

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public
Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047
2016
Open to Public Inspection

A For the 2016 calendar year, or tax year beginning 01-01-2016, and ending 12-31-2016

- B** Check if applicable:
 Address change
 Name change
 Initial return
 Final
 Return/terminated
 Amended return
 Application pending

C Name of organization
AIR LINE PILOTS ASSOCIATION INTERNATIONAL
% ELIZABETH ROBINSON
Doing business as
Number and street (or P O box if mail is not delivered to street address) Room/suite
535 HERNDON PARKWAY
City or town, state or province, country, and ZIP or foreign postal code
HERNDON, VA 20170

D Employer identification number
36-0710830
E Telephone number
(703) 689-4170
G Gross receipts \$ 220,450,907

F Name and address of principal officer
CAPTAIN TIMOTHY G CANOLL
535 HERNDON PARKWAY
HERNDON, VA 20170

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status 501(c)(3) 501(c) (5) ◀ (insert no) 4947(a)(1) or 527

J Website: ▶ HTTP //WWW ALPA ORG

K Form of organization Corporation Trust Association Other ▶

L Year of formation 1931

M State of legal domicile VA

Part I Summary

1 Briefly describe the organization's mission or most significant activities
THE ORGANIZATION'S PRIMARY EXEMPT PURPOSE IS TO PROMOTE THE INTERESTS OF THE AIRLINE PILOTING PROFESSION AND TO SAFEGUARD THE RIGHTS, INDIVIDUALLY AND COLLECTIVELY, OF ITS MEMBERS

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	190
4 Number of independent voting members of the governing body (Part VI, line 1b)	187
5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	329
6 Total number of volunteers (estimate if necessary)	410
7a Total unrelated business revenue from Part VIII, column (C), line 12	335,497
7b Net unrelated business taxable income from Form 990-T, line 34	-9,832

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	0	0
9 Program service revenue (Part VIII, line 2g)	141,518,253	182,950,939
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,384,139	3,391,604
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	671,230	384,632
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	144,573,622	186,727,175
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	133,121	138,253
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	60,400,343	68,947,841
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	76,904,193	77,551,131
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	137,437,657	146,637,225
19 Revenue less expenses Subtract line 18 from line 12	7,135,965	40,089,950

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	107,625,017	167,418,863
21 Total liabilities (Part X, line 26)	86,240,372	87,238,072
22 Net assets or fund balances Subtract line 21 from line 20	21,384,645	80,180,791

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer
Date 2017-11-14
W RANDOLPH HELLING vp finance/treasurer
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name MARY TORRETTA
Preparer's signature MARY TORRETTA
Date
Check if self-employed PTIN P00847851
Firm's name ▶ Grant Thornton LLP Firm's EIN ▶
Firm's address ▶ 1000 WILSON BLVD SUITE 1400 ARLINGTON, VA 22209 Phone no (703) 847-7500

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission
 THE ORGANIZATION'S PRIMARY EXEMPT PURPOSE IS TO PROMOTE THE INTERESTS OF THE AIRLINE PILOTING PROFESSION AND TO SAFEGUARD THE RIGHTS, INDIVIDUALLY AND COLLECTIVELY, OF ITS MEMBERS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
 If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
 If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses \$ including grants of \$) (Revenue \$)
 See Additional Data

















4b (Code) (Expenses \$ including grants of \$) (Revenue \$)
 See Additional Data

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)
 See Additional Data

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

4e Total program service expenses ▶

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		No
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		
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		No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 		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 		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 		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 	Yes	
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 		No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 		No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 		No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 		No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 		No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a Did the organization maintain an office, employees, or agents outside of the United States?	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 	Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 	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 		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)		No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include 20a, 20b, 21, 22, 23, 24a, 24b, 24c, 24d, 25a, 25b, 26, 27, 28a, 28b, 28c, 29, 30, 31, 32, 33, 34, 35a, 35b, 36, 37, 38.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question number, question text, and Yes/No response. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited transactions, solicitations, and charitable trusts.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (190), 1b (187), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

Table with 3 columns: Question, Yes, No. Rows include: 17, 18, 19, 20.

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)							(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				
See Additional Data Table											

1b Sub-Total	▶		
1c Total from continuation sheets to Part VII, Section A	▶		
1d Total (add lines 1b and 1c)	▶	10,746,585	0

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 178		
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
Cohen Weiss Simon, 900 Third Avenue NEW YORK, NY 10022	Legal	2,384,626
Virtual Flight Surgeons Inc, 7000 S Yosemite Street 110 CENTENNIAL, CO 80112	Aeromedical Advisors	2,148,846
Kelly Press Inc, 1701 Cabin Branch Drive CHEVERLY, MD 20785	Printing	1,116,447
1625 Massachusetts Avenue LLC, C/O Pilot Mgmt Inc 4922A St Elmo A BETHESDA, MD 20814	Real Estate Leasing	883,033
NG One Hartsfield Centre LLC, PO BOX 936087 ATLANTA, GA 31193	Real Estate Leasing	858,158

2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 29
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Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a					
	b Membership dues . . .	1b					
	c Fundraising events . . .	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f \$ _____						
	h Total. Add lines 1a-1f			0			
Program Service Revenue		Business Code					
	2a MEMBERSHIP DUES	900099	179,626,450	179,626,450			
	b PUBLICATIONS	541800	2,342,588	2,158,353	184,235		
	c MEMBER BENEFITS	900099	981,901	981,901			
	d _____						
	e _____						
	f All other program service revenue						
g Total. Add lines 2a-2f			182,950,939				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		2,769,122			2,769,122	
	4 Income from investment of tax-exempt bond proceeds		0				
	5 Royalties		17,473			17,473	
	6a Gross rents	(i) Real	(ii) Personal				
		b Less rental expenses					
		c Rental income or (loss)	0	0			
		d Net rental income or (loss)			0		0
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less cost or other basis and sales expenses					
		c Gain or (loss)	614,955	7,527			
		d Net gain or (loss)			622,482		622,482
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a	0				
		b Less direct expenses	b	0			
		c Net income or (loss) from fundraising events			0		
	9a Gross income from gaming activities See Part IV, line 19	a	0				
		b Less direct expenses	b	0			
		c Net income or (loss) from gaming activities			0		
10a Gross sales of inventory, less returns and allowances	a	0					
	b Less cost of goods sold	b	0				
	c Net income or (loss) from sales of inventory			0		0	
Miscellaneous Revenue	Business Code						
11a CONSULTING	900099	151,262		151,262			
b MISCELLANEOUS	900099	215,897			215,897		
c _____							
d All other revenue							
e Total. Add lines 11a-11d			367,159				
12 Total revenue. See Instructions			186,727,175	182,766,704	335,497	3,624,974	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	125,835			
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	12,418	0		
4 Benefits paid to or for members.	0			
5 Compensation of current officers, directors, trustees, and key employees.	8,579,330			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0			
7 Other salaries and wages.	43,739,350			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	3,692,161			
9 Other employee benefits.	8,884,838			
10 Payroll taxes.	4,052,162			
11 Fees for services (non-employees)				
a Management.	0			
b Legal.	2,930,129	0	0	
c Accounting.	284,750		0	
d Lobbying.	0			
e Professional fundraising services. See Part IV, line 17.	0			
f Investment management fees.	0		0	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	6,411,009			
12 Advertising and promotion.	445,977			
13 Office expenses.	2,341,356			
14 Information technology.	842,449			
15 Royalties.	0			
16 Occupancy.	5,776,243			
17 Travel.	12,423,430			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19 Conferences, conventions, and meetings.	4,219,167			
20 Interest.	969		0	
21 Payments to affiliates.	0			
22 Depreciation, depletion, and amortization.	1,796,109	0	0	
23 Insurance.	1,981,234		0	
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 UNRELATED BUSINESS TAXES	1,429	0	0	0
b FLIGHT PAY LOSS & RELATED	33,800,099	0	0	0
c OTHER EXPENSES	3,139,505	0	0	0
d PER CAPITA DUES	1,157,276	0	0	0
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e.	146,637,225	0	0	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	2,052	1	2,054
	2 Savings and temporary cash investments	19,722,786	2	38,585,722
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	4,050,997	4	6,315,060
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	0	6	0
	7 Notes and loans receivable, net	2,549,966	7	2,485,019
	8 Inventories for sale or use	0	8	0
	9 Prepaid expenses and deferred charges	1,824,100	9	3,007,703
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	24,409,321		
	b Less accumulated depreciation	18,675,417		
	11 Investments—publicly traded securities	67,538,793	11	106,456,807
	12 Investments—other securities See Part IV, line 11	3,698,460	12	2,374,614
	13 Investments—program-related See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets See Part IV, line 11	2,537,064	15	2,457,980
16 Total assets. Add lines 1 through 15 (must equal line 34)	107,625,017	16	167,418,863	
Liabilities	17 Accounts payable and accrued expenses	29,975,454	17	42,746,217
	18 Grants payable	0	18	0
	19 Deferred revenue	20,898,649	19	0
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	35,366,269	25	44,491,855
	26 Total liabilities. Add lines 17 through 25	86,240,372	26	87,238,072
Net Assets or Fund Balances	27 Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	21,384,645	27	80,180,791
	28 Temporarily restricted net assets	0	28	0
	29 Permanently restricted net assets	0	29	0
	30 Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	21,384,645	33	80,180,791
	34 Total liabilities and net assets/fund balances	107,625,017	34	167,418,863

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	186,727,175
2	Total expenses (must equal Part IX, column (A), line 25)	2	146,637,225
3	Revenue less expenses Subtract line 2 from line 1	3	40,089,950
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	21,384,645
5	Net unrealized gains (losses) on investments	5	1,516,114
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	19,135,336
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-1,945,254
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	80,180,791

Part XII Financial Statements and Reporting

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

		Yes	No
<p>1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____</p> <p>If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O</p>			
<p>2a Were the organization's financial statements compiled or reviewed by an independent accountant?</p> <p>If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both</p> <p><input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2a		No
<p>b Were the organization's financial statements audited by an independent accountant?</p> <p>If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both</p> <p><input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2b	Yes	
<p>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?</p> <p>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O</p>	2c	Yes	
<p>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?</p>	3a		No
<p>b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits</p>	3b		

Additional Data

Software ID:

Software Version:

EIN: 36-0710830

Name: AIR LINE PILOTS ASSOCIATION INTERNATIONAL

Form 990 (2016)

Form 990, Part III, Line 4a:

SEE SCHEDULE O

Form 990, Part III, Line 4b:

SEE SCHEDULE O

Form 990, Part III, Line 4c:

SEE SCHEDULE O

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Sch O For List Board of Directors	1 0 0 0	X						0	0	0
Joe DePete First Vice-President	50 0 5 0			X				177,833	0	0
William Couette VP Administration/Secretary	50 0 5 0			X				205,320	0	0
W Randolph Helling VP Finance/Treasurer	50 0 5 0			X				183,417	0	0
Timothy Canoll President	60 0 5 0			X				1,109,273	0	67,400
Lawrence Beck Executive Vice President	10 0 0 0			X				6,000	0	0
Andrew Massey Executive Vice President	10 0 0 0			X				6,000	0	0
Christopher Suhs Executive Vice President	10 0 0 0			X				6,000	0	0
Michael McMackin Executive Vice President	10 0 0 0			X				6,000	0	0
Russell Sklenka Executive Vice President	10 0 0 0			X				6,000	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Paul Stuart Executive Vice President	10 0 0 0			X				12,384	0	0
Dan Adamus Executive Vice President	10 0 0 0			X				6,154	0	0
Lori Garver General Manager	40 0 5 0			X				494,573	0	36,605
Elizabeth Robinson Dir. Of Finance/CFO	40 0 5 0			X				370,189	0	35,004
Ricardo Dominguez Executive Administrator	40 0 0 0			X				196,238	0	0
Jonathan Cohen General Counsel/Dir, Legal	40 0 0 0				X			487,567	0	62,695
James Johnson Sr. Managing Attorney	40 0 0 0				X			387,279	0	58,774
Bruce York Sr. Advisor & Chief Negotiator	40 0 0 0				X			551,049	0	69,031
William Roberts Asst. Dir. Representation	40 0 0 0				X			385,450	0	102,269
Howard Hagy Dir. of Engineering Air Safety	40 0 0 0				X			373,171	0	68,124

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Ana McAhron-Schulz Director of Economic Financial	40 0 0 0				X			378,868	0	67,333
Elizabeth Ginsburg Director of Representation	40 0 0 0				X			423,800	0	66,802
Elizabeth Koby Sr Managing Attorney	40 0 5 0				X			354,172	0	59,134
Arthur Luby Asst Dir Representation	40 0 0 0				X			345,276	0	59,037
GC Warner Sr Managing Attorney	40 0 0 0				X			347,716	0	65,656
Marie Schwartz Dir of Strategic Mem Dev & Res	40 0 0 0				X			319,992	0	64,254
Marcus Migliore Sr Managing Attorney	40 0 0 0				X			348,177	0	62,191
Kelly Collie Dir of Human Resources	40 0 2 0				X			302,107	0	63,941
Andrew Shostack Asst Dir Representation	40 0 0 0				X			326,276	0	55,647
David Krieger Managing Director	40 0 0 0				X			428,245	0	65,119

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Richard Harrell Dir of IT & Services	40 0 0 0				X			296,775	0	66,184
Elizabeth Baker Dir Of Government Affairs	40 0 0 0				X			291,619	0	30,715
Catherine St Denis Dir Of Communications	40 0 0 0				X			152,404	0	26,499
Robert Bailey Senior Attorney	40 0 0 0					X		311,710	0	79,937
Elwyn Woody Sr Benefits Attorney	40 0 0 0					X		298,799	0	67,637
John Schleder Sr Lbr Rel Cnsl/MEC Coord	40 0 0 0					X		296,267	0	65,562
Robert Plunkett Sr Lbr Relations Counsel	40 0 0 0					X		273,101	0	61,585
Jane Schraft Sr Lbr Rel Cnsl/MEC Coord	40 0 0 0					X		281,384	0	57,283

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047
2016
Open to Public Inspection

▶ 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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization
AIR LINE PILOTS ASSOCIATION INTERNATIONAL

Employer identification number
36-0710830

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

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

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

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

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

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

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

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

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

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

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- | | Amount |
|--|-----------|
| c Beginning balance | 2,159,226 |
| d Additions during the year | 7,045 |
| e Distributions during the year | 118,212 |
| f Ending balance | 2,048,059 |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

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

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

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | | |
|--|------------|-----------|
| (i) unrelated organizations | Yes | No |
| 3a(i) | | |
| (ii) related organizations | | |
| 3a(ii) | | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | | |
| 3b | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0			0
b Buildings	0		0	0
c Leasehold improvements		5,461,951	3,647,283	1,814,668
d Equipment	0	18,947,370	15,028,134	3,919,236
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				5,733,904

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

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

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

(a) Description of liability	(b) Book value
(1) Federal income taxes	0
POSTRETIREMENT BENEFITS - RETIREE	29,194,376
DEFERRED LIABILITIES	11,928,563
POSTRETIREMENT BENEFITS - PENSION	3,368,872
OTHER LIABILITIES	44
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	44,491,855

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

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

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

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

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

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

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

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 36-0710830

Name: AIR LINE PILOTS ASSOCIATION INTERNATIONAL

Supplemental Information

Return Reference	Explanation
AGENT, TRUSTEE, CUSTODIAN, ETC ARRANGEMENT	SCHEDULE D, PART IV, LINE 1B Air Line Pilots Association, International ("ALPA"Association") COLLECTS ASSESSMENT PAYMENTS ON BEHALF OF THE MASTER EXECUTIVE COUNCIL (MEC) AND DEPOSITS COLLECTED FUNDS INTO SEPARATE MEC ACCOUNTS WHICH ALPA ADMINISTERS AND MAKES PAYMENTS OUT OF THE ACCOUNTS AS APPROVED BY THE MEC THESE ACCOUNTS ARE NOT INCLUDED IN THE ALPA'S AUDITED CONSOLIDATED FINANCIAL STATEMENTS AND FORM 990

Supplemental Information

Return Reference	Explanation
LIABILITY FOR UNCERTAIN TAX POSITIONS (ASC 740)	<p>SCHEDULE D, PART X, LINE 2 THE ASSOCIATION IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE CODE SECTION 501(C)(5), THOUGH THEY ARE SUBJECT TO TAX ON INCOME UNRELATED TO ITS EXEMPT PURPOSE, UNLESS THAT INCOME IS OTHERWISE EXCLUDED BY THE CODE REVENUE FROM INVESTMENTS IN PARTNERSHIPS, ADVERTISING AND CONSULTING IS TAXABLE AS UNRELATED BUSINESS INCOME</p> <p>THE ASSOCIATION HAS PROCESSES PRESENTLY IN PLACE TO ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS, TO IDENTIFY AND REPORT UNRELATED INCOME, TO DETERMINE ITS FILING AND TAX OBLIGATIONS IN JURISDICTIONS FOR WHICH IT HAS NEXUS, AND TO IDENTIFY AND EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS THE TAX YEARS ENDING DECEMBER 31, 2016, 2015, 2014, AND 2013 ARE STILL OPEN TO AUDIT FOR BOTH FEDERAL AND STATE PURPOSES THE ASSOCIATION HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS THE ASSOCIATION FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, INCLUDING ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT THIS GUIDANCE PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN ONLY BE RECOGNIZED IN THE FINANCIAL STATEMENTS IF THE POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY THE ASSESSMENT OF THE TAX POSITION IS BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED</p>

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.
▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

**Open to Public
Inspection**

Name of the organization
AIR LINE PILOTS ASSOCIATION INTERNATIONAL

Employer identification number

36-0710830

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States
- 3** Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	3	8			6,535,982
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	3	8			6,535,982

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to 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)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								

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

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A)* 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)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; 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 provide any additional information (see instructions).

Return Reference	Explanation
Accounting method	Schedule F, Part I, Column F The expenditures, per region, are presented on the accrual basis of accounting

Additional Data

Software ID:

Software Version:

EIN: 36-0710830

Name: AIR LINE PILOTS ASSOCIATION INTERNATIONAL

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
North America	3	8	Program Services	See program services	1,431,422
North America			Program Services	Contribution	12,418
Central America and the Caribbean			Investments	Captive Insurance Co	2,717,528

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean			Investments		2,374,614

**Schedule I
(Form 990)**

Department of the
Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments and Individuals in the United States**
Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047
2016
**Open to Public
Inspection**

Name of the organization
AIR LINE PILOTS ASSOCIATION INTERNATIONAL

Employer identification number
36-0710830

Part I General Information on Grants and Assistance

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

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

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

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	1
3	Enter total number of other organizations listed in the line 1 table	4

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PROCEDURE FOR MONITORING USE OF GRANT FUNDS INSIDE U S	SCHEDULE I, PART I, LINE 2 ALPA'S GRANTS/ASSISTANCES ARE SPONSORSHIPS OR SCHOLARSHIPS FOR ONE-TIME EVENTS ALPA SPECIFIES THE PURPOSE OF THE GRANTS/ASSISTANCE IN THE AWARD LETTER WHEN IT IS DISBURSED THE EXECUTIVE COUNCIL APPROVES ALL CONTRIBUTIONS AS PART OF THE BUDGETING PROCESS

Additional Data

Software ID:
Software Version:
EIN: 36-0710830
Name: AIR LINE PILOTS ASSOCIATION INTERNATIONAL

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AERO CLUB OF WASHINGTON PO BOX 17295 WASHINGTON, DC 20041	52-6054159	501(c)(6)	9,600				CONTRIBUTION
AMERICAN ASSOCIATION OF AIRPORT EXECUTIVES 601 MADISON STREET Alexandria, VA 22314	51-0094939	501(c)(6)	12,000				CONTRIBUTION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERNATIONAL AVIATION CLUB PO BOX 65585 WASHINGTON, DC 20035	52-1190359	501(c)(7)	6,285				CONTRIBUTION
WAYNE STATE UNIVERSITY 5401 Cass Ave DETROIT, MI 48202	38-6028429	501(c)(3)	35,000				CONTRIBUTION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
National Democratic Club 30 Ivy Street SE WASHINGTON, DC 20003	53-0233594	501(c)(7)	6,000				CONTRIBUTION

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

OMB No 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
 ▶ **Attach to Form 990.**

2015
Open to Public Inspection

▶ **Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.**

Name of the organization
AIR LINE PILOTS ASSOCIATION INTERNATIONAL

Employer identification number
36-0710830

Part I Questions Regarding Compensation

	Yes	No
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <p> <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Travel for companions <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Tax idemnification and gross-up payments <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) </p>		
<p>b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.</p>	Yes	
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	Yes	
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <p> <input type="checkbox"/> Compensation committee <input type="checkbox"/> Written employment contract <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Compensation survey or study <input type="checkbox"/> Form 990 of other organizations <input type="checkbox"/> Approval by the board or compensation committee </p>		
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:</p> <p>a Receive a severance payment or change-of-control payment?</p>		No
<p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>	Yes	
<p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>		No
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p>		
<p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p>a The organization?</p>		
<p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>		
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p>a The organization?</p>		
<p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>		
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>		
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.</p>		
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>		

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that 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) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

Part III Supplemental Information

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

Return Reference	Explanation
See Additional Data	

Additional Data

Software ID:
Software Version:
EIN: 36-0710830
Name: AIR LINE PILOTS ASSOCIATION INTERNATIONAL

Part III, Supplemental Information

Return Reference	Explanation
HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE	SCHEDULE J, PART I, LINE 1A A NATIONAL OFFICER WHO INCURS EXPENSES WHEN THEY MAINTAIN A PRIMARY RESIDENCE OUTSIDE OF THE WASHINGTON, DC AREA IS REIMBURSED FOR APPROPRIATE HOUSING, MEALS, AND INCIDENTAL EXPENSES WHILE IN THE WASHINGTON, DC AREA AND TRANSPORTATION BETWEEN HIS/HER PRIMARY RESIDENCE OUTSIDE THE WASHINGTON, DC AREA AND WASHINGTON, DC THIS POLICY HAS BEEN APPROVED BY THE ALPA BOARD OF DIRECTORS AMOUNTS PROVIDED ARE REPORTED AS TAXABLE TO THE RECIPIENT

Part III, Supplemental Information

Return Reference	Explanation
DISCRETIONARY SPENDING ACCOUNT	SCHEDULE J, PART I, LINE 1A THE NATIONAL OFFICERS RECEIVE A MONTHLY PAYMENT FOR REIMBURSEMENT OF EXTRAORDINARY EXPENSES, BOTH PERSONAL AND BUSINESS, ASSOCIATED WITH SERVICES IN AN ALPA NATIONAL OFFICER POSITION NOT UNDER AN ACCOUNTABLE PLAN THIS PAYMENT WAS APPROVED BY THE ALPA BOARD OF DIRECTORS

Part III, Supplemental Information

Return Reference	Explanation
SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	SCHEDULE J, PART I, LINE 4B ADDITIONAL TAXABLE COMPENSATION RELATED TO A 457(F) NONQUALIFIED DEFERRED COMPENSATION PLAN WAS REPORTED ON SCHEDULE J, PART II, COLUMN (B) (III) AS NOTED BELOW (1) TIMOTHY G CANOLL - \$365,979 (2) BRUCE YORK - \$96,560

Part III, Supplemental Information

Return Reference	Explanation
PRESIDENT'S REPORTABLE COMPENSATION	SCHEDULE J, PART II THE PRESIDENT'S REPORTABLE COMPENSATION INCLUDED SALARY, TAXABLE ALLOWANCES AND NONQUALIFIED DEFERRED COMPENSATION THE COMPENSATION PACKAGE WAS REVIEWED AND APPROVED BY ALPA BOARD OF DIRECTORS

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 Joe DePete First Vice-President	(i)	0	0	177,833	0	0	177,833	0
	(ii)	0	0	0	0	0	0	0
1 William Couette VP Administration/Secretary	(i)	0	0	205,320	0	0	205,320	0
	(ii)	0	0	0	0	0	0	0
2 W Randolph Helling VP Finance/Treasurer	(i)	0	0	183,417	0	0	183,417	0
	(ii)	0	0	0	0	0	0	0
3 Timothy Canoll President	(i)	477,659	26,400	605,214	26,500	40,900	1,176,673	0
	(ii)	0	0	0	0	0	0	0
4 Jonathan Cohen General Counsel/Dir, Legal	(i)	424,033	23,861	39,673	26,500	36,195	550,262	0
	(ii)	0	0	0	0	0	0	0
5 James Johnson Sr Managing Attorney	(i)	336,448	20,651	30,180	26,500	32,274	446,053	0
	(ii)	0	0	0	0	0	0	0
6 Bruce York Sr Advisor & Chief Negotiator	(i)	396,614	22,818	131,617	26,500	42,531	620,080	0
	(ii)	0	0	0	0	0	0	0
7 William Roberts Asst Dir Representation	(i)	277,155	21,091	87,204	26,500	75,769	487,719	0
	(ii)	0	0	0	0	0	0	0
8 Howard Hagy Dir of Engineering Air Safety	(i)	319,590	19,942	33,639	26,500	41,624	441,295	0
	(ii)	0	0	0	0	0	0	0
9 Ana Mcahron-Schulz Director of Economic Financial	(i)	327,741	20,540	30,587	26,500	40,833	446,201	0
	(ii)	0	0	0	0	0	0	0
10 Elizabeth Ginsburg Director of Representation	(i)	371,051	21,835	30,914	26,500	40,302	490,602	0
	(ii)	0	0	0	0	0	0	0
11 Elizabeth Koby Sr Managing Attorney	(i)	311,243	19,625	23,304	26,500	32,634	413,306	0
	(ii)	0	0	0	0	0	0	0
12 Arthur Luby Asst Dir Representation	(i)	304,182	19,332	21,762	26,500	32,537	404,313	0
	(ii)	0	0	0	0	0	0	0
13 GC Warner Sr Managing Attorney	(i)	307,474	19,601	20,641	26,500	39,156	413,372	0
	(ii)	0	0	0	0	0	0	0
14 Marie Schwartz Dir of Strategic Mem Dev & Res	(i)	293,071	18,984	7,937	26,500	37,754	384,246	0
	(ii)	0	0	0	0	0	0	0
15 Marcus Migliore Sr Managing Attorney	(i)	307,735	19,601	20,841	26,500	35,691	410,368	0
	(ii)	0	0	0	0	0	0	0
16 Kelly Collie Dir of Human Resources	(i)	270,321	18,113	13,673	26,500	37,441	366,048	0
	(ii)	0	0	0	0	0	0	0
17 Robert Bailey Senior Attorney	(i)	277,927	18,970	14,813	26,500	53,437	391,647	0
	(ii)	0	0	0	0	0	0	0
18 Elwyn Woody Sr Benefits Attorney	(i)	276,984	18,694	3,121	26,500	41,137	366,436	0
	(ii)	0	0	0	0	0	0	0
19 Andrew Shostack Asst Dir Representation	(i)	288,641	18,773	18,862	26,500	29,147	381,923	0
	(ii)	0	0	0	0	0	0	0

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation				
21 Lon Garver General Manager	(i)	445,196	24,436	24,941	26,500	10,105	531,178	0
	(ii)	0	0	0	0	0	0	0
1 David Kneger Managing Director	(i)	376,717	22,049	29,479	26,500	38,619	493,364	0
	(ii)	0	0	0	0	0	0	0
2 John Schleder Sr Lbr Rel Cnsl/MEC Coord	(i)	267,538	17,595	11,134	26,500	39,062	361,829	0
	(ii)	0	0	0	0	0	0	0
3 Richard Harrell Dir of IT & Services	(i)	265,834	17,931	13,010	26,500	39,684	362,959	0
	(ii)	0	0	0	0	0	0	0
4 Elizabeth Baker Dir Of Government Affairs	(i)	269,718	17,872	4,029	26,500	4,215	322,334	0
	(ii)	0	0	0	0	0	0	0
5 Cathenne St Denis Dir Of Communications	(i)	117,120	17,827	17,457	15,146	11,353	178,903	0
	(ii)	0	0	0	0	0	0	0
6 Elizabeth Robinson Dir Of Finance/CFO	(i)	341,600	20,536	8,053	26,500	8,504	405,193	0
	(ii)	0	0	0	0	0	0	0
7 Ricardo Dominguez Executive Administrator	(i)	0	0	196,238	0	0	196,238	0
	(ii)	0	0	0	0	0	0	0
8 Robert Plunkett Sr Lbr Relations Counsel	(i)	253,131	17,706	2,264	26,500	35,085	334,686	0
	(ii)	0	0	0	0	0	0	0
9 Jane Schraft Sr Lbr Rel Cnsl/MEC Coord	(i)	260,542	17,388	3,454	26,500	30,783	338,667	0
	(ii)	0	0	0	0	0	0	0

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue ServiceName of the organization
AIR LINE PILOTS ASSOCIATION INTERNATIONAL**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016**Open to Public Inspection**

Employer identification number

36-0710830

990 Schedule O, Supplemental Information

Return Reference	Explanation
PROGRAM SERVICE ACTIVITY #1	FORM 990, PART III, LINE 4A COLLECTIVE BARGAINING ALPA IS THE COLLECTIVE BARGAINING AGENT FOR OVER 54,000 AIRLINE PILOTS AND PROFESSIONAL FLIGHT ENGINEERS WHO MAKE UP 31 PILOT GROUPS IN THE UNITED STATES AND CANADA IN ADDITION TO NEGOTIATING LABOR CONTRACTS, IT PROCESSES GRIEVANCES, ARBITRATIONS, AND OTHER CONTRACT ADMINISTRATION-RELATED ACTIVITIES THE YEAR 2016 WAS A BUSY PERIOD FOR COLLECTIVE BARGAINING, AS THE ASSOCIATION WAS ENGAGED IN NEGOTIATIONS TO AMEND, CREATE, OR IMPLEMENT COLLECTIVE BARGAINING AGREEMENTS AT SEVERAL ALPA CARRIERS

990 Schedule O, Supplemental Information

Return Reference	Explanation
PROGRAM SERVICE ACTIVITY #2	FORM 990, PART III, LINE 4B GOVERNMENT AFFAIRS AS THE VOICE OF PROFESSIONAL AIRLINE PILOTS, THE ASSOCIATION REPRESENTS A PILOT PARTISAN AGENDA TO CONGRESS AND TO MANY ADMINISTRATION AGENCIES INCLUDING THE DEPARTMENT OF TRANSPORTATION, FEDERAL AVIATION ADMINISTRATION, DEPARTMENT OF STATE, DEPARTMENT OF HOMELAND SECURITY AND TRANSPORTATION SECURITY ADMINISTRATION KEY LEGISLATIVE ISSUES FOR PILOTS IN 2016 INCLUDED ENFORCEMENT OF OPEN SKIES AGREEMENTS AND STOPPING FLAG OF CONVENIENCE OPERATIONS IN AVIATION, PROMOTING SAFETY IN THE REAUTHORIZATION OF THE FEDERAL AVIATION ADMINISTRATION BY ADVOCATING FOR HAZARDOUS MATERIALS SAFETY WHEN SHIPPED BY AIR, SECONDARY COCKPIT BARRIERS, MAINTAINING SAFETY REGULATIONS AND SAFE INTEGRATION OF UNMANNED AIRCRAFT SYSTEMS (UAS) and FUNDING FOR TSA SECURITY PROGRAMS SUCH AS FEDERAL FLIGHT DECK OFFICER PROGRAM

990 Schedule O, Supplemental Information

Return Reference	Explanation
PROGRAM SERVICE ACTIVITY #3	FORM 990, PART III, LINE 4C AVIATION SAFETY ALPA MAINTAINS A NETWORK OF HUNDREDS OF PILOT VOLUNTEERS, SUPPORTED BY APPROXIMATELY TWO DOZEN STAFF PROFESSIONALS, ORGANIZED INTO AN EXTENSIVE STRUCTURE OF LOCAL AND NATIONAL COMMITTEES KEY SAFETY ISSUES IN 2016 INCLUDED PILOT FATIGUE, PILOT TRAINING AND QUALIFICATION, AIRPORT AND RUNWAY SAFETY, VARIOUS IMPROVEMENTS TO AVIATION SECURITY AND PILOT AND PASSENGER SCREENING, SAFETY MANAGEMENT SYSTEMS, AND THE RESULTS OF KEY ACCIDENT INVESTIGATIONS

990 Schedule O, Supplemental Information

Return Reference	Explanation
PROGRAM SERVICE ACTIVITY #4	FORM 990, PART III, LINE 4D PUBLICATIONS THE UNION'S MAGAZINE, AIR LINE PILOT, IS PUBLISHED 10 TIMES PER YEAR WITH A CIRCULATION OF ABOUT 81,000 COPIES, MOSTLY TO MEMBERS AND RETIRED PILOTS ITS CONTENT IS A MIXTURE OF UNION NEWS, INDUSTRY TRENDS, AND TECHNICAL SAFETY AND SECURITY-RELATED INFORMATION MOST OF ALPA'S 31 PILOT GROUPS INCLUDING THEIR INDIVIDUAL LOCAL COUNCILS, PUBLISH AND DISTRIBUTE BOTH PAPER AND E-MAIL NEWSLETTERS WITH NEWS AND INFORMATION OF INTEREST TO THEIR PILOTS THE ASSOCIATION OCCASIONALLY PUBLISHES SPECIALIZED NEWSLETTERS ON MATTERS OF URGENT INTEREST AND ALSO MAINTAINS AN EXTENSIVE WEBSITE THAT CARRIES NEWS, ANNOUNCEMENTS, AND GENERAL INFORMATION ON BOTH PUBLICALLY ACCESSIBLE HOMEPAGE AND A "MEMBER ONLY" PORTION OF THE WEBSITE

990 Schedule O, Supplemental Information

Return Reference	Explanation
SIGNIFICANT CHANGES IN GOVERNING DOCUMENTS	FORM 990, PART VI, LINE 4 ALPA BOARD OF DIRECTORS MODIFIED THE CONSTITUTION AND BY-LAWS (CBL) DURING 2016 1) CHANGES TO ARTICLE III, LOCAL COUNCILS AND LOCAL EXECUTIVE COUNCILS, SECTION 9, ELECTION GROUPS 2) CHANGES TO ARTICLE VIII, HEARING AND APPEAL PROCEDURES, TO CLARIFY THE LANGUAGES OF ARTICLE VIII, EXPAND THE OPTIONS FOR DELIVERING DOCUMENTS, AND REMOVE DISCONTINUED PRACTICES 3) CHANGES TO ARTICLE XXII, ALPA CANADA BOARD, ADOPTING CERTAIN AMENDMENTS DISCUSSED IN A REPORT RECEIVED FROM THE CANADA BOARD STRUCTURAL REVIEW COMMITTEE (CBSRC), REGARDING (I) ORGANIZATION, (II) JURISDICTION AND DUTIES, (III) MEETINGS, (IV) ALPA CANADA PRESIDENT, (V) ALPA CANADA VICE PRESIDENT/IFALPA DIRECTOR AND ALPA CANADA VICE PRESIDENT ADMINISTRATION AND FINANCE, AND (VI) VACANCY IN OFFICE

990 Schedule O, Supplemental Information

Return Reference	Explanation
MEMBERS OR STOCKHOLDERS	FORM 990, PART VI, LINE 6 ALPA REPRESENTS OVER 54,000 PILOT MEMBERS ALPA HAS ONLY ONE CATEGORY OF ACTIVE MEMBERS ALPA ALSO COLLECTS DUES FROM EXECUTIVE INACTIVE MEMBERS (AT A REDUCED RATE) AND "NON-MEMBERS" (AT ANOTHER REDUCED RATE) EXECUTIVE INACTIVE MEMBERS ARE ENTITLED TO ALL OF THE RIGHTS AND BENEFITS OF ACTIVE MEMBERS EXCEPT THEY MAY NOT VOTE, ASSUME OR HOLD ELECTIVE OR APPOINTIVE OFFICE (INCLUDING COMMITTEE ASSIGNMENTS), ATTEND MEETINGS OR BE INCLUDED ON THE ACTIVE MEMBER MAILING LIST "NON-MEMBERS" ARE NOT MEMBERS OF ALPA WHO ARE NEVERTHELESS COMPELLED TO PAY UNION DUES OR FEES UNDER AN AGENCY SHOP AGREEMENT NON-MEMBERS ARE ENTITLED TO A PRO RATA ADJUSTMENT FOR ANY EXPENSES THAT ARE NOT GERMANE NON-MEMBERS ARE NOT ENTITLED TO ANY BENEFITS OF ALPA MEMBERSHIP

990 Schedule O, Supplemental Information

Return Reference	Explanation
MEMBERS OR STOCKHOLDERS WHO MAY ELECT	FORM 990, PART VI, LINE 7A ALPA'S HIGHEST GOVERNING BODY IS THE BOARD OF DIRECTORS MEMBERS OF THE BOARD OF DIRECTORS ARE DIRECTLY ELECTED FROM LOCAL COUNCILS BY THE ACTIVE AND EXECUTIVE ACTIVE MEMBERS ASSIGNED TO THOSE LOCAL COUNCILS THE MEMBERS OF OTHER ALPA GOVERNING BODIES - ALL OF WHICH ARE SUBSIDIARY TO THE BOARD OF DIRECTORS - ARE ELECTED BY THE MEMBERS OF THE BOARD OF DIRECTORS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 REVIEW PROCESS	FORM 990, PART VI, LINE 11B THE RETURN IS REVIEWED BY THE SENIOR STAFF ACCOUNTANT, FINANCE DEPARTMENT MANAGEMENT STAFF, PRESIDENT, GENERAL MANAGER, AND VICE PRESIDENT FINANCE/TREASURER OF ALPA

990 Schedule O, Supplemental Information

Return Reference	Explanation
CONFLICT OF INTEREST POLICY MONITORING & ENFORCEMENT	<p>FORM 990, PART VI, LINE 12C (1) ALPA'S CONFLICT OF INTEREST POLICY IS REVIEWED WITH EMPLOYEES, A WRITTEN COPY IS INCLUDED IN EACH EMPLOYEE NEW HIRE KIT, A COPY IS INCLUDED IN THE EMPLOYEE HANDBOOK, AND THE POLICY IS POSTED ON THE EMPLOYEE STAFF CENTER WEBSITE THE POLICY PROVIDES EXAMPLES OF SOME OF THE RELATIONSHIPS THAT SHOULD BE AVOIDED THE POLICY REQUIRES THAT ALL EMPLOYEES AVOID CONFLICTS BETWEEN THEIR PERSONAL INTEREST AND THE MEMBERS OF, OR PERSONS REPRESENTED BY, ALPA OR THE INTEREST OF ALPA IN DEALING WITH EMPLOYERS OR WITH SUPPLIERS, CUSTOMERS, AND ALL OTHER ORGANIZATIONS OR INDIVIDUALS SEEKING TO DO BUSINESS WITH ALPA IF A CONFLICT IS REPORTED, DISCOVERED, OR SUSPECTED, IT IS ADDRESSED FIRST BY THE EMPLOYEE'S SUPERVISOR AND, IF NECESSARY, BY THE HUMAN RESOURCES DEPARTMENT, AND IN EITHER CASE, APPROPRIATE MEASURES ARE TAKEN, WHICH CAN INCLUDE TERMINATION FOR VIOLATION OF THE POLICY (2) IN ACCORDANCE WITH FEDERAL LABOR LAWS, ALPA IS GOVERNED BY OFFICERS ELECTED FROM AMONG THE MEMBERSHIP ACCORDINGLY, DECISIONS MADE BY ALPA'S GOVERNING BODIES NECESSARILY AFFECT THE OFFICERS WHO MAKE UP THOSE GOVERNING BODIES, JUST AS THOSE DECISIONS AFFECT THE UNION MEMBERS AS A WHOLE HOWEVER, SECTION 501(A) OF THE LABOR-MANAGEMENT REPORTING AND DISCLOSURE ACT (LMRDA), 29 U S C 501(A), STATES THAT OFFICERS AND OTHER UNION REPRESENTATIVES "OCCUPY POSITIONS OF TRUST" WITH RESPECT TO THE UNION AND SO THAT "[I]T IS, THEREFORE, THE DUTY OF EACH SUCH PERSON, TAKING INTO ACCOUNT THE SPECIAL PROBLEMS AND FUNCTIONS OF A LABOR ORGANIZATION, TO HOLD HIS MONEY AND PROPERTY SOLELY FOR THE BENEFIT OF THE ORGANIZATION AND ITS MEMBERS AND TO MANAGE, INVEST, AND EXPEND THE SAME IN ACCORDANCE WITH ITS CONSTITUTION AND BYLAWS AND ANY RESOLUTIONS OF THE GOVERNING BODIES ADOPTED THEREUNDER, TO REFRAIN FROM DEALING WITH SUCH ORGANIZATION AS AN ADVERSE PARTY OR IN BEHALF OF AN ADVERSE PARTY IN ANY MATTER CONNECTED WITH HIS DUTIES AND FROM HOLDING OR ACQUIRING ANY PECUNIARY OR PERSONAL INTEREST WHICH CONFLICTS WITH THE INTEREST OF SUCH ORGANIZATION, AND TO ACCOUNT TO THE ORGANIZATION FOR ANY PROFIT RECEIVED BY HIM IN WHATEVER CAPACITY IN CONNECTION WITH TRANSACTIONS CONDUCTED BY HIM OR UNDER HIS DIRECTION ON BEHALF OF THE ORGANIZATION " THE RESPONSIBILITIES IMPOSED BY LMRDA SECTION 501(A) MAY BE ENFORCED BY UNION MEMBERS THROUGH SUITS IN FEDERAL COURTS, OR BY THE SECRETARY OF LABOR, AND THOSE RESPONSIBILITIES GOVERN THE UNION'S ACTIONS</p>

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Return Reference	Explanation
PROCESS FOR DETERMINING COMPENSATION	<p>FORM 990, PART VI, LINES 15A & 15B (1) ALPA'S COMPENSATION REVIEW PROCESS INCLUDES EVALUATION OF INDIVIDUAL EDUCATION AND PROFESSIONAL EXPERIENCE, REVIEW AND UPDATING OF EACH STAFF POSITION, PERFORMANCE APPRAISAL, ASSESSMENT OF INTERNAL EQUITY, AND EXTERNAL/MARKET BENCHMARKING ALPA EVALUATES/RE-EVALUATES STAFF POSITIONS ON AN ON-GOING BASIS, ROTATING THROUGH EACH POSITION APPROXIMATELY EVERY FOUR YEARS THE EVALUATION IS AN INTERACTIVE, WRITTEN PROCESS THAT INCLUDES THE EMPLOYEE, DEPARTMENT MANAGEMENT, AND HUMAN RESOURCES EXTERNAL/MARKET BENCHMARKING IS PART OF THE COMPENSATION REVIEW PROCESS, AS WELL AS THE ANNUAL PERFORMANCE APPRAISAL PROCESS ALPA SUBSCRIBES TO/PARTICIPATES IN SEVERAL BENCHMARKING DATA SOURCES INCLUDING ERI EXECUTIVE COMPENSATION ASSESSOR, SALARY COM COMPANALYST, AND THE HRA-NCA SURVEY FOR DC ASSOCIATIONS SALARY MINIMUMS/MAXIMUMS ARE PRESCRIBED BY COLLECTIVE BARGAINING AGREEMENTS FOR 86% OF ALPA STAFF A SALARY ADMINISTRATION PLAN FOR MANAGEMENT AND NON-BARGAINING EMPLOYEES IS APPROVED BY THE GENERAL MANAGER ANNUALLY THE SALARY REVIEW COMMITTEE IS RESPONSIBLE FOR REVIEW AND APPROVAL OF COMPENSATION AND MEETS ON A REGULAR BASIS (2) THE PRESIDENT'S COMPENSATION IS APPROVED BY THE ALPA BOARD OF DIRECTORS (BOD) THE BOD LAST REVIEWED THE PRESIDENT'S COMPENSATION AT THE 2016 BOD MEETING THE PRESIDENT'S COMPENSATION IS UPDATED BY THE DIRECTOR-FINANCE AT LEAST ANNUALLY PER THE CALCULATION APPROVED BY THE BOD THE GENERAL MANAGER'S COMPENSATION IS APPROVED BY THE PRESIDENT AND THE DIRECTOR-HUMAN RESOURCES OTHER KEY EMPLOYEE'S COMPENSATION IS APPROVED BY THE GENERAL MANAGER AND THE DIRECTOR-HUMAN RESOURCES THE REVIEW PROCESS FOR KEY EMPLOYEES WAS UNDERTAKEN DURING 2016</p>

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Return Reference	Explanation
HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC	FORM 990, PART VI, LINE 19 THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND AUDITED FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC TO THE EXTENT REQUIRED BY LAW

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Return Reference	Explanation
OTHER CHANGES IN NET ASSETS	FORM 990, PART XI, LINE 9 OTHER CHANGES IN NET ASSETS ARE ATTRIBUTABLE TO INHERENT CONTRIBUTION \$1,564,906 RETIREE HEALTH RELATED LOSSES (\$3,187,557) PENSION RELATED GAINS \$763,364 TRANSLATION GAINS \$6,943 INTERFUND TRANSFER (\$1,092,910) ----- TOTAL (\$1,945,254)

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Return Reference	Explanation
OVERSIGHT PROCESS	FORM 990, PART XII, LINE 2C THE CONSOLIDATED FINANCIAL STATEMENTS WERE AUDITED BY AN INDEPENDENT ACCOUNTANT THE ORGANIZATION's Executive Team ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND THE SELECTION OF THE INDEPENDENT ACCOUNTANT

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Return Reference	Explanation
2016 ALPA BOARD OF DIRECTORS	<p>FORM 990, PART VII, SECTION A, BOARD OF DIRECTORS THE FOLLOWING INDIVIDUALS SERVED ON ALPA BOARD OF DIRECTORS IN 2016 AND DID NOT RECEIVE ANY REPORTABLE COMPENSATION FROM THE ORGANIZATION FOR SERVICES RENDERED IN THEIR CAPACITY AS DIRECTORS A S CORNELISON AARON L LA NIGAN ADAM J BELL ADAM M CHRONAS ALBANE V KOENIG ALBERTO E GASPARI ALFREDO D BYRNE AND REW A ROSS ANDREW D COWARD ANITA E SHEW ANTHONY H MILLER ANTHONY P DRAKULA ANTHONY-PA UL ZERAFI BENJAMIN R SALLEY BENNIE L JENNINGS BRADLEY J PARTRIDGE BRENDAN F TWOMEY BRENNEN G SOROKAN BRIAN A ROSEEN BRIAN A STILKE BRIAN C RICHARDSON BRYAN J FREEMAN C W T EETER CARL A FLEMING CHAD L ADAMS CHARLES B ROSENSTEIN CHARLES D RITTER JR CHARLES E SWINDELLS CHARLES H MEGGINSON CHARLES J ROOS CHERYL L KONTER CHRISTIAN F LYNCH CHRISTOPHER K TANG CHRISTOPHER M BOYLAN DANIEL E HAHN DANIEL F GARCIA DANIEL J KRIEGER DANIEL J PARNHAM DANIEL P LEO DANNY B ROWBOTHAM DAVID A HAHN DAVID N WILSON DAVID W VOSS DOMINIQUE ROY DON G RAY DONALD G CLARK II DONALD S LOEPKE DONN E MINOGGIE DOUGLAS J G ETELFINGER DOUGLAS ZINK EDWARD C BENNETT ELYA G BACHES ERIK G SCHELLER ERIK LARSEN ERIK N MCCOY EZEKIEL VAZQUEZ FRED D GALEY JR GANNETT K JEAN GEORGE M DREBO GERALD B CHERNOCHAN GERALD H KAMPHUIS GREGORY A JANS HARRY D STAHL IVAN A ATIJ D HANNAN JAMES A MCGUIRE JAMES D MORTON JAMES J MUMBY JR JAMES P TRIMBELL JAMES R KILLEN JR JAMES W JOHNSON JAMES W MORRIS JR JAN M PASHINSKI JARED L HUNT JARED T ALEXA JEFFREY W COHEN JEFFREY W JACOBS JEREMY T SAYLOR JESSE M PETERS JIMMY K ABDALLA JOAO A PEREIRA JOEL A RODDA JOHN D BASSETT JOHN E SHARKEY JR JOHN P BREILING JOHN P COSTELLO JOHN V WALSH JOHN W RIDDEL JR JON M ATHANS JONATHAN HAYES JOSEPH B KOLARIK JOSEPH K PYNCH JOSEPH M FERREIRA JOSHUA A SULT JUSTIN L MEISSER JUSTIN T ROGERS KRISTOPHER R REAVILLE KURT W RUSSELL LAWRENCE H PAYNE JR LONNIE D UTLEY JR LOUIS-ERIC MONGRAIN LUIS C SAAVEDRA MARC DUFFY-VINCELETTE MARC E GONZALEZ MARK S LENESKI MATTHEW L CHADWICK MATTHEW T WISE MAURICIO E BOLIVAR MICHAEL A SORBIE MICHAEL E ARCAMUZI MICHAEL J LUCKSTONE MICHAEL J SULL IVAN MIRKO SCHERRER MONA L CATES NATHAN R CARON NICHOLAS E HARWOOD NIKOLAOS GIANNOUSSIS PATRICE ROY PATRICK M BARRETT PAUL M DE GRENIER PAUL P MEYER PHILIP E GOWER PRIYESH A AMIN RANDALL BOOTH RAYMOND A IGOU REED C DONOGHUE RICHARD C WHEELER RICHARD D GALLAHER RICHARD S CLARKE ROB WATSON ROBERT A MARSH ROBERT A OWEN ROBERT B LEGGETT ROBERT H BURGESS ROBERT L HAZZARD ROBERT O LEE ROBERT S CECCHI ROGER N ANDERSON ROLAND VERA RONAN J O DONOGHUE ROSS W SCHUMACHER RYAN C BABCOCK RYAN C HOLLENBECK SAMUEL C VAUGHAN SCOTT EWING SCOTT HOPE SCOTT SIMPSON SEAN P SMITH SEBASTIEN L ROUSSEL SHANE A ATKINS STACEY TUMOTH STACY H STADER STEPHEN M BRYCE STEVE DONOVAN STEVEN M JONES TAYLOR A SOLI THOMAS L ROGERS TIMOTHY K DAVIS TODD C HUNTER TOM A ESTRADA TREVOR J KLEINSCHNITZER TYLER A ROWE TYLER J HOVER</p>

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Return Reference	Explanation
2016 ALPA BOARD OF DIRECTORS	VICTOR M CASTRO WESLEY J HARDER WILLIAM J MEACHEM WILLIAM L BARTELS JR WILLIAM R DES HAZER ZACHARY J BLACKBURN

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VII, SECTION A, BOARD OF DIRECTORS	<p>THE FOLLOWING INDIVIDUALS SERVED ON ALPA BOARD OF DIRECTORS IN 2016 ALL PAYMENTS TO THESE INDIVIDUALS REPRESENT REIMBURSEMENT FOR EXPENSES OR LOST BENEFITS (FLIGHT PAY LOSS) THESE AMOUNTS ARE TAXABLE TO THE RECIPIENT AS REPORTABLE COMPENSATION ANDREW COLLINS \$340 67 ANDREW G MANILLA \$97 80 ANDREW J HUGHES \$15,168 11 ARMANDO GOMEZ \$2,022 46 BENJAMIN W PEACOCK \$952 98 BRADLEY J HUTCHENS \$29 70 CARLOS J RODRIGUEZ \$738 39 CHAD E REAM \$7,856 87 CHARLES M SCHAEFER \$312 96 CHRISTOPHER A HAZLETON \$212 32 CHRISTOPHER J BOWERS \$787 29 CHRISTOPHER M KENNEY \$279 70 CHRISTOPHER N KERN \$3,251 64 COLEMAN A KING \$65 20 DANIEL J RIESGO \$1,590 76 DANIEL L MOORE \$309 27 DAVID C BIRCH \$102 69 DAVID J MCCONNELL \$130 40 DAVID J NESTOR \$310 99 DAVID S HAMILTON \$6,665 32 DAVID WOOD \$70 42 ERIC J POPPER \$567 90 ERIC N HALL \$2,437 88 GILBERT RENAUD \$1,537 60 GLENN R JOHNSON JR \$958 44 HAYDEN S HAMMER \$7,748 09 HERMON C COOK III \$4,045 74 HOON S LEE \$5,538 46 IVAN D HARRIS \$979 63 JAMES A JOHNSON \$8,915 73 JAMES ACKERMAN \$104 32 JAMES HARDING \$1,346 77 JAMES M LOWE \$971 48 JARED F ROBERTS \$117 36 JASON B LEONARD \$544 09 JEFF J PETERSON \$99 43 JEFFERY L BOHL \$185 60 JEFFREY A CIARCIA \$1,500 00 JEFFREY R WOLF \$66 83 JOEL C SCHULTHEISS \$1,065 10 JOHN F BARTON JR \$249 39 JOHN L KENDRICK \$307 84 JON J LEWIS \$4,879 51 JONATHAN A JONES \$66 83 JONATHAN D LYKKEN \$35 63 JONATHAN D WRIGLEY \$662 06 JUDSON D CRANE \$3,637 86 KAREN M LACY \$544 51 KENNETH M ARMSTRONG \$13,133 44 KEVIN E BUXTON \$242 02 KEVIN M KETELAAR \$174 20 KYLE R FLYNN \$786 14 LAMONT T EDEL \$714 45 LINO R ROJAS \$88 02 MARK LANGTON \$92 91 MATTHEW G LOVEDAY \$295 03 MICHAEL E WILCHCOMBE \$136 92 MICHAEL J FRAHM \$1,492 82 MICHAEL S POGGI \$4,847 56 MICHAEL W REINMUTH \$851 53 NATHANIEL S BROWN \$880 20 NEAL J SPANIER \$1,339 16 NICHOLAS S TOON \$3,426 41 OLIVIER GOUDREAU \$22,589 54 PATRICK O WHITEHEAD \$138 55 PATRICK S WALSH \$96 17 PETER A HARMON \$478 43 ROBERT J WOLF \$93 30 ROBIN Y KIM \$216 79 ROGER I GOODWIN \$749 81 RYAN E SCHNITZLER \$61 94 RYAN J PACHKOFKY \$3,041 58 S D ARRINGTON JR \$89 08 SAM G DEROSA \$15,612 57 SAMUEL J MASON \$6,817 87 SCOTT H MARTIN \$8,371 97 STEVE D ZEMAN \$3,575 95 STEVEN M TOOTHE \$226 57 THOMAS F BRIELMANN \$120 62 TIMOTHY B HECK \$2,505 01 TIMOTHY CONNORS \$348 83 TIMOTHY J SIMARD \$159 82 TODD A THORNTON \$53 79 TODD E LISAK \$750 00 TODD J HIRSHON \$79 87 TOM M MURPHY \$347 19 VINCENT B ZAGARELLA \$1,084 24 VINCENT VAN WINDEN \$2,661 97 WILLIAM A NEVEU \$91 28 WILLIAM C MATHIESON \$184 19</p>

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2016

**Open to Public
Inspection**

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

▶ Attach to Form 990.

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

Name of the organization

AIR LINE PILOTS ASSOCIATION INTERNATIONAL

Employer identification number

36-0710830

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) ALPA EMERGENCY RELIEF FUND Inc 535 HERNDON PARKWAY HERNDON, VA 20170 14-1936814	Charitable	VA	501(C)(3)	12-type-I	ALPA	Yes	
(2) THE 1625 MASSACHUSETTS AVE NW CORP 535 HERNDON PARKWAY HERNDON, VA 20170 52-0946056	RENT PROPERTY	VA	501(C)(2)		ALPA	Yes	
(3) AIR LINE PILOTS ASSOCIATION PAC 535 HERNDON PARKWAY HERNDON, VA 20170 52-1062313	PAC	VA	527		ALPA	Yes	
(4) RETIREE HEALTH PLN FOR EMPLOYEES OF ALPA 535 HERNDON PARKWAY HERNDON, VA 20170 54-1587464	VEBA	VA	501(C)(9)		ALPA	Yes	
(5) ALPA PILOT WELFARE BENEFIT PLAN 535 HERNDON PARKWAY HERNDON, VA 20170 54-1775762	VEBA	VA	501(C)(9)		ALPA	Yes	
(6) FEDEX PILOTS POST MD CR RTR PM REIM PLAN 535 HERNDON PARKWAY HERNDON, VA 20170 65-1297729	VEBA	VA	501(C)(9)		ALPA	Yes	

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No
(1) KITTY HAWK INSURANCE CO LTD FB PERRY BLDG-1ST FL 40 CHURCH ST HAMILTON HM12 BD	CAPTIVE INS	BD	ALPA	C Corp	1,095,850	3,291,775	100 000 %	Yes	
(2) ALPA CANADA INSURANCE TRUST 360 ALBERT STREET STE 1210 K1R 7X7 OTTAWA ONTARIO CA	VEBA	CA	NA	TRUST					No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	No
b Gift, grant, or capital contribution to related organization(s)	1b Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	No
d Loans or loan guarantees to or for related organization(s)	1d Yes	
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k Yes	
l Performance of services or membership or fundraising solicitations for related organization(s)	1l Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
o Sharing of paid employees with related organization(s)	1o Yes	
p Reimbursement paid to related organization(s) for expenses	1p	No
q Reimbursement paid by related organization(s) for expenses	1q Yes	
r Other transfer of cash or property to related organization(s)	1r Yes	
s Other transfer of cash or property from related organization(s)	1s	No

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

See Additional Data Table

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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

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

(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)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

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

Return Reference**Explanation**

Additional Data

Software ID:
Software Version:
EIN: 36-0710830
Name: AIR LINE PILOTS ASSOCIATION INTERNATIONAL

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
(1) 535 HERNDON PARKWAY HERNDON, VA 20170 14-1936814	Charitable	VA	501(C)(3)	12-type-I	ALPA	Yes	
(1) 535 HERNDON PARKWAY HERNDON, VA 20170 52-0946056	RENT PROPERTY	VA	501(C)(2)		ALPA	Yes	
(2) 535 HERNDON PARKWAY HERNDON, VA 20170 52-1062313	PAC	VA	527		ALPA	Yes	
(3) 535 HERNDON PARKWAY HERNDON, VA 20170 54-1587464	VEBA	VA	501(C)(9)		ALPA	Yes	
(4) 535 HERNDON PARKWAY HERNDON, VA 20170 54-1775762	VEBA	VA	501(C)(9)		ALPA	Yes	
(5) 535 HERNDON PARKWAY HERNDON, VA 20170 65-1297729	VEBA	VA	501(C)(9)		ALPA	Yes	

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
(1) ALPA Emergency Relief Fund Inc	b	35,210	Cost
(1) Air Line Pilots Association PAC	d	51,911	Cost
(2) The 1625 Massachusetts Ave Corp	d	239,014	Cost
(3) The 1625 Massachusetts Ave Corp	k	1,698,600	Lease agreement
(4) ALPA Pilots Welfare Benefit Plan	l	436,946	Cost
(5) FEDEX Pilots Post MdcR Rtr PM Reim Plan	l	355,589	Cost
(6) Kitty Hawk Insurance Co LTD	l	127,252	Cost
(7) Air Line Pilots Association PAC	q	47,757	Cost
(8) FEDEX Pilots Post MdcR Rtr PM Reim Plan	q	14,768	Cost
(9) The 1625 Massachusetts Ave Corp	q	122,021	Cost
(10) Retiree Health Plan for Employees of ALPA	r	1,400,000	Cost
(11) Kitty Hawk Insurance Co LTD	r	2,717,528	Cost