DLN: 93493307012320

OMB No. 1545-0047 **Return of Organization Exempt From Income Tax**

Department of the Treasury

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

 \blacktriangleright 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.

		enue Service						
			alendar year, or tax year beginning 01-01-2019 , and ending 12-3 C Name of organization	L-2019	D.F		_	
_		applicable: change	INTERNATIONAL BROTHERHOOD OF TEAMSTERS			er identification number		
□ Na		-			53-021	5427		
☐ Ini			Doing business as					
		rn/terminated d return	Number and street (or P.O. box if mail is not delivered to street address) Room/sui	te	E Telephoi	ne number		
		ion pending	25 LOUITSTANA AVE NIM		(202) 6	524-6800		
			City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20001					
			<u> </u>		G Gross re	eceipts \$ 208,892,452		
			F Name and address of principal officer: KEN HALL	H(a) Is	s this a group re			
			25 LOUISIANA AVE NW		ubordinates? .re all subordina	☐Yes ☑No		
——— т Та	x-exei	mpt status:	WASHINGTON, DC 20001	ìir	ncluded?	LI Yes LING)	
						list. (see instructions) n number ► 0320		
J W	ebsii	te:► ww	/W.TEAMSTER.ORG	(0) 6	noup exemption	Thumber > 0320		
K Forr	n of o	rganization:	: ☐ Corporation ☐ Trust ☑ Association ☐ Other ▶	L Year of	formation: 1903	M State of legal domicile: DC	=	
Pa	art I		mary				_	
			scribe the organization's mission or most significant activities: CTS OF THIS INTERNATIONAL UNION ARE TO ORGANIZE UNDER ONE BANI	NER ALL V	WORKERS ENGA	GED IN INDUSTRY; TO		
			THEM TO COOPERATE IN EVERY MOVEMENT WHICH TENDS TO BENEFIT TH HIP, EMPLOYERS, AND THE PUBLIC THAT IT IS TO THE ADVANTAGE OF AL				_	
	1	ORGANIZA	ATION OF OUR INDUSTRY REQUIRES HONEST AND INTELLIGENT MEMBERS	HIP, ADA	PTED TO THE B	USINESS. WE TEACH OUR		
e.			HIP THE ADVANTAGE, BENEFITS, AND IMPORTANCE OF THEIR INDUSTRIA A LABOR ORGANIZATION IN CONFORMITY WITH THE HIGHEST STANDARD:					
e E	,	WE SEEK	TO ENSURE THAT THE CONTRIBUTIONS MADE BY OUR MEMBERS TO IMPRO	OVE THEI	R INDUSTRIES /	ARE RECOGNIZED AND TH		
E			RECEIVE THE BENEFITS DERIVED FROM THEIR LABORS IN THE FORM OF CONDITIONS, AND RESPECTFUL TREATMENT BY THEIR EMPLOYERS.	REASONA	BLE HOURS, FA	IR WAGES, IMPROVED		
Ň OK	:		CONDITIONS, THE REST ECT OF TREATHER BY THEIR ETH ECTERS.				_	
Activities & Governance	:						_	
Se S	,	Check thi	is box $lacktriangle$ if the organization discontinued its operations or disposed of m	ore than	25% of its net a	assets		
¥			of voting members of the governing body (Part VI, line 1a)		-		27	
Act	4	Number o	4	0				
-	5	Total nun	5 5	87				
	6	Total nun	nber of volunteers (estimate if necessary)			6	0	
	1		elated business revenue from Part VIII, column (C), line 12			7a	0	
	b	Net unrel	ated business taxable income from Form 990-T, line 39			7b	0	
					Prior Year	Current Year		
₫:	1		cions and grants (Part VIII, line 1h)		4,034,			
Rəvenue	1	_	service revenue (Part VIII, line 2g)		187,390,			
ã	1		ent income (Part VIII, column (A), lines 3, 4, and 7d)		8,207,			
	1		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		313, 199,945,			
	_		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)					
	1		nd similar amounts paid (Part IX, column (A), lines 1–3)		3,728,			
	1		paid to or for members (Part IX, column (A), line 4) other compensation, employee benefits (Part IX, column (A), lines 5–10)	15,137,112 15,900 75,120,398 79,394				
Expenses	1		anal fundraising fees (Part IX, column (A), line 11e)		73,120,	0		
6	Ι.		raising expenses (Part IX, column (D), line 25) ▶0				_	
ភ្ន	1		penses (Part IX, column (A), lines 11a–11d, 11f–24e)		76,735,	643 72,950,0	200	
	1	-	enses. Add lines 13–17 (must equal Part IX, column (A), line 25)		170,722,			
	1	-	less expenses. Subtract line 18 from line 12		29,223,			
8 &				Begin	ning of Current \		_	
Net Assets or Fund Balances			- (D - (V - 16)		22.1 ==	222		
Ass I Ba	1		ets (Part X, line 16)		334,736,			
₹ E	1		ilities (Part X, line 26)		26,923,			
	iri II	_	s or fund balances. Subtract line 21 from line 20		307,812,	256 379,584,9	120	
			erjury, I declare that I have examined this return, including accompanying	schedules	and statement	s, and to the best of my	_	
			f, it is true, correct, and complete. Declaration of preparer (other than offic	er) is bas	ed on all inform	ation of which preparer ha	ıs	
any k	HOWI	eage.						
		******			2020-11-02		_	
Sign		V Signati	ure of officer		Date			
Here	•		ALL GENERAL SECRETARY-TREASURER				_	
		17	r print name and title	ato		DTIN	_	
D-:-	4			ate 020-11-02		PTIN P00360279		
Paid		or	irm's name ► NOVAK FRANCELLA LLC					
Pre Use	•	.i			Firm's EIN ► 61		_	
USE	: UI	ייע -	irm's address ▶ ONE PRESIDENTIAL BLVD SUITE 330		Phone no. (610)	668-9400		
			BALA CYNWYD, PA 19004					
May t	he IR	RS discuss	this return with the preparer shown above? (see instructions)			. ☑Yes ☐No		

orm	990 (2019)				Page 2
Pa	rt III Statement	of Program Service Acc	omplishments		
	Check if Sche	dule O contains a response or	note to any line in this Part III		🗸
1		organization's mission:			
THENEMPL INDU BENE CONI MADI LABC	1 TO COOPERATE IN E OYERS, AND THE PUB ISTRY REQUIRES HON FITS, AND IMPORTAN FORMITY WITH THE HI E BY OUR MEMBERS TO	VERY MOVEMENT WHICH TEN LIC THAT IT IS TO THE ADVAI EST AND INTELLIGENT MEMBI CE OF THEIR INDUSTRIAL PO: GHEST STANDARDS OF OUR A D IMPROVE THEIR INDUSTRIE	O ORGANIZE UNDER ONE BANNER A DS TO BENEFIT THE ORGANIZATION; NTAGE OF ALL CONCERNED THAT WO ERSHIP, ADAPTED TO THE BUSINESS SITION, AND WE ENDEAVOR TO BUIL AMERICAN AND CANADIAN CITIZENS S ARE RECOGNIZED AND THAT WOR AGES, IMPROVED WORKING CONDITI	: AND TO IMPRESS UPON OUR PRKERS BE ORGANIZED. THE O . WE TEACH OUR MEMBERSHIP D-UP AND PERFECT A LABOR O HIP. WE SEEK TO ENSURE THA KERS RECEIVE THE BENEFITS	MEMBERSHIP, PRESENTATION OF OUR THE ADVANTAGE, DRESENTATION IN THE CONTRIBUTIONS DERIVED FROM THEIR
	Did the sussination				
2	-		gram services during the year which w	were not listed on	☐ Yes ☑ No
	the prior Form 990 o		· · · · · · · · · ·		□ fes 🛂 No
3	•	ese new services on Schedule		any program	
د	_	cease conducting, or make sig	unificant changes in how it conducts, a	any program	☐ Yes ☑ No
	services?				Lites L≛iNo
4	•	ese changes on Schedule O.	ultaburanta fan anal 1890 U	- .	d b
4	Section 501(c)(3) an		plishments for each of its three large required to report the amount of gra ervice reported.		
4a	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
	See Additional Data		3 3		,
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
70		/ (Expenses \$	medding grants or \$) (Nevenue 4	,
4d	Other program servi	ces (Describe in Schedule O.)			
	(Expenses \$	including o	grants of \$	(Revenue \$)
4e	Total program serv	/ice expenses ▶			

Form	990 (2019)			Page 3
Par	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	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	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? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule D,</i> Part 2	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> 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
	or X as applicable.	,		
	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 2	11b		No
	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	11c		No
	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	
	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 2	12a		No
	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	Yes	
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		No
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		No
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

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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

Yes

20b

21

rm 9	990 (2019)			Page 4
Part	Checklist of Required Schedules (continued)			
_			Yes	No
	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		No
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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		
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		
	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27		No
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	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
	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		No
	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
	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? If "Yes," complete Schedule R, Part V, line 2	36		
	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
	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	
Part	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	. ;		
4	Futou the annual and an annual in Pay 2 of Farms 1006. Futou 0 if a strength and in I do I		Yes	No
та	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 946	i		l

1b

Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

1c

Par	tV Statements Regarding Other IRS Filings and Tax Compliance (continued)			rage 3				
	Enter the number of employees reported on Form W-3, Transmittal of Wage and							
	Tax Statements, filed for the calendar year ending with or within the year covered by this return							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes					
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b						
	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)? If "Yes," enter the name of the foreign country: ►CA	4a	Yes					
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				
С	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						
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c						
d	If "Yes," indicate the number of Forms 8282 filed during the year							
e	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?							
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?							
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?							
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?							
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?							
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12 10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b							
11	Section 501(c)(12) organizations. Enter:							
а	Gross income from members or shareholders							
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans							
с 14а	14a		No					
	14a 14b		INO					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	140						
	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?	15		No				
0	If "Yes," complete Form 4720, Schedule O.	16		No				

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Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	" resp	onse to	lines V						
Se	ction A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year 27									
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.									
b	b Enter the number of voting members included in line 1a, above, who are independent 1b 0									
2										
3										
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?	7 b		No						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	The governing body?	8a	Yes							
b	Each committee with authority to act on behalf of the governing body?	8b	Yes							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No						
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	e.)							
			Yes	No						
	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							
	Describe in Schedule O the process, if any, used by the organization to review this Form 990									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in 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?									
а	The organization's CEO, Executive Director, or top management official	15a		No						
b	Other officers or key employees of the organization	15b		No						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b								
Se	ction C. Disclosure			<u> </u>						
17	List the states with which a copy of this Form 990 is required to be filed▶									
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website 🗹 Upon request 🗌 Other (explain in Schedule O)									
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's books and records: ►INTERNATIONAL BROTHERHOOD OF TEAMSTERS 25 LOUISIANA AVE NW WASHINGTON, DC 20001 (202) 624-6800									

Form 990 (2019)											Page 7
Part VII Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	yees,	
Check if Schedule O contains a	response or no	te to an	y line	in t	his	Part VI	١.				
Section A. Officers, Directors, Tru	ıstees, Key E	mploy	ees,	, an	d H	lighe	st C	Compensated En	nployees		
1a Complete this table for all persons requir year.		•	·					, ,		-	's tax
 List all of the organization's current of of compensation. Enter -0- in columns (D), (E), and (F) if no	compe	nsati	on w	vas į	oaid.		,,		:	
List all of the organization's current key											
 List the organization's five current high who received reportable compensation (Box organization and any related organizations.)	
 List all of the organization's former office of reportable compensation from the organization 	ation and any re	elated o	rgani	zatio	ons.			•	·	·	
 List all of the organization's former directions organization, more than \$10,000 of reportables See instructions for the order in which to list 	le compensation	n from t								e	
Check this box if neither the organization	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee.		
(A) Name and title	(B) Average hours per week (list any hours	Position than one is b	on (do one bo oth a direct	(C) o not ox, u n of or/t) t che inles ficer	eck moss s pers	ore on	(D) Reportable compensation from the organization (W-2/1099-	(E) Reportable compensation from related organizations (W-2/1099-	(F) Estimated amount of ot compensation from the organization related organization	ated of other isation the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)		ted
See Additional Data Table											

Section A Officers Dive		. Kar	E				u:l		ated Employees	. /cont	in.cod\	Page 8
(A) Name and title	(B) Average hours per week (list any hours for related	Position than of is b	on (d	(C) o no ox, u n of tor/t) ot chounles fices	eck mess pers r and a tee)	ore son	(D) Reportable compensatio from the organization (W-2/1099-	(D) (E) ortable Reportable oensation compensation om the from related organization:		(F) Estimated amount of other compensation	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	- (W-2/1095 MISC)	,-	relat organiz	ed
See Additional Data Table					\vdash							
					T							
				L								
				_	L							
			<u> </u>	┝	\vdash							
			-	┝	⊬							
				┢	⊬							
1b Sub-Total			<u>. </u>	<u>. </u>	<u></u>	<u> </u>						
c Total from continuation sheets to d Total (add lines 1b and 1c)	Part VII, Section	Α.				▶		8,441,689	3,636,	976		3,121,077
Total number of individuals (including of reportable compensation from the compensation)	ng but not limited	to thos					o rec	eived more than	\$100,000			· · ·
2 Did the consequence list on famous			1.								Yes	No
3 Did the organization list any former line 1a? If "Yes," complete Schedule	,			•				-	ited employee on	3	Yes	
For any individual listed on line 1a, i organization and related organizatio individual	ns greater than \$	150,00	0? <i>If</i>	"Yes	s," c	omple	te Sc	chedule J for suc	ch	4	Yes	
5 Did any person listed on line 1a rece services rendered to the organizatio									individual for	5		No
Section B. Independent Contract Complete this table for your five high		d indon	anda	nt 66	ntr	actors	that	received more t	than #100 000 of c	omnon	cation	
from the organization. Report compo	ensation for the o								ation's tax year.	I		
Name	(A) and business addre	ess							(B) Description of services ARE SUPPORT		Compe	
348 MADISON ST								3011	ARE SOLF OR			000,012
ALBANY, CA 94706 DIGENOVA & TOENSING LLP								LEGAL S	SERVICES			882,298
1776 K STREET NW STE 737 WASHINGTON, DC 20006												
BERLINROSEN LTD								PROFES	SSIONAL SERVICES			720,000
15 MAIDEN LANE STE 1600 NEW YORK, NY 10038												
BAPTISTE & WILDER PC 1150 CONNECTICUT AVE NW STE 315								LEGAL S	SERVICES			680,586
WASHINGTON, DC 20036 ARANDELL CORPORATION								MAGAZI	INE PRODUCTION SER	VCIES		648,247
PO BOX 405												· r = · ·
MENOMONEE FALLS, WI 530520405 2 Total number of independent contractors		not lim	nited 1	o th	ıose	listed	abov	/e) who received	d more than \$100,0	000 of		
compensation from the organization >	49			—							Form 99	n (2019)

		(2019)	a) over : : :						Page 9
Part	VII				respo	onse or note to any	line in this Part VIII			🗆
		CHECK II SCHOOL	uuic	o contains a	Тезро	inse of more to any	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
10	1	a Federated campa	aigns	s	1a		L	revenue		512 - 514
ants	b Membership dues 1b				1 b					
Gra Mao		c Fundraising even	nts .	[1c					
ifts, ar A		d Related organiza	tions	5 <u> </u>	1d					
". E .∵		e Government grants	(con	tributions)	1e	3,631,133				
ions I Si		f All other contribution and similar amounts			1f					
Contributions, Gifts, Grants and Other Similar Amounts		above g Noncash contribution	ons in	cluded in	<u></u> ,					
onti		lines 1a - 1f:\$		L	1 g					
ಕ ರ		h Total. Add lines	1a-1	f	• •		3,631,133			
		DED CADITA TAVEC A	ND I			Business Code	194,537,021	194,537,021		
<u>e</u>	28	PER CAPITA TAXES A	I UMN			900099	15 1,007,021	13 1,007,021		
Program Service Revenue	ŀ									
e e										
r vice	٩									
% -	(i								
gran										
ě										
		· All other program								
	⊢	Investment income				194,537,021	1	T		
		similar amounts) .				•	10,443,985			10,443,985
		Income from invest					140,770			140,770
	3	Royalties		(i) Rea		(ii) Personal	140,770			140,770
	ء ا	a Gross rents	6.	.,		, ,				
		Less: rental	6a		30,000		-			
	_	expenses	6b		0)	-			
	С	Rental income or (loss)	6 c		30,000	,				
	۱ (d Net rental income	e or (30,000			30,000
	7a Gross amount (i) Securities		(ii) Other	-						
	,	from sales of assets other than inventory	7a		64,609	175				
	b	Less: cost or other basis and sales expenses	7b		64,050	7,384				
	С	Gain or (loss)	7c		559	-7,209	1			
		d Net gain or (loss)				· · · •	-6,650			-6,650
Other Revenue	04	Gross income from fu (not including \$ contributions reporte See Part IV, line 18	d on	of	8a					
Re		b Less: direct expen	ises		8b]			
the	١ (c Net income or (los	ss) fr	om fundraisi	ng eve	ents 🕨	1			
	9a	Gross income from	gami	ing activities.						
		See Part IV, line 19			9a		_			
		b Less: direct expen c Net income or (los			9b activiti	es •]			
		•								
	10	aGross sales of inverteurns and allowa	ento: ances	ry, less s	10a	33,003				
		b Less: cost of good	ls sol	ld	10b	0	-			
	Ļ	C Net income or (los			nvent		33,003			33,003
	11	Miscellaneo 1a OTHER	us R	evenue		Business Code 900099	11,756			11,756
	-	OHIEK				300033	11,730			11,730
		b								
	,	с								
		d All other revenue e Total. Add lines 1								
		2 Total revenue. S					11,756			
		- rotarrevenue. S	ee if	.5G aCGOH5 .	•	· · · •	208,821,018	194,537,021	[10,652,864

Part IX Statement of Functional Expenses				Page 10
Section 501(c)(3) and 501(c)(4) organizations must co		_	ons must complete col	umn (A). □
Check if Schedule O contains a response or note to an Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,142,586	олроносс	general expenses	одранись
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	13,211			
4 Benefits paid to or for members	15,900,744			
5 Compensation of current officers, directors, trustees, and key employees	9,776,496			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	39,641,414			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	6,163,914			
9 Other employee benefits	19,919,615			
10 Payroll taxes	3,893,499			
11 Fees for services (non-employees):	0,050,155			
a Management				
	4,632,038			
b Legal	298,075			
c Accounting	298,075			
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	123,467			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	11,300,365			
12 Advertising and promotion	805,458			
13 Office expenses	5,258,515			
14 Information technology	2,403,109			
15 Royalties				
16 Occupancy	2,058,847			
17 Travel	12,962,219			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	1,194,681			
20 Interest				
21 Payments to affiliates	11,776,878			
22 Depreciation, depletion, and amortization	1,519,622			
23 Insurance	686,438			
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 REIMBURSED SALARIES	10,102,272			
b REIMBURSED BENEFITS	4,055,635			
c REIMBURSED EXPENSES	1,759,021			
d TAXES-SALES, PERSONAL P	1,133,795			
e All other expenses	879,574			
25 Total functional expenses. Add lines 1 through 24e	170,401,488			
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).				

Form 990 (2019)

End of year

Beginning of year

-186,729

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33

401,082

334,736,232

23,663,390

3,260,586

26.923.976

307,310,580

307,812,256

334,736,232

501,676

Page 11

-1,755,846

38,195,391

17,983,844

410,184,097

29,714,203

884.966

30.599.169

379.083,255

379,584,928

410,184,097

Form 990 (2019)

501,673

712,531 24,936,227

Check	ΙŤ	Schedule

Cash-non-interest-bearing .

Investments—program-related. 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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

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

Organizations that do not follow FASB ASC 958, check here > \(\begin{align*} \text{and} \end{and} \)

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

Retained earnings, endowment, accumulated income, or other funds

Organizations that follow FASB ASC 958, check here <a> \square and

Other assets. See Part IV, line 11 . . .

Accounts payable and accrued expenses

or family member of any of these persons

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

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Deferred revenue . . .

Tax-exempt bond liabilities .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

2	Savings and temporary cash investments	33,023,769	2	
3	Pledges and grants receivable, net	551,262	3	
4	Accounts receivable, net	21,592,099	4	
5	Loans and other payables to any current or former officer, director, trustee,			

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

Assets

13

14

15

16

17

18

19

20

21

23

24

25

26

27

28

31

32

33

Liabilities 22

Fund Balances

ō 29

Assets 30 Intangible assets .

Grants payable .

key employee, creator or founder, substantial contributor, or 35% controlled 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). 6 7 Notes and loans receivable, net . . . 292.673 271,444 Inventories for sale or use . Prepaid expenses and deferred charges . 699,908 9 664,923

10a Land, buildings, and equipment: cost or other 10a 77.629,919 basis. Complete Part VI of Schedule D 10b 39,932,180 35,984,225 10c 37,697,739 b Less: accumulated depreciation 11 Investments—publicly traded securities . 242,377,943 11 291,477,844 12 Investments—other securities. See Part IV, line 11 . 12

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

3a Yes

Additional Data

Software ID: Software Version:

EIN: 53-0215427

Form 990 (2019)

Form 990, Part III, Line 4a:

THROUGH ORGANIZING & COLLECTIVE BARGAINING.

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

Name: INTERNATIONAL BROTHERHOOD OF TEAMSTERS







(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless amount of other hours per compensation compensation week (list person is both an officer from related compensation from the any hours and a director/trustee) organization organizations from the

5 | 6

(W-2/1099-

167,624

408,056

186,541

108,359

127,869

101,025

(W-2/1099-

137,555

1,000

37,454

131,700

148,129

191,956

organization and

47,756

75,811

70,728

103,581

42,901

71,408

for related

35.00

35.00

35.00

35.00

35.00

35.00

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
RONALD HERRERA VICE PRESIDENT - TRADE DIV	35.00	X						136,227	162,365	126,592
JIM KABELL INTERNATIONAL TRUSTEE	35.00	X						92,799	72,035	76,269
KEVIN MOORE INTERNATIONAL TRUSTEE	35.00	Х						154,054	120,453	59,104
GREGORY FLOYD VICE PRESIDENT	35.00	Х						87,451	323,379	53,792

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INTERNATIONAL TRUSTEE
GREGORY FLOYD
VICE PRESIDENT
DENIS TAYLOR
INTERNATIONAL TRUSTEE

JAMES P HOFFA

JOHN F MURPHY

DANIEL J KANE SR

FREDRICK P POTTER

FREDDIE N SIMPSON

GENERAL PRESIDENT

......

VICE PRESIDENT - AT LARGE

VICE PRESIDENT - EASTERN R

VICE PRESIDENT - AT LARGE

VICE PRESIDENT - AT LARGE

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Reportable Estimated Average Position (do not check more Reportable hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the

95,523

63,067

91,424

145,374

253,036

290,801

253,468

216,947

208,020

157,276

46,246

0

43,844

42,585

85,084

95,098

58,880

71,943

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

GEORGE MIRANDA

CRAIG MCINNES

SEAN O'BRIEN

STEVEN VAIRMA

RICHARD KEN HALL

FRANCOIS LAPORTE

GENERAL SEC.-TREAS.

VICE PRESIDENT - CANADA

VICE PRESIDENT - CANADA

VICE PRESIDENT - EASTERN R

VICE PRESIDENT - WESTERN R

...... VICE PRESIDENT - AT LARGE

	l				,		,	4 4	4.5 4	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
GEORGE TEDESCHI VICE PRESIDENT - AT LARGE	35.00			х				108,180	117,784	59,488
WILLIAM HAMILTON VICE PRESIDENT - EASTERN R	35.00			x				152,539	199,215	49,784
STANLEY J HENNESSY VICE PRESIDENT - CANADA	35.00			х				65,023	132,026	44,894
RICK MIDDLETON VICE PRESIDENT - WESTERN R	35.00			х				145,932	211,617	90,578

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(A) (E) (B) (C) (D) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

and Independent Contractors

ROME ALOISE

GARY S WITLEN

CHRISTINE BAILEY

VICE PRESIDENT - WESTERN REGION

......

DEPARTMENT DIRECTOR/LEGAL

DEPARTMENT DIRECTOR, FIELD

	fairy flours	ā	a un	eccc		usice	'	(14/ 3/4000	(W 2/1000	overnientian and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
WILLIAM M FRISKY VICE PRESIDENT - CENTRAL R	35.00			х				89,692	86,800	77,692	
CHARLES A JONES VICE PRESIDENT - CENTRAL R	35.00			х				89,665	89,665 119,237		
ROBERT KOPYSTYNSKY VICE PRESIDENT - CENTRAL R	35.00		х		90,690	0	36,086				
i i i i i i i i i i i i i i i i i i i	25.00		ı —					· · · · · · · · · · · · · · · · · · ·			

VICE PRESIDENT - CENTRAL R			Х		89,665	119,237	
ROBERT KOPYSTYNSKY	35.00		х		90,690	0	
VICE PRESIDENT - CENTRAL R							
JOHN PALMER	35.00		Х		94,144	0	
VICE PRESIDENT - SOUTHERN					34,144	ŭ	
LYNAR ER LY COLUMN TO	35.00						-

35.00

35.00

35.00

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VICE PRESIDENT - CENTRAL R			^		50,050	0	
JOHN PALMER	35.00		Х		94.144	C	
VICE PRESIDENT - SOUTHERN			^		31,211		
KIMBERLY SCHULTZ	35.00		Х		90,138	C	
VICE PRESIDENT - SOUTHERN					30,100		

JOHN PALMER	35.00		X		94,144	C	38,153
VICE PRESIDENT - SOUTHERN			^		31,211		30,133
KIMBERLY SCHULTZ	35.00		X		90,138	0	36,157
VICE PRESIDENT - SOUTHERN			^		50,130		30,137
JAMES AVRAL THOMPSON	35.00						
VICE DECIDENT CENTRAL D			Х		89,968	116,707	78,218

VICE PRESIDENT - SOUTHERN							
KIMBERLY SCHULTZ	35.00				90,138	0	26 157
VICE PRESIDENT - SOUTHERN	'		^		90,138	0	36,157
JAMES AVRAL THOMPSON	35.00		v		89,968	116.707	78,218
VICE PRESIDENT - CENTRAL R	·		^		09,900	110,707	76,216

JAMES AVRAL THOMPSON VICE PRESIDENT - CENTRAL R	35.00		х		89,968	116,707	78,218
VICE PRESIDENT - CENTRAL R							
DENNIS PIERCE	35.00		x		36.125	240.178	28.101
INTERNATIONAL RAIL CONF.			^		30,123	240,170	20,101

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10,486

274,582

204,470

5,126

0

0

4,071

65,940

55,099

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

and Independent Contractors

NICOLAS MANICONE

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DEPARTMENT DIRECTOR/STRATEGIC RESEARCH

......

GENERAL PRES ASSISTANT GEN

STAFF ATTORNEY

TODD J THOMPSON

SPECIAL ASST TO GP

FREDERICK DUBINSKY

INTERNATIONAL REPRESENTATIVE

NEIL DITCHEK

IAIN GOLD

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
JEFFREY FARMER DEPARTMENT DIRECTOR/ORGANI	35.00			×			204,382	0	55,015
BRET CALDWELL DEPARTMENT DIRECTOR/COMMUN	35.00			х			202,958	0	57,174
MICHAEL MANLEY STAFF ATTORNEY	35.00			х			200,815	0	54,805
LAMONT BYRD	35.00								

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172,640

209,810

188,764

206,545

177,687

55,125

56,162

58,445

58,607

54,318

55,422

51,733

0

0

0

0

0

MICHAEL MANLEY	35.00		Х		200,815	0	
STAFF ATTORNEY			^		200,013		
LAMONT BYRD	35.00		X		199,640	0	
DEPARTMENT DIRECTOR/SAFETY			Λ		133,010		
RICHARD GIBSON	35.00		<		197,383		
			^		197,363	l oi	ı

35.00

35.00

35.00

35.00

35.00

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STAFF ATTORNEY							
LAMONT BYRD DEPARTMENT DIRECTOR/SAFETY	35.00		×		199,640	0	
RICHARD GIBSON	35.00		Х		197,383	0	
STAFF ATTORNEY			, `		137,7883		

MICHAEL MANLEY	35.00		Y		200,815	0	
STAFF ATTORNEY			^		200,013	0	
LAMONT BYRD	35.00		Y		199,640	0	
DEPARTMENT DIRECTOR/SAFETY			^		133,040	9	
RICHARD GIBSON	35.00						

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the

and Independent Contractors

CARIN ZELENKO

RONALD SCHWAB

LOUIS S BANIECKI

BRIAN HAIRFIELD

SCOTT HEGLAND

ASSISTANT DIRECTOR

INTERNATIONAL AUDITOR

INTERNATIONAL AUDITOR

INTERNATIONAL REPRESENTATIVE

......

DEPARTMENT DIRECTOR, CAPITAL STRATEGIES

......

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
CYNTHIA IMPALA DEPARTMENT DIRECTOR/TRAINING & DEVEL	35.00			Х			192,164	0	53,230
JOHN SLATERY DEPARTMENT DIRECTOR/BENEFITS	35.00			х			177,199	32,500	51,551
LEAH FORD ASSISTANT DIRECTOR/SPECIAL	35.00			х			227,851	0	58,518
DAVID BOURNE	35.00								

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187,143

182,225

173,099

172,695

176,078

53,559

52,029

58,745

49,719

47,485

47,203

48,749

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LEAH FORD	35.00			X		227,851	0	
ASSISTANT DIRECTOR/SPECIAL				,		22,,001		
DAVID BOURNE	35.00			V		205.689	65,879	
TRADE DIVISION DIRECTOR, A				^		205,689	65,879	
ANTHONY MATHIS	35.00			V		201.065		
ASST TO GST AND AUDITOR				^		201,065	١	

35.00

35.00

35.00

35.00

35.00

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LEAH FORD	35.00		.,		227.054		l
ASSISTANT DIRECTOR/SPECIAL			Х		227,851		
DAVID BOURNE	35.00		x		205,689	65.879	
TRADE DIVISION DIRECTOR, A			^		203,003	03,073	
ANTHONY MATHIS	35.00				204.065		

and Independent Contractors (A) (B) (C) (D) (E) (F) Name and Title Reportable Reportable Average Position (do not check more Estimated than one box, unless hours per compensation compensation amount of other

person is both an officer

Χ

from the

175,372

11,512

from related

101,924

compensation

48,187

33,059

	any hours	and	a dir	ecto	or/tr	ustee)	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
SCOTT HILTON INTERNATIONAL AUDITOR	35.00					х		173,062	0	47,272
MARION DAVIS DEPT. DIRECTOR, BLDG & CON	35.00					х		175,047	0	48,650
COLLEEN BRADY	35.00									

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0.00

INTERNATIONAL AUDITOR

BECKY STRZECHOWSKI P

FORMER VICE PRESIDENT - CENTRAL R

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

DLN: 93493307012320

Inspection

Department of the Treasury Internal Revenue Service

EZ)

3

SCHEDULE C (Form 990 or 990-

▶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.

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

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

• Section 527 organizations: Complete Part I-A only.

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

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

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

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of the organization **Employer identification number** INTERNATIONAL BROTHERHOOD OF TEAMSTERS 53-0215427 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) 2 3

Complete if the organization is exempt under section 501(c)(3).

Enter the amount of any excise tax incurred by the organization under section 4955 1

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

If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes □ No Was a correction made?

☐ Yes ☐ No If "Yes," describe in Part IV.

Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities

Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b.......

3 Did the filing organization file Form 1120-POL for this year?

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

	dule C (Form 990 or 990-EZ) 2019					P	age 3
Pa		ization is exempt under section 501(c)(3) and has NOT fil inder section 501(h)).					
For e	ach "Yes" response on lines 1a through	1i below, provide in Part IV a detailed description of the lobbying	(a)	+	(b)	
activ			Yes	No	,	Amour	nt
1		ation attempt to influence foreign, national, state or local legislation, blic opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?						
b	Paid staff or management (include cor	npensation in expenses reported on lines 1c through 1i)?					
c	Media advertisements?				1		
d	Mailings to members, legislators, or th	ne public?					
е	Publications, or published or broadcas	t statements?					
f	Grants to other organizations for lobb	ying purposes?					
g	Direct contact with legislators, their st	affs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, cor	oventions, 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 or	ganization to be not described in section 501(c)(3)?					
b		incurred under section 4912			1		
c		incurred by organization managers under section 4912					
d		ction 4912 tax, did it file Form 4720 for this year?					
Pai		ization is exempt under section 501(c)(4), section 501(c)	(5), o	r sect	ion		
	501(c)(6).						
1	Were substantially all (90% or more)	dues received nondeductible by members?		ſ	1	Yes Yes	No
2		use lobbying expenditures of \$2,000 or less?		-	2	163	No
3		er lobbying and political expenditures from the prior year?		-	3		No
		ization is exempt under section 501(c)(4), section 501(c)			_	E01/a	
Fa	and if either (a) BOTH answered "Yes."	Part III-A, lines 1 and 2, are answered "No" OR (b) Part				301(C	.)(0)
1	•	ts from members	1				
2	expenses for which the section 52						
a	Current year		2a				
b	,		2b				
C			2c				
3		6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3				
4	the organization agree to carryover to	n line 2c exceeds the amount on line 3, what portion of the excess does the reasonable estimate of nondeductible lobbying and political	4				
5		cal expenditures (see instructions)	5				
	art IV Supplemental Informa	·					
Pro	vide 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); applete this part for any additional information.	Part II-	-A, lines	s 1 ar	d 2 (se	
3	Return Reference	Explanation					
DV D.		ING THE YEAR IBT MEMBERS AND EMPLOYEES WERE PRESENT AT VARIO	HE DO	LITICAL	DALL	TEC TO	
rak	SUP DEP	ING THE YEAR IBL MEMBERS AND EMPLOYEES WERE PRESENT AT VARIO PORT VARIOUS CANDIDATES RUNNING FOR POLITICAL OFFICE. THE IBT ARTMENTS ASSOCIATED WITH POLITICAL ACTIVITY. THE DEPARTMENT C ULATION AND THE DEPARTMENT OF POLITICAL AND LEGISLATIVE ACTIO	HAS T\	WO SEP ERAL LE	ARAT GISL	E ATION	

IBT EMPLOYEES WORK TIME IS SPENT ON POLITICAL ACTIVITIES.

DEPARTMENTS SPEND 95.00% OF THEIR WORK TIME ON POLITICAL ACTIVITIES. APPROXIMATELY 2.0% OF THE IBT OFFICERS WORK TIME IS SPENT ON POLITICAL ACTIVITIES AND APPROXIMATELY 4.00% OF THE

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As Filed Data -

DLN: 93493307012320

OMB No. 1545-0047

2019

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

	me of the organization ERNATIONAL BROTHERHOOD OF TEAMSTERS			Employer ide	entification num	ber
TIN I	ENIMALIONAL DROTHERHOOD OF TEAMSTERS			53-0215427		
Pa	rt I Organizations Maintaining Donor Advise			r Accounts.		
	Complete if the organization answered "Yes'		rt IV, line 6. dvised funds	(b) Fund	ls and other accou	nte
1	Total number at end of year	(a) Donor a	uviseu iulius	(b) Fulla	s and other accou	1105
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors	in writing that the	essets held in donor ad	vised funds are	the	
•	organization's property, subject to the organization's excl				☐ Yes	□ No
6	Did the organization inform all grantees, donors, and don charitable purposes and not for the benefit of the donor o private benefit?	or donor advisor, or t	or any other purpose c		missible	□ No
Pa	rt II Conservation Easements. Complete if the organization answered "Yes"	" on Form 990, Pa	rt IV, line 7.			
1	Purpose(s) of conservation easements held by the organiz					
	Preservation of land for public use (e.g., recreation of	or education) [Preservation of an	historically imp	ortant land area	
	Protection of natural habitat	Ĺ	Preservation of a c	ertified historic	structure	
	Preservation of open space	_		er unica mistorio	50, 40, 41, 5	
2	Complete lines 2a through 2d if the organization held a qu	ualified concentration	contribution in the for	m of a concent	ntion	
2	easement on the last day of the tax year.	uaimed conservation	contribution in the for		at the End of the	Year
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easements . $\ . \ \ .$		[2b		
С	Number of conservation easements on a certified historic	structure included ir	(a)	2c		
d	Number of conservation easements included in (c) acquire structure listed in the National Register	ed after 7/25/06, an	d not on a historic	2d		
3	Number of conservation easements modified, transferred, tax year ▶	, released, extinguis	hed, or terminated by t	the organizatior	during the	
4	Number of states where property subject to conservation					
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds?	periodic monitoring	, inspection, handling o	of violations,	□ Yes □	No
6	Staff and volunteer hours devoted to monitoring, inspecti	ng, handling of viola	tions, and enforcing co	onservation ease	ements during the	year
7	Amount of expenses incurred in monitoring, inspecting, h ▶ \$	andling of violations	, and enforcing conserv	vation easemen	ts during the year	
8	Does each conservation easement reported on line 2(d) a	bove satisfy the req	uirements of section 17	70(h)(4)(B)(i)		
	and section 170(h)(4)(B)(ii)?				☐ Yes ☐	No
9	In Part XIII, describe how the organization reports conser balance sheet, and include, if applicable, the text of the for the organization's accounting for conservation easements	ootnote to the orgar				
Pai	Complete if the organization answered "Yes"			er Similar As	ssets.	
1a	If the organization elected, as permitted under SFAS 116 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its financial	ublic exhibition, edu	cation, or research in fi			of
b	If the organization elected, as permitted under SFAS 116 historical treasures, or other similar assets held for public following amounts relating to these items:	(ASC 958), to repor	t in its revenue statem	ent and balance erance of public	e sheet works of a service, provide t	rt, :he
(i) Revenue included on Form 990, Part VIII, line 1			▶\$		
(i)Assets included in Form 990, Part X			> \$		_
2	If the organization received or held works of art, historica following amounts required to be reported under SFAS 11			ncial gain, provi	de the	
а	Revenue included on Form 990, Part VIII, line 1			> \$		
b	Assets included in Form 990, Part X					<u></u>
For	Paperwork Reduction Act Notice, see the Instructions			_	edule D (Form 9	90) 2019

d Equipment .

Sche	edule D (Form 990) 2019										Page 2
Par	t III Organizations Maintaining Co	llections c	of Art, Histor	rical T	reası	ıres, or	Other	Similar A	ssets (con	tinued)	
3	Using the organization's acquisition, accessic items (check all that apply):	n, and other	records, check	any of	the fo	llowing t	hat are a	significant	use of its co	llection	
а	Public exhibition		d		Loan	or excha	ange prog	grams			
b	Scholarly research		е		Othe	r					
С	Preservation for future generations										
4	Provide a description of the organization's co Part XIII.	llections and	l explain how th	ney furt	her the	e organiz	ation's e	xempt purpo	ose in		
5	During the year, did the organization solicit or assets to be sold to raise funds rather than t		,						☐ Yes		lo
Pa	rt IV Escrow and Custodial Arrange Complete if the organization ans X, line 21.		" on Form 99	0, Part	IV, li	ne 9, or	reporte	ed an amo	unt on For	n 990,	Part
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?								☐ Yes	□ N	lo
b	If "Yes," explain the arrangement in Part XII	I and comple	ete the followin	a tahle:		[Amount		_
c	, .	•		-		-	1c		anounc		_
d							1d				_
e	- · ·						1e				_
f	Ending balance					ľ	1f				_
2a	Did the organization include an amount on F	orm 990. Pai	rt X. line 21. fo	r escrov	v or cu	Istodial a	ccount lia	ability?	. ∏ Yes		_ lo
b									_		
	art V Endowment Funds.	Check field	e ii the explana	tion na.	, been	provided	a iii i dic.	XIII			
	Complete if the organization ans	wered "Yes	" on Form 99	0, Part	IV, li	ne 10.					
		(a) Currer	nt year (b)	Prior yea	ar	(c) Two y	ears back	(d) Three ye	ears back (e)	Four yea	rs back
	Beginning of year balance										
	Contributions										
	Net investment earnings, gains, and losses										
	Grants or scholarships										
	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end	l balance (line	1g, colu	mn (a)) held a	s:				
а	Board designated or quasi-endowment										
b	Permanent endowment ►										
C	***************************************										
_	The percentages on lines 2a, 2b, and 2c sho										
3а	Are there endowment funds not in the posse organization by:	ssion of the	organization th	at are h	eld an	d admini	stered fo	r the		Yes	No
	(i) unrelated organizations								3a(i))	
	(ii) related organizations								3a(ii))	
b	` '''		•		.? .				. 3b		
4	Describe in Part XIII the intended uses of the		n's endowment	funds.							
Pa	Land, Buildings, and Equipme		" on Form 00	0 Dow	T\ / :	20 112	Coo Fo	000 D	art V lina 1	10	
	Complete if the organization ans Description of property (a) Cost or or		(b) Cost or othe					rm 990, Pa depreciation		Book valu	e
	(investm			,	,						
1a	Land			7'	94,117						794,117
	Buildings				85,945			24,377,379		28	3,708,566
	Leasehold improvements			20,0	-,	-					-,,000

26,847

23,723,010

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

8,195,056

37,697,739

26,847

15,527,954

(1) Financia	Complete if the organization answered "Yes" on Form 990, (a) Description of security or category (including name of security)	(b) Book value	(c) Metho	Part X, line 12. d of valuation: -year market value
				, car market raide
	l derivatives	Value		
(2) Closely-l (3)Other <u> </u>	held equity interests			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Columi	n (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments—Program Related.		11c Soo Form 990	Part V line 13
	Complete if the organization answered 'Yes' on Form 990, I (a) Description of investment	Part IV, line	(b) Book value	(c) Method of valuation:
				Cost or end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Columi	n (b) must equal Form 990, Part X, col.(B) line 13.)		•	
Part IX	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV. line	11d. See Form 990. Pa	t X. line 15.
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col.(B) line 15.)			•
Part X	Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P	art IV, line	11e or 11f.See Form	
1. (1) Federal i	(a) Description of liability			(b) Book value
(2) (2)	medite taxes			
(3)				
(4)				
(5)				
(6)				
(7)				
(0)				İ
(8) (9) Total. (Columi	n (b) must equal Form 990, Part X, col.(B) line 25.)		•	884,966

Part XI

2

а

b

2

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019

1

21,941,774

Page 4

22,112,711

2c Recoveries of prior year grants d Other (Describe in Part XIII.) 2d 170,937 е 2e

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

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

Donated services and use of facilities . . .

Net unrealized gains (losses) on investments

Donated services and use of facilities

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

3

2a

2b

2a

Subtract line 2e from line 1 3 208,697,551 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . 4a 123,467 4b b Add lines **4a** and **4b** 4c 123,467 C 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 208,821,018 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 1 170,278,021

2b Prior year adjustments 2c C 2d d Other (Describe in Part XIII.) . . . Add lines 2a through 2d . 2e е 3 Subtract line 2e from line 1 3 170,278,021 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . . 4a 123,467 4b b Other (Describe in Part XIII.) Add lines **4a** and **4b** 4c 123,467 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 170.401.488

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

chedule D (Form	n 990) 2019	Page 5
Part XIII	Supplemental Info	rmation (continued)
Returi	n Reference	Explanation

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

E INTERNATIONAL UNION.

EIN: 53-0215427

Name: INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Supplemental Information

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

upplemental Information									
Return Reference	Explanation								
PART XI, LINE 2D - OTHER ADJUSTMENTS:	LOSS ON FOREIGN CURRENCY EXCHANGE 170,937.								

S

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493307012320 OMB No. 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2019 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** INTERNATIONAL BROTHERHOOD OF TEAMSTERS 53-0215427 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on 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 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.) 3 (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) (such as, program service, describe for and investments region and independent fundraising, program specific type of in the region contractors in the services, investments, grants service(s) in the region region to recipients located in the region) 3a Sub-total . b Total from continuation sheets to Part I . . . c Totals (add lines 3a and 3b)

	Tago I									
P	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.									
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)		(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
			EUROPE (INCLUDING ICELAND &	CONTRIBUTION	5,713					

	GREENLAND)				
	NORTH AMERICA	CONTRIBUTION	7,498		

Schedule F (Form 990) 2019

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

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

Schedule F (Form 990) 2019

Page 2

	uplicated if addit	(c) Number of		(a) Mannay of as -1-	(f) Amount of	(a) Decembring	(h) Math
ype of grant or assistance	(b) Region	recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other

Sched	dule F (Form 990) 2019		Page 4
Par	Toreign 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)	☐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 (Fe	chedule F (Form 990) 2019 Page 5								
Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting met amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provany additional information. See instructions. 990 Schedule F, Supplemental Information									
Return	Explanation								
Referenc	· ·								

990 Schedule F, Supplemental Information Return Reference Explanation

PART III ACCOUNTING METHOD:

efile GRAPHIC print - DO NOT PROCESS As Filed Data
Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

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: 93493307012320

Open to Public Inspection

nternal Revenue Service ame of the organization						Emmlesses identifi	ation number		
NTERNATIONAL BROTHERHOOD	53-0215427	oyer identification number							
Part I General Inform	ation on Grants	and Assistance				33-0213427			
			the grants or assistance.	the grantees' eligibility	for the grants or assistanc	e. and			
Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?									
Describe in Part IV the org	' '								
			and Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes"	on Form 990, Part IV, line	: 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)									
Enter total number of sectionEnter total number of othe							42 13		
	-								

(Form 990)

Department of the

Treasury

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Additional Data

AEROSPACE MAINTENANCE

GREATER NEW YORK INC

72 AUBURN STREET SAUGUS, MA 01906 ALIGN THE ALLIANCE FOR A

50 BROADWAY NEW YORK, NY 10004

COUNCIL

Software ID:

46-4733307

20-0559291

· ciiii sse/seiieaaie z, i ai e	and and	Tille Abbibtaile ti	, Doinicoule Organiza	tions and Donnest		
(a) Name and address of	(b) EIN		1		(f) Method of valuation	
					/L	

or government		j	assistance	other)	

N/A

501(C)(3)

grant cash

(q) Description of

non-cash assistance

(h) Purpose of grant

FINANCIAL SUPPORT

FINANCIAL SUPPORT

or assistance

organization if applicable | (book, FMV, appraisal, |

Form 990 Schedule T. Part TT. Grants and Other Assistance to Domestic Organizations and Domestic Governments

Name: INTERNATIONAL BROTHERHOOD OF TEAMSTERS

6,000

138,636

EIN: 53-0215427

Software Version:

(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) 52-2094677 501(C)(3) 20.000 ALLIANCE FOR GLOBAL IFINANCIAL SUPPORT

JUSTICE CORP 1247 F ST SE WASHINGTON, DC 20003 13-5628799 501(C)(3) 20.000 IFINANCIAL SUPPORT

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

AMERICAN CIVIL LIBERTIES UNION 125BROAD ST 19TH FLR

NEW YORK, NY 10004

(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 ARISE CHICAGO 20-1072983 501(0)(3) 5 0001 TEINANCIAL SUPPORT

FINANCIAL SUPPORT

711122 01120100		1 3,000		· · · · · · · · · · · · · · · · · · ·
1436 W RANDOLPH ST STE				
202				
CHICAGO, IL 60607				

10.000

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

501(C)(3)

AWOOD CENTER

2511 E FRANKLIN AVE STE 100 MINNEAPOLIS, MN 55406

83-1170235

(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 organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 81-0895767 501(C)(3) 25.000 CAPITAL & MAIN IFINANCIAL SUPPORT 1910 W SUNSET BLVD NO 740

LOS ANGELES, CA 90026

CCF COMMUNITY INITIATIVES 95-4774698 501(C)(3) 5,000 FINANCIAL SUPPORT FUND

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

221 S FIGUEROA ST STE 400 LOS ANGELES, CA 90012

(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 55-0360199 501(C)(3) 5.000 CHILDREN'S HOME SOCIETY IFINANCIAL SUPPORT OF WEST VIRGINIA

PO BOX 2942 CHARLESTON, WV 25330

COMMUNITY CHANGE 52-0888113 501(C)(3) 5,000 FINANCIAL SUPPORT 1536 U STREET NW WASHINGTON, DC 20009

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 58-1811114 501(C)(3) 5.000 IFINANCIAL SUPPORT

COMMUNITY CONCERNS INC 276 DECATUR STREET SE ATLANTA, GA 30312

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

220 FIFTH AVE 2ND FLR NEW YORK, NY 10001

DEMOS 13-4105066 501(C)(3) 5.000 FINANCIAL SUPPORT

(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 organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government DAVIS STREET COMMUNITY 94-3121699 501(C)(3) 5,000 IFINANCIAL SUPPORT

CENTER INC 3081 TEAGARDEN STREET SAN LEANDRO, CA 94577				

1616 P STREET NW STE 210 WASHINGTON, DC 20036

20.000 IFINANCIAL SUPPORT GOOD JOBS FIRST 82-0542649 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 assistance other) or government 63-1135091 501(C)(3) 5.000 EOUAL JUSTICE INITIATIVE IFINANCIAL SUPPORT 122 COMMERCE STREET MONTGOMERY, AL 36104

MONTGOMERY, AL 36104

FOOD CHAIN WORKER 90-0728464 501(C)(3) 5,000
ALLIANCE 1730 W OLMPIC BLVD STE 300

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

LOS ANGELES, CA 90015

(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 assistance other) 13-1624015 501(C)(3) 5.000 GREATER NEW YORK FINANCIAL SUPPORT COUNCILS BOY SCOUTS OF AMEDICA

INTERNATIONAL LABOR	52-1497461	501(C)(3)	20,000		FINANCI
475 RIVERSIDE DRIVE STE 600 NEW YORK, NY 10115					

WASHINGTON, DC 20006

ICIAL SUPPORT RIGHTS FORUM 1634 I STREET NW NO 1001

(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 organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) 13-1675650 501(C)(3) 10.200 IFINANCIAL SUPPORT JEWISH LABOR COMMITTEE 4 40 INTEGT OFFICER OFFI

FLR NEW YORK, NY 10001					
JUVENILE DIABETES RESEARCH FOUNDATION	23-1907729	501(C)(3)	5,000		FINANCIAL SUPPORT

1400 K STREET NW STE 1200 WASHINGTON, DC 20005

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government LABOR COMMUNITY SERVICES | 95-4147259 501(C)(3) 15.000l IFINANCIAL SUPPORT

PO BOX 920041 LOS ANGELES, CA 90006					
LABOR COUNCIL FOR LATIN	52-1002207	501(C)(3)	5,000		FINANCIAL SUPPORT

815 16TH ST NW 3RD FLR 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 if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 52-0789800 501(C)(3) 5.000 LEADERSHIP CONFERENCE ON IFINANCIAL SUPPORT CIVIL AND HUMAN RIGHTS 1620 L ST NW

WASHINGTON, DC 20036 LOS ANGELES ALLIANCE FOR A 95-4459527 501(C)(3) 249.584 IFINANCIAL SUPPORT

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

NEW ECONOMY 464 LUCAS AVENUE SUITE 202

LOS ANGELES, CA 90017

(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) 74-1774063 501(C)(3) 10.000 LYNDON BAINES JOHNSON IFINANCIAL SUPPORT FOUNDATION 2313 RED RIVER AUSTIN.TX 78705 IFINANCIAL SUPPORT

MILLIONS OF GREAT N/A 5.916 AMERICANS

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

PO BOX 33138

WASHINGTON, DC 20033

(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 NATIONAL DEMOCRATIC CLUB E2 0222E04 E01/C1/71 10 0001 TEINANCIAL SUPPORT

30 IVY ST SE WASHINGTON, DC 20003	55-0235594	301(C)(7)	10,000		FINANCIAL SUPPOR
NATIONAL EMPLOYMENT LAW	13-2758558	501(C)(3)	25,000		FINANCIAL SUPPOR

PROJECT 75 MAIDEN LANE STE 601

NEW YORK, NY 10038

(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 33-0494241 501(C)(5) 10.000 NATIONAL TEAMSTERS FINANCIAL SUPPORT HISPANIC CAUCUS 4626 MERCURY ST FINANCIAL SUPPORT

4626 MERCURY ST
SAN DIEGO, CA 92111

NATIONAL MAINTENANCE
AGREEMENT LABORMANAGEMENT POLICY
COMMITTEE
1501 LEE HIGHWAY STE 202

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

ARLINGTON, VA 22209

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) 54-1569127 501(C)(5) 5.000 NORTHERN VIRGINIA LABOR IFINANCIAL SUPPORT FEDERATION

ANNANDALE, VA 22003					
OLD NEWSBOYS' GOODFELLOW FUND OF DETROIT PO BOX 44444	38-6061491	501(C)(3)	5,000		FINANCIAL SUPPORT

DETROIT, MI 48244

(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 PENSION RIGHTS CENTER 52-1059121 501(C)(3) 7.500 IFINANCIAL SUPPORT

1730 M STREET NW WASHINGTON, DC 10036		, , , , ,			
PUBLIC CITIZEN GLOBAL	23-7104508	501(C)(3)	5,000		FINANCIAL SUPPORT

TRADE WATCH 1600 20TH ST NW

WASHINGTON, DC 20009

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance assistance other) or government 23-7213592 501(C)(3) 27.500 ROOSEVELT INSTITUTE IFINANCIAL SUPPORT

FINANCIAL SUPPORT

10.000

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

N/A

570 LEXINGTON AVE 5TH FLR NEW YORK, NY 10022 THE AMERICAN PROJECT

WASHINGTON, DC 20005

SUITE 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 (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government TEAMSTERS LOCAL UNION 299 61-1533183 501(C)(3) 5.000 IFINANCIAL SUPPORT

LASSITANCE

COMMUNITY SERVICES FNDTN 2741 TRUMBALL AVE DETROIT, MI 48216		, , , ,	·		
TEAMSTERS LOCAL UNION 554	47-0199110	501(C)(5)	12,000		DISASTER RELIEF

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

4349 SOUTH 90TH STREET

OMAHA, NE 68127

(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 organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 75-0779628 501(C)(5) 5.000 TEAMSTERS LOCAL UNION 577 IDISASTER RELIEF PO BOX 1609 IASSITANCE TEAMSTERS NATIONAL BLACK 35-1827988 501(C)(10) 15.000l FINANCIAL SUPPORT

AMARILLO, TX 79105 CAUCUS PO BOX 16707

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

MEMPHIS.TN 38186

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government TEAMSTERS LOCAL UNION 769 59-1052667 501(C)(5) 25.000l DISASTER RELIEF

12365 W DIXIE HWY IASSITANCE NORTH MIAMI, FL 33161

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

DAYTON, OH 45413

TEAMSTERS LOCAL UNION 757 31-0329938 501(C)(5) 15.000l DISASTER RELIEF LASSITANCE 2719 ARMSTRONG LANE

(e) Amount of non-(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (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) 52-2093834 501(C)(3) 5,000 FINANCIAL SUPPORT THE AMERICAN ANTITRUST INSTITUTE

1025 CONNECTICUT AVE NW STE 1000 WASHINGTON, DC 20036					
THE AMERICAN CONSTITUTION SOCIETY FOR LAW & POLICY 1333 H STREET NW 11TH	52-2313694	501(C)(3)	5,000		FINANCIAL SUPPORT

FLOOR WASHINGTON, DC 20005

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) THE AMERICAN IRELAND FUND 25-1306992 501(C)(3) 5.000 IFINANCIAL SUPPORT 345 PARK AVE 1705 NEW YORK, NY 10154 THE LADIES OF PIPELINERS 77-0683346 501(C)(3) 5.000 FINANCIAL SUPPORT LOCAL UNION 798 MEMORIAL

FUND PO BOX 125 BIXBY, OK 74008

(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 23-2887086 501(C)(3) 10.000 THE PEGGY BROWING FUND FINANCIAL SUPPORT 100 S BROAD STREET STE 1208 THE SOUTHERN CALIFORNIA & 95-4531147 501(C)(3) 21.000 FINANCIAL SUPPORT SOUTHERN NEVADA

PHILADELPHIA, PA 19103 TEAMSTERS JC 42 CHARITY FUND 981 COPORATE CENTER DRIVE

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

POMONA, CA 91768

(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) THE WAYNE COUNTY SHERIFF 38-2983116 501(C)(3) 5.0001 FINANCIAL SUPPORT

CENTER

675 S PARK VIEW STREET LOS ANGELES, CA 90057

YOUTH & SENIOR EDUCATION FUND 4747 WOODWARD AVENUE		555(5)(5)	2,233		
DETROIT, MI 48201					
UCLA DOWNTOWN LABOR	95-2250801	501(C)(3)	5,000		FINANCIAL SUPPORT

(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 UFCW CHARITY FOUNDATION 52-1979561 501(C)(3) 5.000 IFINANCIAL SUPPORT 1775 K STREET NW

1775 K STREET NW
WASHINGTON, DC 20006

UNITED FARM WORKERS OF 94-1448579 501(C)(5) 5,000

AMERICA
PO BOX 62

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

KEENE, CA 93531

(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, non-cash assistance or assistance organization if applicable grant cash or government assistance other) 52-2254430 501(C)(3) 5.000 WASHINGTON IRELAND IFINANCIAL SUPPORT PROGRAM FOR SERVICE AND

FINANCIAL SUPPORT

LEADERSHIP 620 F STREET NW NO 747 WASHINGTON, DC 20004

10.500

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

501(C)(3)

38-3555142

WAYNE STATE UNIVERSITY

656 WEST KIRBY DETROIT, MI 48202

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 38-3514998 501(C)(3) 5.000 YATOOMA'S FOUNDATION FOR IFINANCIAL SUPPORT

YATOOMA'S FOUNDATION FOR 38-3514998 501(C)(3) 5,000

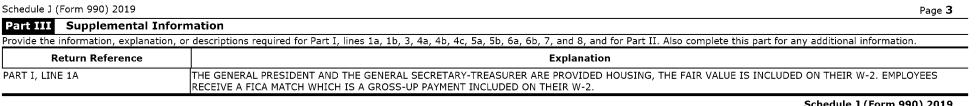
THE KIDS
1615 S TELEGRAPH RD STE
300
BLOOMFIELD HILLS, MI 48302

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

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Dat	ta -	DLN: 9	349330	7012	320
Schedule J		C	ompensat	tion Information		OMB No.	1545-0	0047
(Forr	n 990)	For certain Offic ▶ Complete if the or	: IV, line 23.	2019				
-	tment of the Treasury al Revenue Service	► Go to <u>www.irs.go</u>	ov/Form990 for	r instructions and the latest in	formation.	Open i	to Pul ectio	
	ne of the organiza	ation			Employer identific			
INT	ERNATIONAL BROTH	ERHOOD OF TEAMSTERS			53-0215427			
Pa	rt I Questi	ons Regarding Compensa	ation		33 0213427			
							Yes	No
1a				of the following to or for a person l ny relevant information regarding				
		s or charter travel	lacksquare	Housing allowance or residence	•			
		companions		Payments for business use of pe				
	_	nification and gross-up paymen	ts 🗀	Health or social club dues or init				
	☐ Discretion	ary spending account	Ш	Personal services (e.g., maid, cl	nauffeur, chef)			
b				n follow a written policy regarding ove? If "No," complete Part III to e		1b	Yes	
2				or allowing expenses incurred by		2	Yes	
	directors, truste	es, officers, including the CEO/	executive Directo	or, regarding the items checked or	Time Ia?			
3	organization's C	EO/Executive Director. Check a	III that apply. Do	sed to establish the compensation not check any boxes for methods cCEO/Executive Director, but expla				
	☐ Compensa	ation committee		Written employment contract				
		ent compensation consultant		Compensation survey or study				
	☐ Form 990	of other organizations	\checkmark	Approval by the board or compe	ensation committee			
4	During the year related organiza		990, Part VII, Se	ection A, line 1a, with respect to tl	he filing organization or a	a		
а	Receive a sever	ance payment or change-of-cor	ntrol payment? .			4a		No
b				alified retirement plan?		4b		No
С	Participate in, o	r receive payment from, an equ	ity-based compe	ensation arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons an	d provide the ap	pplicable amounts for each item in	Part III.			
	Only E01(a)(2) E01(a)(4) and E01(a)(20	\	must samplete lines E O				
5), 501(c)(4), and 501(c)(29		I the organization pay or accrue ar	nv			
•		ontingent on the revenues of:	on A, inte 1a, dia	the organization pay or accrue ar	ıy			
а	The organization	1?				5a		
b						5b		
		5a or 5b, describe in Part III.						
6		ed on Form 990, Part VII, Section Contingent on the net earnings o		I the organization pay or accrue ar	ny			
а	The organization	1?				6a		
b	Any related orga	anization?				6b		
	If "Yes," on line	6a or 6b, describe in Part III.						
7				l the organization provide any non art III		7		
8	subject to the in	nitial contract exception describ	ed in Regulations	ured pursuant to a contract that w s section 53.4958-4(a)(3)? If "Yes 	," describe	8		
9				e presumption procedure described		9		
For 5	Danerwork Pedu	iction Act Notice, see the In	structions for F	form 990 Cat N	lo 50053T Schedule	1 (Form	990)	2019

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.										
Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.										
(A) Name and Title	(B) B	(B) Breakdown of W-2 and/or 1099-MISC compensation			(D) Nontaxable benefits	columns	(F) Compensation in			
		e (ii) ion 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				1						



Software ID: **Software Version:**

EIN: 53-0215427

Name: INTERNATIONAL BROTHERHOOD OF TEAMSTERS

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees										
(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in		
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	column (B) reported as deferred on prior Form 990		
1RONALD HERRERA VICE PRESIDENT - TRADE	(i)	124,674	0	11,553	19,873	23,100	179,200	0		
DIV	(ii)	144,300	3,225	14,840	24,300	59,319	245,984	0		
1JIM KABELL INTERNATIONAL TRUSTEE	(i)	83,840	0	8,959	13,364	23,100	129,263	0		
111211111111111111111111111111111111111	(ii)	71,772	0	263	18,232	21,573	111,840	0		
2KEVIN MOORE INTERNATIONAL TRUSTEE	(i)	139,087	0	14,967	22,171	24,933	201,158	0		
	(ii)	118,053	2,400	0	0	12,000	132,453	0		
3 GREGORY FLOYD VICE PRESIDENT	(i)	79,864	0	7,587	12,730	23,160	123,341	0		
	(ii)	303,074	0	20,305	17,902	0	341,281	0		
4DENIS TAYLOR INTERNATIONAL TRUSTEE	(i)	152,965	0	14,659	24,383	23,373	215,380	0		
	(ii)	137,555	0	0	0	0	137,555	0		
5 JAMES P HOFFA GENERAL PRESIDENT	(i)	328,972	0	79,084	52,438	23,373	483,867	0		
	(ii)	1,000	0	0	0	0	1,000	0		
6 JOHN F MURPHY VICE PRESIDENT - AT	(i)	161,807	0	24,734	25,792	23,100	235,433	0		
LARGE	(ii)	35,267	0	2,187	0	21,836	59,290	0		
7 DANIEL J KANE SR VICE PRESIDENT -	(i)	90,066	0	18,293	14,357	24,660	147,376	0		
EASTERN R	(ii)	131,700	0	0	46,566	17,998	196,264	0		
8 FREDRICK P POTTER VICE PRESIDENT - AT	(i)	114,060	0	13,809	18,181	24,660	170,710	0		
LARGE	(ii)	145,604	0	2,525	0	60	148,189	0		
9 FREDDIE N SIMPSON VICE PRESIDENT - AT	(i)	90,066	0	10,959	14,357	2,025	117,407	0		
LARGE	(ii)	166,956	0	25,000	28,793	26,233	246,982	0		
10 GEORGE TEDESCHI VICE PRESIDENT - AT	(i)	90,066	0	18,114	14,357	23,735	146,272	0		
LARGE	(ii)	112,416	0	5,368	2,811	18,585	139,180	0		
11WILLIAM HAMILTON VICE PRESIDENT -	(i)	137,613	0	14,926	21,936	23,160	197,635	0		
EASTERN R	(ii)	199,215	0	0	3,520	1,168	203,903	0		
12 STANLEY J HENNESSY VICE PRESIDENT - CANADA	(i)	63,067	0	1,956	10,053	27,638	102,714	0		
	(ii)	111,095	1,773	19,158	0	7,203	139,229	0		
13RICK MIDDLETON VICE PRESIDENT -	(i)	133,840	0	12,092	21,334	23,100	190,366	0		
WESTERN R	(ii)	210,967	650	0	26,770	19,374	257,761	0		
14GEORGE MIRANDA VICE PRESIDENT - AT	(i)	83,840 	0	11,683	13,364	23,100	131,987	0		
LARGE	(ii)	238,791	0	14,677	0	7,380	260,848	0		
15 CRAIG MCINNES VICE PRESIDENT - CANADA	(i)	63,067	0	0	10,053	27,636 	100,756	0		
4 GCEAN CIRRIEN	(ii)	204,735	0	12,212	0	4,896	221,843	0		
16SEAN O'BRIEN VICE PRESIDENT -	(i)	83,840 	0	7,584	13,364	23,100	127,888	0		
EASTERN R	(ii)	208,020	0	0	0	48,620	256,640	0		
17STEVEN VAIRMA VICE PRESIDENT -	(i)	133,841	0	11,533	21,334	23,220	189,928	0		
WESTERN R	(ii)	129,348	0	27,928	27,227	23,317	207,820	0		
18 RICHARD KEN HALL GENERAL SECTREAS.	(i)	223,574	0	29,462	35,638	23,242	311,916	0		
10FDANCOTC LABORTE	(ii)	0	0	0	0	0	0	0		
19 FRANCOIS LAPORTE VICE PRESIDENT - CANADA	(i)	290,801	0	0	46,354	25,589 	362,744 	0		
	(ii)	39,652	5,723	871	0	0	46,246	0		

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (B) Breakdown of W-2 and/or 1099-MISC compensation (E) Total of columns (A) Name and Title (C) Retirement and (D) Nontaxable (F) Compensation in other deferred benefits (B)(i)-(D)column (B) (i) Base Compensation compensation reported as deferred on Bonus & incentive Other reportable prior Form 990 compensation compensation 21WILLIAM M FRISKY 79,309 10,383 12,642 23,100 125,434 VICE PRESIDENT - CENTRAL 76,600 10,200 20,40 21,549 128,750 1CHARLES A JONES 79,309 10,356 12,642 23,160 125,467 VICE PRESIDENT - CENTRAL 102,614 23,300 16,623 17,576 160,113 2JAMES AVRAL THOMPSON 79,309 10,659 12,642 23,313 125,923 VICE PRESIDENT - CENTRAL 105,505 22,303 11,202 19,960 158,970 3DENNIS PIERCE 36,000 125 5,738 60 41,923 INTERNATIONAL RAIL CONF 240,178 22,303 262,481 259,350 4GARY S WITLEN 15,232 41,340 24,600 340,522 DEPARTMENT DIRECTOR/LEGAL **5**CHRISTINE BAILEY 188,801 15,669 30,095 25,004 259,569 DEPARTMENT DIRECTOR, **6**JEFFREY FARMER 188,207 30,000 25,015 259,397 16,175 DEPARTMENT DIRECTOR/ORGANI **7**BRET CALDWELL 190,494 12,464 30,365 26,809 260,132 DEPARTMENT DIRECTOR/COMMUN 8MICHAEL MANLEY 190,995 30,445 255,620 9,820 24,360 STAFF ATTORNEY 9LAMONT BYRD 186,104 13,536 29,665 25,460 254,765 DEPARTMENT DIRECTOR/SAFETY 10RICHARD GIBSON 187,434 9,949 29,877 26,285 253,545 STAFF ATTORNEY 11NICOLAS MANICONE 168,048 4,592 26,787 31,658 231,085 STAFF ATTORNEY 12NEIL DITCHEK 199,718 31,835 26,772 268,417 10,092 GENERAL PRES ASSISTANT 13IAIN GOLD 176,441 12,323 28,125 26,193 243,082 DEPARTMENT DIRECTOR/STRATEGIC RESEAR 14TODD J THOMPSON 190,827 15,718 30,418 25,004 261,967 SPECIAL ASST TO GP 15FREDERICK DUBINSKY 155,357 22,330 24,764 229,420 26,969 INTERNATIONAL REPRESENTATIVE 16CYNTHIA IMPALA 176,188 15,976 28,084 25,146 245,394 DEPARTMENT DIRECTOR/TRAINING & **DEVEL** 17JOHN SLATERY (i) 163,700 13,499 26,094 25,45 228,750 DEPARTMENT DIRECTOR/BENEFITS 32,500 32,500 18LEAH FORD 212,270 15,581 33,836 24,682 286,369 ASSISTANT DIRECTOR/SPECIAL 19DAVID BOURNE 180,340

25,349

TRADE DIVISION DIRECTOR

65,879

28,746

24,813

259,248

65,879

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (E) Total of columns (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (F) Compensation in benefits other deferred (B)(i)-(D)column (B) (i) Base Compensation (ii) (iii) compensation reported as deferred on Bonus & incentive Other reportable prior Form 990 compensation compensation 41ANTHONY MATHIS 170,295 30,770 27.145 24,884 253,094 ASST TO GST AND **AUDITOR** 1CARIN ZELENKO 178,043 9,100 28,380 30,365 245,888 DEPARTMENT DIRECTOR, CAPITAL STRATEG 2RONALD SCHWAB 157,584 24,641 25,119 24,600 231,944 ASSISTANT DIRECTOR 3LOUIS S BANIECKI 143,736 29,363 22,912 24,573 220,584 INTERNATIONAL AUDITOR 4BRIAN HAIRFIELD 143,306 29,389 22,843 24,360 219.898 INTERNATIONAL AUDITOR 5SCOTT HEGLAND 152,252 23,826 24,269 24,480 224,827 INTERNATIONAL REPRESENTATIVE **6**SCOTT HILTON 143,736 29,326 22,912 24,360 220,334 INTERNATIONAL AUDITOR 7MARION DAVIS 150,876 24,171 24,050 24,600 223,697 DEPT. DIRECTOR, BLDG &

29,110

7,873

83,255

23,314

580

30,405

24,873

1,905

169

223,559

13,997

132,498

8COLLEEN BRADY

CENTRAL R

INTERNATIONAL AUDITOR

9BECKY STRZECHOWSKI P

FORMER VICE PRESIDENT

146,262

3,639

11,169

7,500

efile GRAPH	IC print -	DO NOT PROCESS	As Filed Data -		DLN:	93493307012320				
SCHEDUL	E O	Sunnlament	al Information	190_F7	OMB No. 1545-0047 2019 Open to Public Inspection					
(Form 990 or EZ)		Complete to pro	vide information fo or 990-EZ or to prov	ons on						
Attach to Form 990 or 990-EZ.										
Namel Brthe of INTERNATIONAL B		OF TEAMSTERS			Employer identi 53-0215427	fication number				
990 Schedule	e O, Suppl	emental Informatio	n							
Return Reference	Explanation									
FORM 990, PART VI, SECTION A, LINE 6	THE INTERNATIONAL BROTHERHOOD OF TEAMSTERS (IBT) IS A MEMBERSHIP ORGANIZATION. MEMBERSHIP TO THE ORGANIZATION IS DISCUSSED IN ARTICLE II, SECTION 2(A) OF ITS BY-LAWS WHICH ARE LOCA TED ON IBT'S WEB-SITE WWW.TEAMSTER.ORG.									

Return Explanation
Reference

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

Return Explanation
Reference

FORM 990, PART VI, ACCOUNTANT WHO THEN FORWARDS THE COMPLETED RETURN TO IBT'S GENERAL-SECRETARY TREASURER FOR SECTION B, LINE 11B

Return Explanation

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

Return Explanation
Reference

FORM 990, THE INTERNATIONAL BROTHERHOOD OF TEAMSTERS MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTE PART VI, REST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

SECTION C, LINE 19

Return Explanation Reference

FORM 990. LOSS ON FOREIGN CURRENCY EXCHANGE 170,937. FASB ASC 715 ADJUSTMENT 11.240.431. PART XI.

LINE 9:

990 Schedule O, Supplemental Information

Return Explanation
Reference

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

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493307012320 OMB No. 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships** 2019 (Form 990) ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public Department of the Treasury Inspection Internal Revenue Service **Employer identification number** Name of the organization INTERNATIONAL BROTHERHOOD OF TEAMSTERS 53-0215427 Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (b) (e) Legal domicile (state Direct controlling Name, address, and EIN (if applicable) of disregarded entity Primary activity Total income End-of-year assets or foreign country) entity Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. See Additional Data Table (a)
Name, address, and EIN of related organization (b) (g) Legal domicile (state Exempt Code section Direct controlling Section 512(b) Primary activity Public charity status or foreign country) (if section 501(c)(3)) (13) controlled entity? Yes No For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50135Y Schedule R (Form 990) 2019

					(f) (g)			1)	(i)		i)	(k)	
(a) Name, address, and EIN of related organization			Legal domicile (state or foreign country)	Direct controlling entity	Predominant income(related unrelated, excluded from tax under sections 512-514)	l, total income	Share of end-of-year assets	Disprop alloca		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		ral or aging ner?	Percentag ownershi
					514)			Yes	No		Yes	No	
												\vdash	
												\vdash	
Part IV Identification of Related Organ because it had one or more relate	nizations Taxable as a C	orporation	or Trus	t. Complete	e if the organ	nization ans	wered "Ye	s" on F	orm 9	990, Part IV	, line	: 34	
(a) Name, address, and EIN of	(b)		(c) egal		(d)	(e) /pe of entity	(f) Share of tota		(g) of end	(H	1)	Т.	(i) Section 51
related organization	Primary activity	doi (state	egai micile or foreign intry)			corp, S corp, or trust)	income		year assets	-of- Percel owne			(b)(13) controlled entity?
										i			Yes No
(1)													
TEAMSTERS NATIONAL HEADQUARTERS BUILDING CORPORATION	BUILDING CORPORATION	l	OC .	INTERN BROTHI TEAMS	ATIONAL C ERHOOD OF IERS					100.00	00 %		No
TEAMSTERS NATIONAL HEADQUARTERS BUILDING CORPORATION 25 LOUISIAN AVENUE NW WASHINGTON, DC 20001	BUILDING CORPORATION		OC	BROTH	ERHOOD OF					100.00	00 %		Nc
ŤEĀMSTERS NATIONAL HEADQUARTERS BUILDING CORPORATION 25 LOUISIAN AVENUE NW WASHINGTON, DC 20001	BUILDING CORPORATION		OC	BROTH	ERHOOD OF					100.00	00 %		Nc
TEAMSTERS NATIONAL HEADQUARTERS BUILDING	BUILDING CORPORATION		oc	BROTH	ERHOOD OF					100.00	00 %		Nc
ŤEĀMSTERS NATIONAL HEADQUARTERS BUILDING CORPORATION 25 LOUISIAN AVENUE NW WASHINGTON, DC 20001	BUILDING CORPORATION		OC .	BROTH	ERHOOD OF					100.00	00 %		Nc
TEAMSTERS NATIONAL HEADQUARTERS BUILDING CORPORATION 25 LOUISIAN AVENUE NW WASHINGTON, DC 20001	BUILDING CORPORATION		OC .	BROTHI	ERHOOD OF					100.00	00 %		Nc
ŤEĀMSTERS NATIONAL HEADQUARTERS BUILDING CORPORATION 25 LOUISIAN AVENUE NW WASHINGTON, DC 20001	BUILDING CORPORATION		OC .	BROTHI	ERHOOD OF					100.00	00 %		Nc
TEAMSTERS NATIONAL HEADQUARTERS BUILDING CORPORATION 25 LOUISIAN AVENUE NW WASHINGTON, DC 20001	BUILDING CORPORATION		OC .	BROTHI	ERHOOD OF					100.00	000 %		Nc

Lease of facilities, equipment, or other assets to related organization(s) .

Reimbursement paid to related organization(s) for expenses . . .

Reimbursement paid by related organization(s) for expenses .

r Other transfer of cash or property to related organization(s) . . .

(1)INTERNATIONAL BROTHERHOOD OF TEAMSTERS VOLUNTARY EMPLOYEE BENEFITS TRUST

(2) INTERNATIONAL BROTHERHOOD OF TEAMSTERS SUPPLEMENTAL BENEFITS TRUST

(5) THE COMMITTEE FOR DEMOREPINDEPENDENT VOTER EDUCATION (DRIVE)

(3)THE TEAMSTER AFFILIATES PENSION PLAN

(4) RETIREMENT AND FAMILY PROTECTION PLAN

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . .

Name of related organization

Performance of services or membership or fundraising solicitations for related organization(s)

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 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?									
а	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							
С	Gift, grant, or capital contribution from related organization(s)	1c		No						
		1.4		No						

Page 3

1j

1k

1m

1p

1r Yes

1s

Schedule R (Form 990) 2019

(d)

Method of determining amount involved

|1n| Yes 10 Yes

Yes **1**q

No

No

No

No

No

No

				1
b	Gift, grant, or capital contribution to related organization(s)	1 b	Yes	
С	Gift, grant, or capital contribution from related organization(s)	1c		No
d	Loans or loan guarantees to or for related organization(s)	1 d		No
е	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1f		No

D	Girt, grant, or capital contribution to related organization(s)	1.0	163	
С	Gift, grant, or capital contribution from related organization(s)	1c		No
d	Loans or loan guarantees to or for related organization(s)	1 d		No
е	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1f		No
g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1i		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(b)

Transaction

type (a-s)

(c)

Amount involved

270,698

235,677

707,061

267.471

53,334

FMV

FMV

FMV

FMV

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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	Ar	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ate ?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General d managin partner?	or g ?	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
			1			ı				Schedul	e R (Form	990	0) 2019

Schedule R (Fo	rm 990) 2019		Page 5
Part VII	Supplemental Info	ormation	
	Provide additional infor	mation for responses to questions on Schedule R. (see instructions).	
Return Reference		Explanation	

25 LOUISIANA AVENUE NW WASHINGTON, DC 20001

27-0765573

Software ID: Software Version:

EIN: 53-0215427

	EIN: 53-0215427 Name: INTERNATIONAL	BROTHERHOOD O	F TEAMSTERS				
Form 990, Schedule R, Part II - Identification of Re	lated Tax-Exempt Organiza	itions					
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	Section (b)(1 control entit	n 512 13) olled
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001	POLITICAL ACTION COMMITTEE	DC	SECTION 527			1103	No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 52-6128127	PENSION FUND	DC	401(A)/501(A)				No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 53-0215427	PENSION FUND	DC	401(A)/501(A)				No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 52-1967784	PENSION FUND	DC	401(A)/501(A)				No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 01-6196051	VEBA TRUST	DC	501(C)(9)				No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 52-1790540	CHARITABLE RELIEF FUND	DC	501(C)(3)	170(B)(1)(A)(VI)			No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 20-0412571	SUPPLEMENTAL BENEFITS TRUST	DC	501(C)(5)				No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 26-2912925	POLITICAL ACTION COMMITTEE	DC	SECTION 527				No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 26-3361356	LEGAL DEFENSE FUND	DC	501(C)(9)				No
25 LOUISIANA AVENUE NW WASHINGTON, DC 20001 27-4722755	VEBA TRUST	DC	501(C)(4)				No
25 LOUISTANA AVENUE NW	POLITICAL ACTION COMMITTEE	FL	SECTION 527				No