entity? s No
because it had one or more relat (a) Name, address, and EIN of related organization 1)BANK OF LABOR 56 MINNESOTA AVENUE ANSAS CITY, KS 66101	ed organizations treated as (b) Primary activity	a corporation ((Le) dom (state o) cour	or trus c) gal nicile r foreign ntry)	ot during th	(d) controlling	Type of	e) of entity , S corp,	(f) Share of total	Share	(g) of end- year	of- Pe	(h) ercent wners	age ship	Secti	ion 512(controlle entity? s No
because it had one or more relat (a) Name, address, and EIN of related organization 1)BANK OF LABOR 56 MINNESOTA AVENUE ANSAS CITY, KS 66101	ed organizations treated as (b) Primary activity	a corporation ((Le) dom (state o) cour	or trus c) gal nicile r foreign ntry)	ot during th	(d) controlling	Type of	e) of entity , S corp,	(f) Share of total	Share	(g) of end- year	of- Pe	(h) ercent wners	age ship	Secti	ion 512(controlle entity? s No
because it had one or more relat (a) Name, address, and EIN of related organization 1)BANK OF LABOR 56 MINNESOTA AVENUE ANSAS CITY, KS 66101	ed organizations treated as (b) Primary activity	a corporation ((Le) dom (state o) cour	or trus c) gal nicile r foreign ntry)	ot during th	(d) controlling	Type of	e) of entity , S corp,	(f) Share of total	Share	(g) of end- year	of- Pe	(h) ercent wners	age ship	Secti	ion 512(controlle entity? s No
because it had one or more relat (a) Name, address, and EIN of related organization 1)BANK OF LABOR 56 MINNESOTA AVENUE ANSAS CITY, KS 66101	ed organizations treated as (b) Primary activity	a corporation ((Le) dom (state o) cour	or trus c) gal nicile r foreign ntry)	ot during th	(d) controlling	Type of	e) of entity , S corp,	(f) Share of total	Share	(g) of end- year	of- Pe	(h) ercent wners	age ship	Secti	ion 512(controlle entity? s No
because it had one or more relat (a) Name, address, and EIN of	ed organizations treated as (b) Primary activity	a corporation ((Le) dom (state o) cour	or trus c) gal nicile r foreign ntry)	ot during th	(d) controlling	Type of	e) of entity , S corp,	(f) Share of total	Share	(g) of end- year	of- Pe	(h) ercent wners	age ship	Secti	ion 512(controlle entity? s No

Schedule R (Form 990) 2018		Pa	ge 3
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.		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1 b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1 d	Yes	
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1 f		No
g Sale of assets to related organization(s)	1 g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1 i		No
	l		

f [Dividends from related organization(s)	1 f		No
g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No
i E	xchange of assets with related organization(s)	1i		No
jι	ease of facilities, equipment, or other assets to related organization(s)	1j	Yes	
k ·	Lease of facilities, equipment, or other assets from related organization(s)	1 k		No
		41		No
I P	Performance of services or membership or fundraising solicitations for related organization(s)	11		
m F	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n c	sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	

J	Lease of racilities, equipment, or other assets to related organization(s)				-7	163	
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No
- 1	Performance of services or membership or fundraising solicitations for related organization(s)				11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes	
	Sharing of paid employees with related organization(s)				10	Yes	
р	Reimbursement paid to related organization(s) for expenses				1 p	Yes	
q	Reimbursement paid by related organization(s) for expenses				1 q	Yes	
r	Other transfer of cash or property to related organization(s)				1r	Yes	
s	Other transfer of cash or property from related organization(s)				1 s		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this lin	e, including covered r	relationships and trar	nsaction thresholds.			
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining am	nount ii	nvolved	1

U	Sharing of paid employees with related organization(s)				10	Yes			
р	Reimbursement paid to related organization(s) for expenses				1p	Yes			
q	Reimbursement paid by related organization(s) for expenses				1q	Yes			
r	Other transfer of cash or property to related organization(s)				1r '	Yes			
s	Other transfer of cash or property from related organization(s)				1s		No		
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line	, including covered r	elationships and trar	nsaction thresholds.	_				
(a) Name of related organization (b) Transaction Amount involved Method of determining an									
		(b) Transaction			nount inv	volved			
	(a) Name of related organization		(c) Amount involved	(d) Method of determining ar	nount inv	volved			
		Transaction			nount inv	volved			
		Transaction			nount inv	volved			
		Transaction			nount inv	volved			
		Transaction			nount inv	volved			

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

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

		<u>_</u>											
(a) Name, address, and EIN of entity	(b) Primary activity		sections 512-		section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets			(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General c managin partner?	?	(k) Percentage ownership
			514)	Yes	No		<u> </u>	Yes	No		Yes	No	ı
										Schedul	e R (Form	1 990	0) 2018

chedule R (For	Page	e 5						
Part VII	Supplemental Info	upplemental Information						
	Provide additional infor	mation for responses to questions on Schedule R (see instructions).						
Return Reference		Explanation						