

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 10-01-2016, and ending 09-30-2017

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

C Name of organization
INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite
1750 NEW YORK AVE NW

City or town, state or province, country, and ZIP or foreign postal code
WASHINGTON, DC 200065395

D Employer identification number
53-0088290

E Telephone number
(202) 737-8484

G Gross receipts \$ 62,854,004

F Name and address of principal officer
EDWARD KELLY
1750 NEW YORK AVE NW
WASHINGTON, DC 200065395

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: ▶ WWW IAFF ORG

K Form of organization Corporation Trust Association Other ▶

L Year of formation 1918

M State of legal domicile DC

Part I Summary

1 Briefly describe the organization's mission or most significant activities
TO ORGANIZE ALL FIRE FIGHTERS AND EMERGENCY MEDICAL OR RESCUE WORKERS TO SECURE JUST COMPENSATION, PROMOTE A SAFE, HEALTHY AND HARMONIOUS WORK ENVIRONMENT, PROMOTE RESEARCH AND TRAINING, ENCOURAGE THE FORMATION OF UNIONS, CULTIVATE FRIENDSHIP AND FELLOWSHIP AMONG 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)	3	21
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	0
5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	176
6 Total number of volunteers (estimate if necessary)	6	0
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	1,968,750
b Net unrelated business taxable income from Form 990-T, line 34	7b	-22,391

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	7,326,274	8,457,598
9 Program service revenue (Part VIII, line 2g)	46,324,318	50,345,997
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	407,101	389,113
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,266,089	1,412,265
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	56,323,782	60,604,973

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0	0
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)	24,660,441	25,674,537
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)	33,665,661	33,277,598
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	58,326,102	58,952,135
19 Revenue less expenses Subtract line 18 from line 12	-2,002,320	1,652,838

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	40,012,180	40,659,763
21 Total liabilities (Part X, line 26)	83,748,927	18,825,341
22 Net assets or fund balances Subtract line 21 from line 20	-43,736,747	21,834,422

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 2018-05-23

EDWARD KELLY GENERAL SECRETARY-TREASURER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name ANDREW E YOUNG CPA	Preparer's signature ANDREW E YOUNG CPA	Date	Check <input type="checkbox"/> if self-employed	PTIN P01203950
Firm's name ▶ RENNER AND COMPANY CPA PC			Firm's EIN ▶ 54-1498950	
Firm's address ▶ 700 NORTH FAIRFAX ST SUITE 400 ALEXANDRIA, VA 22314			Phone no (703) 535-1200	

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

TO ORGANIZE ALL FIRE FIGHTERS AND EMERGENCY MEDICAL OR RESCUE WORKERS TO SECURE JUST COMPENSATION, PROMOTE A SAFE, HEALTHY AND HARMONIOUS WORK ENVIRONMENT, PROMOTE RESEARCH AND TRAINING, ENCOURAGE THE FORMATION OF UNIONS, CULTIVATE FRIENDSHIP AND FELLOWSHIP AMONG 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)? <i>If "Yes," complete Schedule A</i>		No
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	Yes	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	Yes	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>	Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>	Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	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)? <i>If "Yes," complete Schedule D, Part X</i>	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		No
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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? <i>If "Yes," complete Schedule G, Part I</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? <i>If "Yes," complete Schedule G, Part II</i>		No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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 (21), 1b (0), 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 2 columns: Question, Answer. Rows include: 17, 18, 19, 20.

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	8,151,791				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	305,807				
	g Noncash contributions included in lines 1a-1f \$ _____						
	h Total. Add lines 1a-1f		8,457,598				
Program Service Revenue			Business Code				
	2a PER CAPITA TAX		900099	43,233,803	43,233,803		
	b REGISTRATION FEES		900099	3,358,710	3,358,710		
	c CONFERENCES AND MEETING REVENUE		900099	1,236,102	1,236,102		
	d AFFILIATE REVENUES		900099	1,191,937	1,191,937		
	e ADVERTISING INCOME		541800	705,651		705,651	
	f All other program service revenue			619,794	619,794		
g Total. Add lines 2a-2f		50,345,997					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			388,089		388,089	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties			689,170		689,170	
	6a Gross rents	(i) Real	(ii) Personal				
			279,950				
		b Less rental expenses		0			
		c Rental income or (loss)		279,950			
	d Net rental income or (loss)			279,950		279,950	
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
				1,674,365			
		b Less cost or other basis and sales expenses		1,673,341			
		c Gain or (loss)		1,024			
	d Net gain or (loss)			1,024		1,024	
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
	b Less direct expenses	b					
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities See Part IV, line 19	a						
b Less direct expenses	b						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	a						
		38,335					
	b Less cost of goods sold	b	575,690				
c Net income or (loss) from sales of inventory			-537,355	-540,004	2,649		
Miscellaneous Revenue		Business Code					
11a MDA CAMPAIGN		541900	980,500		980,500		
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d			980,500				
12 Total revenue. See Instructions			60,604,973	49,100,342	1,968,750	1,078,283	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.				
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	8,526,420			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7 Other salaries and wages.	9,610,349			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	2,804,278			
9 Other employee benefits.	3,597,866			
10 Payroll taxes.	1,135,624			
11 Fees for services (non-employees)				
a Management.				
b Legal.	2,865,719			
c Accounting.	181,684			
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	9,560,888			
12 Advertising and promotion.	185,317			
13 Office expenses.	896,210			
14 Information technology.	1,662,099			
15 Royalties.				
16 Occupancy.	2,939,025			
17 Travel.	2,395,725			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	2,722,514			
20 Interest.	18,079			
21 Payments to affiliates.	2,630,371			
22 Depreciation, depletion, and amortization.	429,072			
23 Insurance.	254,996			
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 DONATIONS	1,470,029			
b JOURNAL AND PUBLICATION	1,035,395			
c MISCELLANEOUS	974,086			
d PRINTING AND COPYING	832,716			
e All other expenses	2,223,673			
25 Total functional expenses. Add lines 1 through 24e.	58,952,135			
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	403,390	1	542,136
	2 Savings and temporary cash investments	8,828,477	2	11,623,461
	3 Pledges and grants receivable, net	677,862	3	799,867
	4 Accounts receivable, net	4,022,962	4	3,619,701
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	442,015	7	546,979
	8 Inventories for sale or use	42,314	8	34,145
	9 Prepaid expenses and deferred charges	293,335	9	404,806
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 3,984,033		
	b Less accumulated depreciation	10b 2,055,391	2,237,196	10c 1,928,642
	11 Investments—publicly traded securities	1,584,628	11	
	12 Investments—other securities See Part IV, line 11	16,719,451	12	16,044,791
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	550,000
	15 Other assets See Part IV, line 11	4,760,550	15	4,565,235
16 Total assets. Add lines 1 through 15 (must equal line 34)	40,012,180	16	40,659,763	
Liabilities	17 Accounts payable and accrued expenses	74,334,403	17	8,935,359
	18 Grants payable		18	
	19 Deferred revenue	401,514	19	368,582
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	9,013,010	25	9,521,400
	26 Total liabilities. Add lines 17 through 25	83,748,927	26	18,825,341
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	-46,596,415	27	19,058,464
	28 Temporarily restricted net assets	2,859,668	28	2,775,958
	29 Permanently restricted net assets		29	
	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	-43,736,747	33	21,834,422
	34 Total liabilities and net assets/fund balances	40,012,180	34	40,659,763

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	60,604,973
2	Total expenses (must equal Part IX, column (A), line 25)	2	58,952,135
3	Revenue less expenses Subtract line 2 from line 1	3	1,652,838
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	-43,736,747
5	Net unrealized gains (losses) on investments	5	-255,106
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	64,715,995
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-542,558
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	21,834,422

Part XII Financial Statements and Reporting

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

		Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
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	3b	Yes	

Additional Data

Software ID:

Software Version:

EIN: 53-0088290

Name: INTERNATIONAL ASSOCIATION OF FIRE
FIGHTERS

Form 990 (2016)

Form 990, Part III, Line 4a:

LABOR AND COLLECTIVE BARGAINING ASSISTANCE - IAFF PROVIDES LABOR RELATION ASSISTANCE RELATED TO COLLECTIVE BARGAINING INCLUDING FINANCIAL ANALYSIS, WAGE COMPARABLES, COLLECTIVE BARGAINING AGREEMENT ANALYSIS, AND TECHNICAL ASSISTANCE FOR NEGOTIATION AND ARBITRATION. ADDITIONALLY, IAFF STAFF IS TRAINED TO ANSWER QUESTIONS REGARDING THE FAIR LABOR STANDARDS ACT, EMPLOYEE HEALTH AND PENSION BENEFITS, AND CONDUCT ANALYSIS OF COLLECTIVE BARGAINING AGREEMENTS

Form 990, Part III, Line 4b:

EDUCATION AND TRAINING - THE IAFF PROVIDES EDUCATION AND TRAINING SERVICES TO ENCOURAGE ITS MEMBERS TO CONTINUOUSLY BUILD THEIR SKILLS AND KNOWLEDGE IN THEIR ROLES AS FIRE FIGHTERS, PARAMEDICS, AND UNION LEADERS MEMBERS HAVE ACCESS TO IAFF EDUCATION AND TRAINING OPPORTUNITIES ON A WIDE ARRAY OF TOPICS THE IAFF ALSO PROVIDES ACCESS TO ONLINE LEARNING RESOURCES AS WELL AS INFORMATION ABOUT HANDS-ON TRAINING, CLASSROOM EDUCATION, SELF-PACED STUDY, INSTRUCTIONAL CONFERENCES, SCHOLARSHIPS, AND MORE

Form 990, Part III, Line 4c:

HEALTH AND SAFETY - IAFF DEVELOPS AND ENCOURAGES PROGRAMS TO INCORPORATE SAFE PRACTICES INTO THE FIRE FIGHTING INDUSTRY THROUGH VARIOUS PROGRAMS AND OUTLETS SUCH AS THE NEAR-MISS REPORTING SYSTEM, FACT SHEET SUPPORT, PRESUMPTIVE HEALTH INITIATIVES, AND DISTRIBUTION OF SAFETY ALERTS, THE IAFF IS DEDICATED TO PROVIDE FIRE FIGHTERS AND EMERGENCY MEDICAL RESPONDERS WITH THE MOST CURRENT INFORMATION ON HOW THE WORK ENVIRONMENT AFFECTS THEIR HEALTH

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors								(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
(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)								
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
HAROLD SCHAITBERGER GENERAL PRESIDENT	40 00 3 00	X		X				355,344	0	347,007
EDWARD KELLY GENERAL SECRETARY-TREASURER	40 00 3 00	X		X				75,617	0	5,793
JAMES SLEVIN VICE PRESIDENT	40 00 2 00	X		X				34,481	0	7,689
MARK S WOOLBRIGHT VICE PRESIDENT	40 00 2 00	X		X				121,649	0	45,334
JAY COLBERT VICE PRESIDENT	40 00 1 00	X		X				107,724	0	9,783
ANDREW PANTELIS VICE PRESIDENT	40 00 2 00	X		X				34,437	0	5,793
THOMAS THORNBERG VICE PRESIDENT	40 00 2 00	X		X				119,513	0	34,881
MICHAEL HURLEY VICE PRESIDENT	40 00 2 00	X		X				35,678	0	2,191
RICKY J WALSH VICE PRESIDENT	40 00 1 00	X		X				59,841	0	35,597
MARK SANDERS VICE PRESIDENT	40 00 1 00	X		X				34,362	0	5,793

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors								(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
(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)								
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RAY R RAHNE VICE PRESIDENT	40 00 2 00	X		X				119,918	0	36,187
FRANK LIMA VICE PRESIDENT	40 00 3 00	X		X				33,794	0	4,925
ROY L MCGHEE VICE PRESIDENT	40 00 2 00	X		X				120,577	0	55,970
WALTER DIX VICE PRESIDENT	40 00 1 00	X		X				0	0	0
FRED LEBLANC VICE PRESIDENT	40 00 1 00	X		X				127,771	0	8,764
DANNY TODD VICE PRESIDENT	40 00 2 00	X		X				120,427	0	75,731
DAVID BURRY VICE PRESIDENT	40 00 1 00	X		X				126,039	0	8,764
JAMES B JOHNSON VICE PRESIDENT	40 00 2 00	X		X				118,525	0	60,979
MARK OUELLETTE TRUSTEE	2 00 1 00	X						14,795	0	0
ANTHONY MEJIA TRUSTEE	2 00 1 00	X						14,540	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			
ALEX FORREST TRUSTEE	2 00	X						18,500	0	0
JIM LEE CHIEF OF STAFF	40 00			X				231,625	0	110,125
MATHEW GOLSTEYN CHIEF OF OPERATIONS	40 00			X				53,770	0	24,678
WARREN MAY ASSISTANT TO GENERAL SECRETARY-TREASURER FOR FINAN	40 00				X			210,174	0	49,587
JEFFREY A ZACK ASSISTANT TO GENERAL PRESIDENT FOR MEDIA, COMMUNIC	40 00				X			199,628	0	81,775
SCOTT MARKS ASSISTANT TO GENERAL PRESIDENT FOR CANADIAN OPERAT	40 00				X			193,044	0	34,639
KEVIN B O'CONNOR ASSISTANT TO GENERAL PRESIDENT FOR GOVERNMENTAL AF	40 00				X			186,752	0	97,615
PATRICK MORRISON ASSISTANT TO GENERAL PRESIDENT FOR OCCUPATIONAL HE	40 00				X			187,222	0	90,546
LORI L MOORE ASSISTANT TO GENERAL PRESIDENT FOR MEMBER SERVICES	40 00				X			186,435	0	132,071
ELIZABETH HARMAN ASSISTANT TO GENERAL PRESIDENT FOR GRANTS ADMINIST	40 00				X			181,211	0	64,363

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			
LARRY OSBORNE FORMER VICE PRESIDENT	40 00						X	118,368	0	44,478
PAUL HUFNAGEL FORMER VICE PRESIDENT	1 00						X	112,463	0	23,956
KELLY FOX FORMER VICE PRESIDENT	0 00						X	108,995	0	7,304
WILLIAM ROMAKA FORMER VICE PRESIDENT	40 00						X	103,373	0	17,364
PETER GORMAN FORMER CHIEF OF STAFF	0 00						X	199,795	0	39,809

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

2016

Open to Public Inspection

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**
▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

Department of the Treasury
Internal Revenue Service

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
● Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
● Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
● Section 527 organizations Complete Part I-A only
If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
● Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
● Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A
If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then
● Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS	Employer identification number 53-0088290
--	--

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2 Political expenditures	▶ \$ 7,500
3 Volunteer hours	

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

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

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$ 501,500
3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$ 501,500
4 Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

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

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

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B** Check if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

	(a) Filing organization's totals	(b) Affiliated group totals
--	----------------------------------	-----------------------------

- 1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)
- b** Total lobbying expenditures to influence a legislative body (direct lobbying)
- c** Total lobbying expenditures (add lines 1a and 1b)
- d** Other exempt purpose expenditures
- e** Total exempt purpose expenditures (add lines 1c and 1d)
- f** Lobbying nontaxable amount Enter the amount from the following table in both columns

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

- g** Grassroots nontaxable amount (enter 25% of line 1f)
- h** Subtract line 1g from line 1a If zero or less, enter -0-
- i** Subtract line 1f from line 1c If zero or less, enter -0-
- j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? Yes No

4-Year Averaging Period Under section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

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

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

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

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

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a	
a Current year	2b	
b Carryover from last year	2c	
c Total	3	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	4	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	5	
5 Taxable amount of lobbying and political expenditures (see instructions)		

Part IV Supplemental Information

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

Return Reference	Explanation
PART I-A, LINE 1	IAFF MAKES CONTRIBUTIONS TO HELP ELECT CANDIDATES TO OFFICE WHO SUPPORT ISSUES RELATING TO THE OVERALL WELFARE OF THE FIRE FIGHTING INDUSTRY
PART I-C, LINE 4	THE ASSOCIATION HAD NO TAXABLE INCOME FOR WHICH IT WAS REQUIRED TO FILE A FORM 1120-POL

Additional Data**Software ID:****Software Version:****EIN:** 53-0088290**Name:** INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS**Form 990, Schedule C, Part 1-C, Line 5**

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
ONTARIO PROFESSIONAL FIRE FIGHTERS ASSOCIATION	637 KING STREET WEST TORONTO, ONTARIO CA		154000	0
NEW YORK STATE SENATE REPUBLICAN CAMPAIGN COMMITTEE	PO BOX 7229 ALBANY, NY 12224		75000	0
OMAHA FIREFIGHTERS IAFF LOCAL 385	6005 GROVER STREET OMAHA, NE 68106		65000	0
PROFESSIONAL FIRE FIGHTERS OF WISCONSIN	321 EAST MAIN STREET MADISON, WI 53703		50000	0
TORONTO PROFESSIONAL FIRE FIGHTERS IAFF LOCAL 3888	14 CONSENTINO DRIVE TORONTO, ONTARIO CA		50000	0
EDMONTON FIRE FIGHTERS UNION IAFF LOCAL 209	200-7024 101 AVENUE EDMONTON, ALBERTA CA		30000	0
VANCOUVER FIRE FIGHTERS UNION IAFF LOCAL 18	2 - 6515 BONSOR AVENUE BURNABY, BRITISH COLUMBIA CA		25000	0
PROFESSIONAL FIRE FIGHTERS OF NEW HAMPSHIRE	43 CENTRE STREET CONCORD, NH 03301		20000	0
NEW YORK STATE DEMOCRATIC ASSEMBLY CAMPAIGN COMMITTEE	107 WASHINGTON AVENUE SUITE 1LL ALBANY, NY 12210		12500	0
NEW YORK STATE SENATE INDEPENDENT CAMPAIGN	PO BOX 49 BRONX, NY 10461		12500	0
FRIENDS OF JASON ZONA	431 VANDERBILT AVENUE NIAGARA FALLS, NY 14305		1000	0
A FRIEND OF WILLIE LIGHTFOOT	147 TRAFALGAR STREET ROCHESTER, NY 14619		1000	0
FRIENDS OF DOMINICK RUGGERIO	42 COUNTRYSIDE DRIVE NORTH PROVIDENCE, RI 02904		1000	0
FRIENDS OF NICHOLAS MATTIELLO	55 PASTURE VIEW LANE CRANSTON, RI 02921		1000	0
FRIENDS OF HANOS FOR SENATE	FRIENDS OF HANOS FOR SENATE NEWPORT, RI 02841		1000	0
FRIENDS OF STEPHEN CASEY	625 PARK AVENUE WOONSOCKET, RI 02895		1000	0
FRIENDS OF MICHAEL MORIN	180 ALLEN STREET WOONSOCKET, RI 02895		1000	0
DWON DANIELS FOR CORONER	2734 PIERCE AVENUE NIAGARA FALLS, NY 14301		500	0

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
INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS

Employer identification number
53-0088290

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 | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided 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	2,859,668	3,831,681	2,403,405	598,494	1,670,396
b Contributions	3,750,967	3,804,563	3,932,800	3,358,096	3,672,835
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs	3,834,677	4,776,576	2,504,524	1,553,185	4,744,737
f Administrative expenses					
g End of year balance	2,775,958	2,859,668	3,831,681	2,403,405	598,494

- 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 ▶ 100 000 %
- 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
- | | | |
|--|---------------|----|
| | Yes | No |
| (i) unrelated organizations | 3a(i) | No |
| (ii) related organizations | 3a(ii) | No |
| 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				
b Buildings				
c Leasehold improvements		2,222,764	776,109	1,446,655
d Equipment		1,761,269	1,279,282	481,987
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				1,928,642

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) IAFF FINANCIAL CORPORATION	89,368	C
(B) UNITED UNIONS, INC	2,088,645	C
(C) DEFERRED COMPENSATION	3,057,273	F
(D) AFL-CIO HOUSING TRUST	10,809,505	F
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	16,044,791	

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) RABBI TRUST	4,565,235
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	4,565,235

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	
DEFERRED RENT	1,661,438
CAPITAL LEASE OBLIGATION	237,454
DEFERRED COMPENSATION	3,057,273
RABBI TRUST	4,565,235
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	9,521,400

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	

Additional Data

Software ID:

Software Version:

EIN: 53-0088290

Name: INTERNATIONAL ASSOCIATION OF FIRE
FIGHTERS

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	THE ASSOCIATION'S ENDOWMENT FUNDS ARE RESTRICTED FOR THE ACTIVITIES OF ITS POLITICAL ACTION COMMITTEES

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(5) OF THE INTERNAL REVENUE CODE. HOWEVER, THE ASSOCIATION IS SUBJECT TO TAX ON NET INCOME GENERATED BY ACTIVITIES CONSIDERED TO BE UNRELATED BUSINESS INCOME. AS OF SEPTEMBER 30, 2017, THE ASSOCIATION HAS NO ACCRUED TAX LIABILITY. MANAGEMENT HAS EVALUATED THE ASSOCIATION'S TAX POSITIONS AND CONCLUDED THAT THERE ARE NO UNCERTAIN TAX POSITIONS THAT WERE TAKEN.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No 1545-0047

2016

**Open to Public
Inspection**

▶ 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.

Department of the Treasury
Internal Revenue Service

Name of the organization
INTERNATIONAL ASSOCIATION OF FIRE
FIGHTERS

Employer identification number

53-0088290

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	2	18			3,265,112
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	2	18			3,265,112

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
PART I, LINE 3	ACCRUAL METHOD

Additional Data

Software ID:

Software Version:

EIN: 53-0088290

Name: INTERNATIONAL ASSOCIATION OF FIRE
FIGHTERS

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 - CANADA AND MEXICO	1	9	PROGRAM SERVICES AND OPERATIONS	SERVICE AND ASSISTANCE TO CANADIAN FIRE FIGHTERS	3,136,809
NORTH AMERICA - CANADA AND MEXICO	1	9	INVESTMENT - LOANS TO AFFILIATES	N/A	128,303

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 INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS	Employer identification number 53-0088290
--	--

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> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<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>	1b	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>	2	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> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<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				
<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>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>	4a	Yes								
<p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>	4b	Yes								
<p>c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4c	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>	5a									
<p>b Any related organization? If "Yes," on line 5a or 5b, describe in Part III.</p>	5b									
<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>	6a									
<p>b Any related organization? If "Yes," on line 6a or 6b, describe in Part III.</p>	6b									
<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>	7									
<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>	8									
<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>	9									

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
PART I, LINES 4A-B	THE ASSOCIATION OFFERS PARTICIPATION IN A DEFINED BENEFIT RETIREMENT PLAN TO ALL EMPLOYEES, WITH PARTICIPATION SUBJECT TO THE CRITERIA OUTLINED IN THE PLAN DOCUMENTS. CERTAIN EMPLOYEES EXEMPT FROM THE IAFF'S COLLECTIVE BARGAINING EMPLOYMENT AGREEMENT ARE ALSO ELIGIBLE TO PARTICIPATE IN A 457 DEFERRED COMPENSATION PLAN, WITH PARTICIPATION ALSO SUBJECT TO CRITERIA OUTLINED IN THE PLAN DOCUMENT. SEVERANCE PAYMENTS WERE MADE TO THOMAS MILLER AND PETER GORMAN AT THE END OF THEIR EMPLOYMENT DURING THE FISCAL YEAR.

Additional Data

Software ID:
Software Version:
EIN: 53-0088290
Name: INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS

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 HAROLD SCHATBERGER GENERAL PRESIDENT	(i)	311,292	0	44,052	323,834	23,173	702,351	0
	(ii)	0	0	0	0	0	0	0
1 MARK S WOOLBRIGHT VICE PRESIDENT	(i)	111,970	0	9,679	22,161	23,173	166,983	0
	(ii)	0	0	0	0	0	0	0
2 THOMAS THORNBERG VICE PRESIDENT	(i)	111,970	0	7,543	11,708	23,173	154,394	0
	(ii)	0	0	0	0	0	0	0
3 RAY R RAHNE VICE PRESIDENT	(i)	111,970	0	7,948	13,014	23,173	156,105	0
	(ii)	0	0	0	0	0	0	0
4 ROY L MCGHEE VICE PRESIDENT	(i)	111,970	0	8,607	32,797	23,173	176,547	0
	(ii)	0	0	0	0	0	0	0
5 DANNY TODD VICE PRESIDENT	(i)	111,970	0	8,457	52,558	23,173	196,158	0
	(ii)	0	0	0	0	0	0	0
6 JAMES B JOHNSON VICE PRESIDENT	(i)	111,970	0	6,555	37,806	23,173	179,504	0
	(ii)	0	0	0	0	0	0	0
7 JIM LEE CHIEF OF STAFF	(i)	227,119	1,000	3,506	86,952	23,173	341,750	0
	(ii)	0	0	0	0	0	0	0
8 WARREN MAY ASSISTANT TO GENERAL SECRETARY-TREAS	(i)	205,608	1,000	3,566	26,414	23,173	259,761	0
	(ii)	0	0	0	0	0	0	0
9 JEFFREY A ZACK ASSISTANT TO GENERAL PRESIDENT FOR M	(i)	184,016	1,000	14,612	58,602	23,173	281,403	0
	(ii)	0	0	0	0	0	0	0
10 SCOTT MARKS ASSISTANT TO GENERAL PRESIDENT FOR C	(i)	179,227	1,000	12,817	25,875	8,764	227,683	0
	(ii)	0	0	0	0	0	0	0
11 KEVIN B O'CONNOR ASSISTANT TO GENERAL PRESIDENT FOR G	(i)	184,016	1,000	1,736	74,442	23,173	284,367	0
	(ii)	0	0	0	0	0	0	0
12 PATRICK MORRISON ASSISTANT TO GENERAL PRESIDENT FOR O	(i)	184,016	1,000	2,206	67,373	23,173	277,768	0
	(ii)	0	0	0	0	0	0	0
13 LORI L MOORE ASSISTANT TO GENERAL PRESIDENT FOR M	(i)	184,016	1,000	1,419	108,898	23,173	318,506	0
	(ii)	0	0	0	0	0	0	0
14 ELIZABETH HARMAN ASSISTANT TO GENERAL PRESIDENT FOR G	(i)	178,656	1,000	1,555	41,190	23,173	245,574	0
	(ii)	0	0	0	0	0	0	0
15 JAMES RIDLEY ASSISTANT TO GENERAL PRESIDENT FOR E	(i)	178,656	1,000	434	36,302	23,173	239,565	0
	(ii)	0	0	0	0	0	0	0
16 TERESA MARIA VALENZUELA EXECUTIVE ASSISTANT TO GENERAL PRESIDENT	(i)	145,089	1,000	1,142	58,012	23,173	228,416	0
	(ii)	0	0	0	0	0	0	0
17 DAVID BERNARD INFORMATION SYSTEMS/WEB OPERATIONS	(i)	145,089	500	1,378	55,570	23,173	225,710	0
	(ii)	0	0	0	0	0	0	0
18 JANE BLUME DIRECTOR OF COMMUNICATIONS	(i)	145,089	500	-1,204	49,292	23,173	216,850	0
	(ii)	0	0	0	0	0	0	0
19 CARMEN GLOUKHOFF DIRECTOR OF DATABASE ADMINISTRATION	(i)	145,089	500	-1,204	45,122	23,173	212,680	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				
1 BARRY KASINITZ DIRECTOR OF GOVERNMENT AFFAIRS	(i)	145,589	-500	-1,133	96,617	23,173	263,746	0
	(ii)	0	0	0	0	0	0	0
1 THOMAS MILLER FORMER GENERAL SECRETARY-TREASURER	(i)	204,734	0	1,980,985	121,406	6,573	2,313,698	0
	(ii)	0	0	0	0	0	0	0
2 JAMES T FERGUSON FORMER VICE PRESIDENT	(i)	79,575	0	97,199	51,231	6,573	234,578	0
	(ii)	0	0	0	0	0	0	0
3 WILLIAM TAYLOR FORMER VICE PRESIDENT	(i)	79,575	0	89,136	48,674	6,573	223,958	0
	(ii)	0	0	0	0	0	0	0
4 LORNE WEST FORMER VICE PRESIDENT	(i)	79,575	0	66,188	1,592	6,573	153,928	0
	(ii)	0	0	0	0	0	0	0
5 LARRY OSBORNE FORMER VICE PRESIDENT	(i)	111,970	0	6,398	21,305	23,173	162,846	0
	(ii)	0	0	0	0	0	0	0
6 PAUL HUFNAGEL FORMER VICE PRESIDENT	(i)	79,575	0	32,888	17,383	6,573	136,419	0
	(ii)	0	0	0	0	0	0	0
7 KELLY FOX FORMER VICE PRESIDENT	(i)	101,499	0	7,496	0	7,304	116,299	0
	(ii)	0	0	0	0	0	0	0
8 WILLIAM ROMAKA FORMER VICE PRESIDENT	(i)	79,575	0	23,798	10,791	6,573	120,737	0
	(ii)	0	0	0	0	0	0	0
9 PETER GORMAN FORMER CHIEF OF STAFF	(i)	50,885	0	148,910	37,618	2,191	239,604	0
	(ii)	0	0	0	0	0	0	0

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

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

▶ Attach to Form 990 or 990-EZ.

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

2016**Open to Public Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization
INTERNATIONAL ASSOCIATION OF FIRE
FIGHTERS

Employer identification number

53-0088290

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE ASSOCIATION IS ORGANIZED AS A NOT-FOR-PROFIT CORPORATION WITH MEMBERS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	OFFICERS OF THE BOARD ARE ELECTED BY MEMBER DELEGATES AT DESIGNATED ELECTION TIMEFRAMES EACH LOCAL UNION MEMBER IS ALLOCATED A CERTAIN NUMBER OF DELEGATES BASED ON VOLUME OF MEMBERSHIP EACH MEMBER MUST BE IN GOOD STANDING TO BE ELIGIBLE FOR DELEGATE DESIGNATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	MEMBER DELEGATES ARE AFFORDED THE CAPABILITY IN ACCORDANCE WITH THE IAFF CONSTITUTION AND BY-LAWS TO VOTE ON PARTICULAR ISSUES AS THEY ARE PRESENTED

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	PRIOR TO FILING THE RETURN, THE FORM 990 IS REVIEWED BY THE COMPTROLLER UPON THE COMPTROLLER'S REVIEW, AN ELECTRONIC COPY IS DISTRIBUTED TO THE BOARD THROUGH A SECURED WEBSITE BEFORE FILING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION MAINTAINS OPEN COMMUNICATIONS BETWEEN DIRECTORS AND EMPLOYEES, FURTHERMORE, OFFICERS, DIRECTORS, AND KEY EMPLOYEES ARE MADE AWARE OF NEW BUSINESS RELATIONSHIPS AS THEY ARE CONTRACTED WHEN POTENTIAL CONFLICTS ARE DISCOVERED, TOP MANAGEMENT ASSESSES THE SITUATION IF A CONFLICT EXISTS, THE CONFLICTED PARTY IS PROHIBITED FROM PARTICIPATING IN THE GOVERNING BODY'S DELIBERATIONS AND DECISIONS ON THE TRANSACTION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE ORGANIZATION'S FINANCE COMMITTEE ANNUALLY REVIEWS COMPENSATION FOR TOP MANAGEMENT OFFICIALS, UTILIZING COMPARABLE INDUSTRY AND ORGANIZATIONAL DATA THE DELIBERATIONS AND DECISIONS ARE DOCUMENTED IN THE COMMITTEE'S MEETING MINUTES

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION DISTRIBUTES COPIES OF GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS UPON REQUEST

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	GENERAL CONSULTING 5,317,620 GRANTS CONSULTING 3,497,539 PAC CONSULTING 745,729

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CURRENT YEAR FOREIGN CURRENCY TRANSLATION 36,194 CHANGE IN CUMULATIVE FOREIGN CURRENCY TR ANSLATION 462,110 TRANSFER OF EQUITY FROM FIREPAC 894,457 TRANSFER OF EQUITY TO PAC/VIC -1,935,319

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	NO CHANGE IN OVERSIGHT PROCESS WAS NOTED DURING THE YEAR THE IAFF BOARD OF TRUSTEES IS RESPONSIBLE FOR THE SELECTION OF THE INDEPENDENT AUDITORS AND OVERSIGHT OF THE INDEPENDENT CONSOLIDATED AUDIT

**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.

Department of the Treasury
Internal Revenue Service

Name of the organization
INTERNATIONAL ASSOCIATION OF FIRE
FIGHTERS

Employer identification number

53-0088290

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) INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS FOUNDATION 1750 NEW YORK AVE NW WASHINGTON, DC 20006 61-1629460	CHARITABLE ORGANIZATION	DC	501(C)(3)	LINE 7	INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS	Yes	
(2) IAFF FIREPAC EDUCATIONAL-TREASURY 1750 NEW YORK AVE NW WASHINGTON, DC 20006 91-2071258	ADVOCACY AND POLITICAL CONTRIBUTIONS	DC	527	N/A	INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS	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) IAFF FINANCIAL COPORATION 1750 NEW YORK AVE NW WASHINGTON, DC 20006 30-0025729	FOR PROFIT SALES	DC	INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS	C	3,989,224	2,538,635	100 000 %	Yes	

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

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 VII **Supplemental Information**

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

Additional Data

Software ID:
Software Version:
EIN: 53-0088290
Name: INTERNATIONAL ASSOCIATION OF FIRE
FIGHTERS

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)	IAFF FINANCIAL CORPORATION	A	152,666	FAIR MARKET VALUE
(1)	IAFF FINANCIAL CORPORATION	F	200,004	FAIR MARKET VALUE
(2)	IAFF FINANCIAL CORPORATION	J	152,666	FAIR MARKET VALUE
(3)	IAFF FINANCIAL CORPORATION	L	1,269,907	FAIR MARKET VALUE
(4)	IAFF FINANCIAL CORPORATION	M	159,407	FAIR MARKET VALUE
(5)	IAFF FIREPAC EDUCATIONAL-TREASURY	R	2,367,831	FAIR MARKET VALUE
(6)	IAFF FOUNDATION	L	495,319	FAIR MARKET VALUE
(7)	IAFF FOUNDATION	O	602,276	FAIR MARKET VALUE
(8)	IAFF FOUNDATION	R	1,179,767	FAIR MARKET VALUE
(9)	IAFF FOUNDATION	S	778,517	FAIR MARKET VALUE