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Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2022 calendar year, or tax year beginning 01-01-2022 , and ending 12-31-2022

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
7950 JONES BRANCH DRIVE Suite 400S
City or town, state or province, country, and ZIP or foreign postal code
MCLEAN, VA 22102

F Name and address of principal officer:
CAPT JASON AMBROSI
7950 JONES BRANCH DRIVE 400S
MCLEAN, VA 22102

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

D Employer identification number
36-0710830
E Telephone number
(703) 689-4170
G Gross receipts \$ 314,867,977

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

Activities & Governance

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) 3 198

4 Number of independent voting members of the governing body (Part VI, line 1b) 4 190

5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 367

6 Total number of volunteers (estimate if necessary) 6 425

7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 194,406

b Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ▶0

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses. Subtract line 18 from line 12

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances. Subtract line 21 from line 20

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
WES CLAPPER VP FINANCE/TREASURER
Type or print name and title

2023-11-15
Date

Paid Preparer Use Only

Print/Type preparer's name
Firm's name ▶ WITHUMSMITHBROWNPC
Firm's address ▶ 4600 EAST WEST HWY 900
BETHESDA, MD 208143423

Preparer's signature
Firm's EIN ▶
Phone no. (301) 272-6000

Check ☐ if self-employed
PTIN P00234075

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2022)

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

Part IV Checklist of Required Schedules (continued)

		Yes	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? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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? If "Yes," complete Schedule J	23	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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
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? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	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)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☒

		Yes	No	
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	175	
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	

Part V **Statements Regarding Other IRS Filings and Tax Compliance** (continued)

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	<div style="border: 1px solid black; padding: 2px;"> 2a </div> <div style="text-align: right;">367</div>			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.		2b	Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	Yes	
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>		3b	Yes	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . .		4a	Yes	
b If "Yes," enter the name of the foreign country: CA , CJ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .		5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a		No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		
d If "Yes," indicate the number of Forms 8282 filed during the year	<div style="border: 1px solid black; padding: 2px;"> 7d </div>			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .		7f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8		
9 Sponsoring organizations maintaining donor advised funds.				
a Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .		9b		
10 Section 501(c)(7) organizations. Enter:				
a Initiation fees and capital contributions included on Part VIII, line 12	<div style="border: 1px solid black; padding: 2px;"> 10a </div>			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<div style="border: 1px solid black; padding: 2px;"> 10b </div>			
11 Section 501(c)(12) organizations. Enter:				
a Gross income from members or shareholders	<div style="border: 1px solid black; padding: 2px;"> 11a </div>			
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	<div style="border: 1px solid black; padding: 2px;"> 11b </div>			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	<div style="border: 1px solid black; padding: 2px;"> 12b </div>	12a		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<div style="border: 1px solid black; padding: 2px;"> 13b </div>			
c Enter the amount of reserves on hand	<div style="border: 1px solid black; padding: 2px;"> 13c </div>			
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a		No
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i> . . .		14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.		15		No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . . If "Yes," complete Form 4720, Schedule O.		16		No
17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? . . .		17		
If "Yes," complete Form 6069.				

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	198	
b	Enter the number of voting members included in line 1a, above, who are independent	190	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	Yes
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	No
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	No
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed

18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
 ▶ ELIZABETH ROBINSON 7950 JONES BRANCH DRIVE 400S MCLEAN, VA 22102 (703) 689-4170

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

● 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

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

[illegible]

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

(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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								11,511,412	0	1,617,159

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 **▶** 261

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>		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
VIRTUAL FLIGHT SURGEONS INC, 7000 S YOSEMITE STREET STE 110 CENTENNIAL, CO 80112	AEROMEDICAL ADVISORS	2,919,610
HOME FRONT LLC, 1201 NEW YORK AVE NW SUITE 900 WASHINGTON, DC 20005	MKTG/ADVERTISING	1,494,708
FYVE S LLC, 3021 JAYHAWKERS PLACE SAN JOSE, CA 95136	TECHNOLOGY SERVICES	1,179,293
KELLY PRESS INC, 1701 CABIN BRANCH DRIVE CHEVERLY, MD 20785	PRINTING	909,679
JANCON CONSTRUCTION, PO BOX 30084 RPO WESTON HWY 7 WOODBIDGE, ONTARIO L4LOC7 CA	CONSTRUCTION	881,224

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 **▶** 37

Form 990 (2022)		Page 9				
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:\$	1g				
	h Total. Add lines 1a-1f		0			
Program Service Revenue	Business Code					
	2a MEMBERSHIP DUES	900099	228,865,299	228,865,299		
	b PUBLICATIONS	541800	2,738,080	2,564,674	173,406	
	c MEMBER BENEFITS	900099	826,797	826,797		
	d					
	e					
	f All other program service revenue.					
g Total. Add lines 2a-2f		232,430,176				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		12,868,293		12,868,293	
	4 Income from investment of tax-exempt bond proceeds		0			
	5 Royalties		87,786		87,786	
	6a Gross rents	(i) Real	(ii) Personal			
		6a				
		b Less: rental expenses	6b			
		c Rental income or (loss)	6c	0	0	
	d Net rental income or (loss)		0			
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
		7a	67,868,584	135,067		
		b Less: cost or other basis and sales expenses	7b	68,297,582	137,170	
		c Gain or (loss)	7c	-428,998	-2,103	
	d Net gain or (loss)		-431,101			
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		8a	0		
	b Less: direct expenses		8b	0		
	c Net income or (loss) from fundraising events		0			
	9a Gross income from gaming activities. See Part IV, line 19		9a	0		
b Less: direct expenses		9b	0			
c Net income or (loss) from gaming activities		0				
10a Gross sales of inventory, less returns and allowances		10a	0			
b Less: cost of goods sold		10b	0			
c Net income or (loss) from sales of inventory		0				
Miscellaneous Revenue		Business Code				
11a MISCELLANEOUS		900099	1,457,071		1,457,071	
b CONSULTING		541610	21,000	21,000		
c						
d All other revenue						
e Total. Add lines 11a-11d		1,478,071				
12 Total revenue. See instructions		246,433,225				
		232,256,770				
		194,406				
		13,982,049				

Form 990 (2022)

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 ☐

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,193,434			
2 Grants and other assistance to domestic individuals. See Part IV, line 22	29,250			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	42,948			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	10,757,451			
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	52,100,510			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	7,010,571			
9 Other employee benefits	8,500,610			
10 Payroll taxes	3,630,138			
11 Fees for services (non-employees):				
a Management	0			
b Legal	623,692			
c Accounting	390,087			
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	219,907			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	10,202,749			
12 Advertising and promotion	1,138,574			
13 Office expenses	3,395,428			
14 Information technology	3,117,562			
15 Royalties	0			
16 Occupancy	9,610,260			
17 Travel	17,229,366			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	9,639,118			
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	3,182,188			
23 Insurance	2,560,120			
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 FLIGHT PAY LOSS	65,314,498			
b PER CAPITA DUES	1,356,380			
c PUBLICATIONS/SUBSCRIPTIONS	729,749			
d REPAIRS & MAINTENANCE	302,860			
e All other expenses	825,929			
25 Total functional expenses. Add lines 1 through 24e	213,103,379			
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 SheetCheck 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		2,056	1	2,045
	2	Savings and temporary cash investments		35,137,770	2	16,845,988
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		10,073,196	4	12,451,137
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . . .		0	6	0
	7	Notes and loans receivable, net		2,468,475	7	2,680,833
	8	Inventories for sale or use		0	8	0
	9	Prepaid expenses and deferred charges		3,017,781	9	4,610,885
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 31,442,730			
	b	Less: accumulated depreciation	10b 17,249,465	16,524,135	10c	14,193,265
	11	Investments—publicly traded securities		302,884,466	11	303,628,842
	12	Investments—other securities. See Part IV, line 11		79,590,356	12	77,937,192
	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		38,786,088	15	43,023,769
16	Total assets. Add lines 1 through 15 (must equal line 33)		488,484,323	16	475,373,956	
Liabilities	17	Accounts payable and accrued expenses		43,648,862	17	69,875,170
	18	Grants payable		0	18	0
	19	Deferred revenue		0	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		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		72,221,096	25	64,602,503
	26	Total liabilities. Add lines 17 through 25		115,869,958	26	134,477,673
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.					
	27	Net assets without donor restrictions		372,614,365	27	340,896,283
	28	Net assets with donor restrictions		0	28	0
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		372,614,365	32	340,896,283
33	Total liabilities and net assets/fund balances		488,484,323	33	475,373,956	

Part XI Reconciliation of Net AssetsCheck 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	246,433,225
2	Total expenses (must equal Part IX, column (A), line 25)	2	213,103,379
3	Revenue less expenses. Subtract line 2 from line 1	3	33,329,846
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	372,614,365
5	Net unrealized gains (losses) on investments	5	-60,279,584
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-4,768,344
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	340,896,283

Part XII Financial Statements and ReportingCheck 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 on 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		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	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.	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?		No
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.		

Additional Data

Software ID:

Software Version:

EIN: 36-0710830

Name: AIR LINE PILOTS ASSOCIATION INTERNATIONAL

Form 990 (2022)

Form 990, Part III, Line 4a:

See Schedule O

Form 990, Part III, Line 4b:
See Schedule O
<hr/>

Form 990, Part III, Line 4c: <u>See Schedule O</u>
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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOSEPH DEPETE PRESIDENT	60.0 5.0			X				841,198	0	62,410
DAVID KRIEGER GENERAL MANAGER	40.0 5.0			X				680,979	0	79,742
MARCUS MIGLIORE GENERAL COUNSEL & DIR, LEGAL	40.0 0.0				X			627,523	0	85,900
BRUCE YORK SR. ADVISOR & CHIEF NEGOTIATOR	40.0 0.0				X			625,741	0	85,719
JONATHAN COHEN GENERAL COUNSEL & DIR, LEGAL	40.0 0.0				X			535,108	0	69,124
ANDREW SHOSTACK DIRECTOR, REPRESENTATION	40.0 0.0				X			528,504	0	72,181
ARTHUR LUBY ASST. DIRECTOR, REPRESENTATION	40.0 0.0				X			506,018	0	77,071
KELLY COLLIE DIRECTOR, HUMAN RESOURCES	40.0 2.0				X			490,507	0	84,552
ELIZABETH ROBINSON DIRECTOR OF FINANCE/CFO	40.0 5.0			X				519,669	0	45,856
HOWARD HAGY DIR, ENGINEERING & AIR SAFETY	40.0 0.0				X			474,589	0	84,377

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	Insttutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN SCHLEDER SR. LABOR REL CNSL/MEC COORD	40.0 0.0					X		466,034	0	75,041
MARIE SCHWARTZ DIR OF STRATEGIC MBR DEV & RES	40.0 0.0				X			449,658	0	84,132
DAVID WEAVER DIRECTOR, COMMUNICATIONS	40.0 0.0				X			441,935	0	84,127
THOMAS CIANTRA ASST DIR, LEGAL/DEP GEN CNSEL	40.0 0.0				X			457,661	0	68,035
RICHARD HARRELL DIR, INFORMATION TECH & SVCS	40.0 0.0				X			415,644	0	83,864
ELIZABETH BAKER DIRECTOR, GOVERNMENT AFFAIRS	40.0 0.0				X			437,510	0	44,645
SUZANNE KALFUS SENIOR ATTORNEY	40.0 0.0					X		382,848	0	81,883
JOAN BETTENBURG SR. LABOR REL COUNSEL	40.0 0.0					X		384,501	0	74,286
LEE VEID-NORSTERN ASST. DIR., IT DVLPMT & SUPPOR	40.0 0.0					X		364,286	0	75,828
KYE JOHANNING DIR, ECONOMIC & FINCL ANALYSIS	40.0 0.0				X			381,933	0	56,394

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	Instatutinal Trustee	Officer	Key employee	Highest compensated employee	Former			
ELIZABETH GINSBURG DIRECTOR, REPRESENTATION	40.0 0.0				X			383,097	0	53,025
CATHERINE POWERS ASST. DIRECTOR, REPRESENTATION	40.0 5.0				X			389,181	0	46,387
ANNA LEBOVIDGE ASST. DIRECTOR, REPRESENTATION	40.0 0.0					X		379,559	0	42,580
WILLIAM COUETTE VP ADMINISTRATION/SECRETARY	50.0 5.0			X				180,686	0	0
JOSEPH GENOVESE VP FINANCE/TREASURER	50.0 5.0			X				167,043	0	0
RUSSELL SKLENKA EXECUTIVE ADMINISTRATOR	40.0 0.0			X				165,917	0	0
ROBERT FOX FIRST VICE PRESIDENT	50.0 5.0			X				95,282	0	0
TIM PERRY EXECUTIVE VICE PRESIDENT	10.0 0.0			X				48,347	0	0
MIKE HAMILTON EXECUTIVE VICE PRESIDENT	10.0 0.0			X				43,265	0	0
JOE YOUNGERMAN EXECUTIVE VICE PRESIDENT	10.0 0.0			X				14,000	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			
WILLIAM NEVEU EXECUTIVE VICE PRESIDENT	10.0 0.0			X				12,750	0	0
SCOTT EWING EXECUTIVE VICE PRESIDENT	10.0 0.0			X				9,102	0	0
WES REED EXECUTIVE VICE PRESIDENT	10.0 0.0			X				9,088	0	0
BILL BARTELS EXECUTIVE VICE PRESIDENT	10.0 0.0			X				9,000	0	0
WES CLAPPER EXECUTIVE VICE PRESIDENT	10.0 0.0			X				9,000	0	0
SEAN CREED EXECUTIVE VICE PRESIDENT	10.0 0.0			X				9,000	0	0
JUSTIN TYLER HAWKINS EXECUTIVE VICE PRESIDENT	10.0 0.0			X				9,000	0	0
SEE SCH O FOR LIST BOARD OF DIRECTORS	1.0 0.0	X						0	0	0

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 AIR LINE PILOTS ASSOCIATION INTERNATIONAL	Employer identification number 36-0710830
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Part I-A

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

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."	
2	Political campaign activity expenditures. See instructions	\$
3	Volunteer hours for political campaign activities. See instructions	

Part I-B

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

1	Enter the amount of any excise tax incurred by the organization under section 4955	\$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	\$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<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	\$
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b.....	\$
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input 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				
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?	<input type="checkbox"/> Yes <input type="checkbox"/> 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) 2019	(b) 2020	(c) 2021	(d) 2022	(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).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures. See Instructions	5	

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
------------------	-------------

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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

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 July 25, 2006, 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 FASB 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 FASB 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 FASB ASC 958 relating to these items:

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

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat. No. 52283D

Schedule D (Form 990) 2022

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
1c	648,230
1d	587
1e	
1f	648,817

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				
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

Term endowment

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations

(ii) Related organizations

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

b

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

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	0		
c	Leasehold improvements	17,964,180	7,688,838	10,275,342
d	Equipment	6,322,142	4,934,995	1,387,147
e	Other	7,156,408	4,625,632	2,530,776
Total.	Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)			14,193,265

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) LIMITED PARTNERSHIPS	77,937,192	F
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	77,937,192	

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)		
(10)		
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)RIGHT OF USE	39,791,345
(2)INTERFUND RECEIVABLE	1,591,024
(3)OTHER ASSETS	1,515,917
(4)DEPOSITS	125,483
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.) ▶	43,023,769

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
LEASE LIABILITY	57,730,204
DEFERRED LIABILITIES	128,482
NET UNFUNDED MEDICAL PLAN LIABILITY	2,402,096
NET UNFUNDED PENSION PLAN LIABILITY	4,341,721
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) ▶	64,602,503

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 ☒

Schedule D (Form 990) 2022

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
SCHEDULE D, PART IV, LINE 1B	ESCROW AND CUSTODIAL ARRANGEMENT: 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
SCHEDULE D, PART X, LINE 2	<p>LIABILITY FOR UNCERTAIN TAX POSITIONS: The Association is exempt from federal income tax under Internal Revenue Code (the Code) Section 501(c)(5), though it is 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. 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 Association is subject to routine audits by taxing jurisdictions; however, there are currently no audits in progress for any tax periods. Management of the Association has determined that there are no material uncertain tax positions that require recognition or disclosure in the consolidated financial statements. In addition, there have been no tax related interest or penalties for the periods presented in these consolidated financial statements. Should such penalties and interest be incurred, the Association's policy is to recognize them as operating expenses.</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.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

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" on Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used 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 Activites 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 the region	(d) Activities conducted in region (by type) (such as, 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 the region	(f) Total expenditures for and investments in the region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	4	17			14,221,879
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	4	17			14,221,879

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			North America	CONTRIBUTION	7,813	CHECK			
(2)			North America	CONTRIBUTION	11,719	CHECK			
(3)			North America	CONTRIBUTION	20,000	WIRE TRANSF			
(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 **2**
- 3 Enter total number of other organizations or entities **1**

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on 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 noncash assistance	(g) Description of noncash 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; don't file with Form 990)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* ☒ Yes ☐ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* . ☒ Yes ☐ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).* ☐ Yes ☒ No

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.

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 2	PROCEDURE FOR MONITORING USE OF GRANT FUNDS OUTSIDE THE U.S.: ALPA'S GRANTS/ASSISTANCE 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. ALPA DOES NOT MONITOR THE USE OF GRANTS AFTER DISBURSEMENT.

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 3, ROW 1, COLUMN E	TYPE OF ACTIVITY: CONDUCTS REPRESENTATIVE ACTIVITIES THAT PROMOTE AND PROTECT THE INTERESTS OF AIR LINE PILOTS.

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 3, COLUMN F	ACCOUNTING METHOD: 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	4	17	Program Services	SEE PROGRAM SERVICES	4,524,115
East Asia and the Pacific	0	0	Program Services	SEE PROGRAM SERVICES	12,392

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
Europe (Including Iceland and Greenland)	0	0	Program Services	SEE PROGRAM SERVICES	28,345
Central America and the Caribbean	0	0	Investments		9,614,079

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	0	0	Grantmaking		42,948

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

Schedule I
(Form 990)

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States
Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Department of the
Treasury
Internal Revenue Service
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 noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 8
- 3 Enter total number of other organizations listed in the line 1 table ▶ 6

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) ALPA SCHOLARSHIP PROGRAM	7	18,250			
(2) ALPA AVIATION SCHOLARSHIP PROGRAM	1	1,000			
(3) COSTAS SIVYLLIS ALPA EDUCATION SCHOLARSHIP	4	10,000			
(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
SCHEDULE I, PART I, LINE 2	PROCEDURE FOR MONITORING USE OF GRANT FUNDS INSIDE U.S.: ALPA'S GRANTS/ASSISTANCE 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. ALPA DOES NOT MONITOR THE USE OF GRANTS AFTER DISBURSEMENT. SCHEDULE I, PART III ALPA SCHOLARSHIP PROGRAM: ONE 4-YEAR UNDERGRADUATE COLLEGE SCHOLARSHIP IS AWARDED, TOTAL MONETARY VALUE TO NOT EXCEED \$12,000 TO A STUDENT WHO MAINTAINS A 3.0 GPA. THE VICE PRESIDENT-ADMINISTRATION AND VICE PRESIDENT-FINANCE OF THE ASSOCIATION ARE CHARGED WITH THE RESPONSIBILITY OF SELECTING THE RECIPIENT(S) BASED ON BOTH ACADEMIC CAPABILITY AND FINANCIAL NEED. SCHEDULE I, PART III COSTAS SIVYLLIS ALPA EDUCATION SCHOLARSHIP: AWARDED TO THOSE CURRENTLY ENROLLED IN AN UNDERGRADUATE OR GRADUATE DEGREE PROGRAM IN THE AVIATION FIELD AND ACTIVELY ENROLLED IN A FLIGHT TRAINING COURSE AT CERTAIN PRE-DETERMINED INSTITUTIONS. THE STUDENT MUST BE ACTIVE IN THE ALPA EDUCATION PROGRAM AT THEIR UNIVERSITY AND HAVE AT LEAST A 3.0 (4.0 SCALE) OR 3.5 (5.0 SCALE) GPA. THE ALPA EDUCATION COMMITTEE IS CHARGED WITH THE SELECTION OF THE AWARD RECIPIENTS BASED ON ACADEMIC CAPABILITY, FINANCIAL NEED, AND DEMONSTRATED COMMITMENT TO AN AVIATION CAREER MAY BE CONSIDERED.

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 16295 WASHINGTON, DC 20041	52-6054159	501(C)(6)	17,940				SPONSORSHIP
ALPA EMERGENCY RELIEF FUND INC 7950 JONES BRANCH DR 400S MCLEAN, VA 22102	14-1936814	501(C)(3)	1,009,918				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)	6,500				SPONSORSHIP
WAYNE STATE UNIVERSITY 5401 CASS AVENUE DETROIT, MI 48202	38-6028429	501(C)(3)	17,500				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 2800 EISENHOWER AVE ALEXANDRIA, VA 22314	52-1190359	501(C)(7)	9,275				SPONSORSHIP
WOMEN IN AVIATION INT'L 1864 DAYTON GRMNTWN PK GERMANTOWN, OH 45327	37-1279395	501(C)(3)	8,485				SPONSORSHIP

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
CONGRESSIONAL SPORTSMEN'S FOUNDATION 110 N CAROLINA AVE SE WASHINGTON, DC 20003	52-1686163	501(C)(3)	12,500				SPONSORSHIP
UNITED MINE WORKERS OF AMERICA 18354 QUANTICO GTWY DR TRIANGLE, VA 22172	53-0159200	501(C)(5)	15,000				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
OBAP 19 MANTUA AVENUE MT ROYAL, NJ 08061	27-1836543	501(C)(3)	6,000				SPONSORSHIP
AMERICAN ASSOC OF AIRPORT EXECUTIVES INC 601 MADISON STREET ALEXANDRIA, VA 22314	51-0094939	501(C)(6)	12,000				SPONSORSHIP

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
CAPITOL HILL CLUB 300 FIRST STREET WASHINGTON, DC 20003	53-0200565	501(C)(7)	6,500				SPONSORSHIP
DELTA PILOTS CHARITABLE FUND 100 HARTFIELD CENTRE PKWY SUITE 800 ATLANTA, GA 30354	58-2510832	501(C)(3)	8,000				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
NIFA INC PO BOX 21347 CHATTANOOGA, TN 37424	23-7421636	501(C)(3)	6,500				SPONSORSHIP
RTCA INC 1150 18TH ST NW WASHINGTON, DC 20036	53-0182962	501(C)(3)	7,500				SPONSORSHIP

Schedule J (Form 990)	<div>Compensation Information</div> <div>For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees</div> <div>▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990.</div> <div>▶ Go to www.irs.gov/Form990 for instructions and the latest information.</div>	OMB No. 1545-0047
		2022
		Open to Public Inspection

Department of the Treasury Internal Revenue Service	Name of the organization AIR LINE PILOTS ASSOCIATION INTERNATIONAL	Employer identification number 36-0710830
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Part I Questions Regarding Compensation		Yes	No
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.			
<input type="checkbox"/> First-class or charter travel	<input checked="" 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 checked="" type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees		
<input checked="" type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes on 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	1b	Yes	
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 on Line 1a?	2	Yes	
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.			
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract		
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study		
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee		
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:			
a Receive a severance payment or change-of-control payment?	4a		No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
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:			
a The organization?	5a		
b Any related organization?	5b		
If "Yes," on line 5a or 5b, describe in Part III.			
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:			
a The organization?	6a		
b Any related organization?	6b		
If "Yes," on line 6a or 6b, describe in Part III.			
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7		
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.	8		
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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.

[illegible]

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
SCHEDULE J, PART I, LINE 1A	HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE: 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. DISCRETIONARY SPENDING ACCOUNT: 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**

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
SCHEDULE J, PART I, LINE 4B	PARTICIPATE IN OR RECEIVE PAYMENT FROM A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN: TAXABLE COMPENSATION OF \$7,907 FOR JONATHAN COHEN AND \$15,826 FOR KELLY COLLIE CAME FROM A NONQUALIFIED DEFERRED COMPENSATION PLAN. JOSEPH DEPETE IS A PARTICIPANT IN ALPA'S 457(F) NONQUALIFIED DEFERRED COMPENSATION PLAN. FOR 2022, NO PAYMENT WAS MADE TO THE PLAN BY ALPA RESULTING IN NO REPORTABLE TAXABLE COMPENSATION FOR THE TAX YEAR.

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
SCHEDULE J, PART II	PRESIDENT'S REPORTABLE COMPENSATION: THE PRESIDENT'S REPORTABLE COMPENSATION INCLUDES SALARY AND TAXABLE ALLOWANCES. THE COMPENSATION PACKAGE WAS REVIEWED AND APPROVED BY THE ALPA BOARD OF DIRECTORS.

Additional Data

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

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

(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(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				
1JOSEPH DEPETE PRESIDENT	(i)	562,393	61,655	217,150	40,120	32,698	914,016	0
	(ii)	0	0	0	0	0	0	0
1DAVID KRIEGER GENERAL MANAGER	(i)	546,570	82,756	51,653	40,120	44,100	765,199	0
	(ii)	0	0	0	0	0	0	0
2MARCUS MIGLIORE GENERAL COUNSEL & DIR, LEGAL	(i)	528,845	67,113	31,565	40,120	48,323	715,966	0
	(ii)	0	0	0	0	0	0	0
3BRUCE YORK SR. ADVISOR & CHIEF NEGOTIATOR	(i)	500,344	79,891	45,506	40,120	49,181	715,042	0
	(ii)	0	0	0	0	0	0	0
4JONATHAN COHEN GENERAL COUNSEL & DIR, LEGAL	(i)	404,221	82,337	48,550	40,120	32,436	607,664	0
	(ii)	0	0	0	0	0	0	0
5ANDREW SHOSTACK DIRECTOR, REPRESENTATION	(i)	432,667	65,015	30,822	40,120	33,317	601,941	0
	(ii)	0	0	0	0	0	0	0
6ARTHUR LUBY ASST. DIRECTOR, REPRESENTATION	(i)	403,910	66,547	35,561	40,120	38,207	584,345	0
	(ii)	0	0	0	0	0	0	0
7KELLY COLLIE DIRECTOR, HUMAN RESOURCES	(i)	379,483	64,870	46,154	40,120	47,242	577,869	0
	(ii)	0	0	0	0	0	0	0
8ELIZABETH ROBINSON DIRECTOR OF FINANCE/CFO	(i)	427,940	71,284	20,445	40,120	12,929	572,718	0
	(ii)	0	0	0	0	0	0	0
9HOWARD HAGY DIR, ENGINEERING & AIR SAFETY	(i)	382,657	67,787	24,145	40,120	47,561	562,270	0
	(ii)	0	0	0	0	0	0	0
10JOHN SCHLEDER SR. LABOR REL CNSL/MEC COORD	(i)	402,171	59,864	3,999	30,748	45,504	542,286	0
	(ii)	0	0	0	0	0	0	0
11MARIE SCHWARTZ DIR OF STRATEGIC MBR DEV & RES	(i)	367,856	64,212	17,590	40,120	47,133	536,911	0
	(ii)	0	0	0	0	0	0	0
12DAVID WEAVER DIRECTOR, COMMUNICATIONS	(i)	368,501	60,361	13,073	40,120	51,019	533,074	0
	(ii)	0	0	0	0	0	0	0
13THOMAS CIANTRA ASST DIR, LEGAL/DEP GEN CNSEL	(i)	390,197	53,526	13,938	40,120	29,172	526,953	0
	(ii)	0	0	0	0	0	0	0
14RICHARD HARRELL DIR, INFORMATION TECH & SVCS	(i)	332,597	61,341	21,706	40,120	48,822	504,586	0
	(ii)	0	0	0	0	0	0	0
15ELIZABETH BAKER DIRECTOR, GOVERNMENT AFFAIRS	(i)	360,095	62,869	14,546	40,120	8,215	485,845	0
	(ii)	0	0	0	0	0	0	0
16SUZANNE KALFUS SENIOR ATTORNEY	(i)	327,331	53,533	1,984	38,360	44,733	465,941	0
	(ii)	0	0	0	0	0	0	0
17JOAN BETTENBURG SR. LABOR REL COUNSEL	(i)	325,891	54,856	3,754	38,360	37,137	459,998	0
	(ii)	0	0	0	0	0	0	0
18KYE JOHANNING DIR, ECONOMIC & FINCL ANALYSIS	(i)	314,617	55,567	11,749	40,120	22,309	444,362	0
	(ii)	0	0	0	0	0	0	0
19LEE VEID-NORSTERN ASST. DIR., IT DVLPMT & SUPPOR	(i)	296,730	56,266	11,290	40,120	36,965	441,371	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, 1099-MISC compensation, and/or 1099-NEC			(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				
21ELIZABETH GINSBURG DIRECTOR, REPRESENTATION	(i)	271,776	77,555	33,766	40,120	13,810	437,027	0
	(ii)	0	0	0	0	0	0	0
1CATHERINE POWERS ASST. DIRECTOR, REPRESENTATION	(i)	323,431	54,539	11,211	40,120	7,523	436,824	0
	(ii)	0	0	0	0	0	0	0
2ANNA LEBOVIDGE ASST. DIRECTOR, REPRESENTATION	(i)	319,245	51,896	8,418	40,120	3,716	423,395	0
	(ii)	0	0	0	0	0	0	0
3WILLIAM COUETTE VP ADMINISTRATION/SECRETARY	(i)	0	0	180,686	0	0	180,686	0
	(ii)	0	0	0	0	0	0	0
4JOSEPH GENOVESE VP FINANCE/TREASURER	(i)	0	0	167,043	0	0	167,043	0
	(ii)	0	0	0	0	0	0	0
5RUSSELL SKLENKA EXECUTIVE ADMINISTRATOR	(i)	0	0	165,917	0	0	165,917	0
	(ii)	0	0	0	0	0	0	0

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization
AIR LINE PILOTS ASSOCIATION INTERNATIONAL

Employer identification number

36-0710830

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4A	<p>PROGRAM SERVICE ACTIVITY #1: Collective Bargaining: ALPA is the collective bargaining agent for more than 66,000 airline pilots and professional flight engineers who make up 40 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 2022 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. FORM 990, PART III, LINE 4B PROGRAM SERVICE ACTIVITY #2: Government Affairs: As the voice of professional airline pilots, the association represents a pilot partisan agenda to Congress and to many administrative 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 2022 were the airline industry recovery post-COVID and safety and security issues impacting the piloting profession and air travel. FORM 990, PART III, LINE 4C PROGRAM SERVICE ACTIVITY #3: 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 2022 included: aircraft certification, pilot fatigue, pilot health/COVID, pilot training and qualification, airport and runway safety, integration of unmanned aircraft and commercial space activities in the national airspace, various improvements to aviation security and pilot and passenger screening, safety management systems, and the results of key accident investigations. FORM 990, PART III, LINE 4D PROGRAM SERVICE ACTIVITY #4: Publications: The union's magazine, Air Line Pilot, is published 9 times per year with a circulation of about 92,000 copies, mostly to members and retired pilots. Its content is a mixture of union news, industry trends, and technical and safety- and security-related information. Most of ALPA's 40 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 a publicly accessible homepage and a "members only" portion of the website.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART V, LINE 2A	NUMBER OF EMPLOYEES REPORTED ON W-3: THE ASSOCIATION REPORTED ON ITS 2022 FORM W-3 THE ISSUANCE OF 853 W-2'S, WHICH DIFFERS WITH THE NUMBER ENTERED FOR THOSE ISSUED TO EMPLOYEES, AS THE ASSOCIATION REPORTS TAXABLE AMOUNTS TO MEMBERS OF THE ASSOCIATION ON A W-2 FOR CERTAIN TAXABLE REIMBURSEMENTS AND FLIGHT PAY LOSS. THESE MEMBERS ARE NOT EMPLOYEES OF THE ASSOCIATION, AS THEIR EMPLOYMENT IS WITH THEIR RESPECTIVE AIRLINE COMPANY, AND ARE NOT INCLUDED IN THE EMPLOYEE COUNT FOR THE ASSOCIATION.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	SIGNIFICANT CHANGES TO GOVERNING DOCUMENTS: October 20, 2022: The ALPA Constitution and By-Laws Articles VI, VII, X, XIV, XVII, XXII were amended to reflect changes regarding the ALPA Canada President, Executive Vice President Group C, and Canadian Voting Procedures.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	<p>MEMBERS: ALPA REPRESENTS MORE THAN 66,000 PILOT MEMBERS. ALPA HAS TWO CATEGORIES OF ACTIVE MEMBERS (ACTIVE AND EXECUTIVE ACTIVE). ALPA ALSO COLLECTS DUES FROM EXECUTIVE INACTIVE MEMBERS (AT A REDUCED RATE) AND "NON-MEMBERS". 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 NEVER THELESS COMPELLED TO PAY UNION DUES OR FEES UNDER AN AGENCY SHOP AGREEMENT. NON-MEMBERS WHO OBJECT TO SHARING THE COST OF ANY UNION ACTIVITIES NOT GERMANE TO COLLECTIVE BARGAINING 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.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	MEMBERS WHO MAY ELECT: 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, PART VI, SECTION B, LINE 11B	FORM 990 REVIEW PROCESS: THE ORGANIZATION ENGAGES WITH AN INDEPENDENT CERTIFIED ACCOUNTING FIRM TO PREPARE AND REVIEW THE ORGANIZATION'S FORM 990 BASED ON INFORMATION PROVIDED BY A LPA'S ACCOUNTING STAFF. THE RETURN IS REVIEWED BY THE SENIOR STAFF ACCOUNTANTS, FINANCE DEPARTMENT MANAGEMENT STAFF, AND VICE PRESIDENT FINANCE/TREASURER OF ALPA.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	<p>CONFLICT OF INTEREST POLICY: (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 "IT IS, THEREFORE, THE DUTY OF EACH SUCH PERSON, TAKING INTO ACCOUNT THE SPECIAL PROBLEMS AND FUNCTIONS OF A LABOR ORGANIZATION, TO HOLD ITS 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 ON 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>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINES 15A & 15B	<p>PROCESS FOR DETERMINING COMPENSATION: (1) ALPA'S COMPENSATION REVIEW PROCESS INCLUDES AN EVALUATION OF AN INDIVIDUAL'S 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 2022 BOD MEETING. THE PRESIDENT'S COMPENSATION IS UPDATED BY THE DIRECTOR OF FINANCE/CFO AT LEAST ANNUALLY PER THE CALCULATION APPROVED BY THE BOD. THE GENERAL MANAGER'S COMPENSATION IS APPROVED BY THE PRESIDENT AND THE DIRECTOR OF HUMAN RESOURCES. OTHER KEY EMPLOYEE'S COMPENSATION IS APPROVED BY THE GENERAL MANAGER AND THE DIRECTOR OF HUMAN RESOURCES. THE REVIEW PROCESS FOR KEY EMPLOYEES WAS UNDERTAKEN DURING 2022.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	AVAILABILITY OF DOCUMENTS: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND AUDITED FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC TO THE EXTENT REQUIRED BY LAW.

990 Schedule O, Supplement Information

Return Reference	Explanation
FORM 990, PART VII, SECTION A, LINE 1	<p>BOARD OF DIRECTORS: THE FOLLOWING INDIVIDUALS SERVED ON AN AVERAGE WEEKLY HOUR OF 1 ON ALP A BOARD OF DIRECTORS IN 2022 AND DID NOT RECEIVE ANY REPORTABLE COMPENSATION FROM THE ORGA NIZATION FOR SERVICES RENDERED IN THEIR CAPACITY AS DIRECTORS: Amr Abdelsamad Philipe Abs Da Cruz Matthew Adams Timothy Alfeld Tamer Alhabash Brent Allen Nicolas Archambault Eric A rmstrong Rex Baggett Mark Bailey John Balestrine Alexander Barnych Paula Battreal Philippe Baumgart Lawrence Beck Prithvi Bharadwaj Earl Blowers Nicholas Bolander Darryl Boon Benja min Britton Ken Broomhead Todd Brower Dallas Brown Nicholas Brummund Robert Burdette Bryan Burks David Burnett Ray Burton Rod Buskas Nicholas Cabral Greg Calkins Taylor Campbell Mi chael Canart Graham Cartwright Robert Cecchi Donald Clark James Coffelt Scott Combest Jose ph Cornelius Margaret Cowan Andrew Coyle Jeffery Cramer Justin De Rooy Nicholas Defigio Cr aig Devries Matthew Di Tommaso Heather Dino Kevin Dohnal Thomas Dowdle Ethan Downing Gary Edwards Kari Ellett Max Enis Randy Erickson William Eway Daniel Fahl Ryan Fawcett David Fi chtner Phillip Fields Kenneth Fingers Brian Finley Nathan Furrh Cornel Garvey Allyson Geig er David Gentner Jeffrey Goode Kelly Grawunder Jonathan Grindol Joel Gutierrez Michael Hae dt Hickory Ham James Harding Andrew Hardman Nicolas Harman Arna Harris Paul Hastert Trevor Havenga Matthew Hayduk Harold Hendrickson Mark Hollis Gary Holzinger Alexander Hope Scott Horning Christopher Howard Nathan Howdon Michael Howe Jill Hunter Ren Huschle Thomas Ifto dy Taylor Izard Andrew Johnson Kathryn Judge Jeremy Keyes Sean Kimura Andrew Kinnear Craig Klein Robby Kleinmeyer Robert Kloft Clark Kluwe Robert Kolbus Paul Koziol Scott Kretschma nn Daniel Krieger Jeffrey Larson Benjamin Liebhaber Scott Lohman Anthony Luna Eric Mann Ev an Martin Mario Martins Steven Mathis Robert Maxwell Kirk Mays Marcus Mccall Samuel Mccart hy Keith Mcclanahan Shawn Mccraley Tanner Mccaffey Cameron Mcelis Steven Mcsvain Daniel M ichelin Timothy Millar Dustin Mingo Juan Morales-Lube Robert Murphy Shane Neville John Ode n Alfredo Ortiz William Outlaw John Owens Michael Paradise Jack Parlee Oscar Patin Sammie Perez Julian Perez Rueda Alexandra Pichert Nicholas Pilhuj Jeffrey Point Joshua Poland Tim othy Powell Darrell Pye Christopher Pye Jefferson Quinn Chad Rabinowitz Richard Redfern Br ian Reedy Conrad Reid Isaac Reiser Gilbert Renaud Lynsey Rich John Roback Christopher Sala zar Jonathan Sandrolini Michael Savoury Danielle Schreiber Jeffrey Schroeder Johnathan Sco ggin Michael Sederlund Anita Shew Tyler Shutler Robert Simms Jason Sliva Gerard Smithers M ichelle Snow Etienne Souske-Dumontet Michael Sterling Corey Strachan Jeffrey Suttler David Sveden Isaac Swainston Corbin Sword Garth Thompson Dan Tomic Christopher Toornstra Stacey Tumoth Mark Veney Frank Ventura Michael Vieru Brian Wald Scott Wariner Brenton Whitaker J ordan White Brandon Wilhelm Andrew Wilson Mark Young Stephen Young Tracie Zampa Richard Zi ns David Zook</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VII, SECTION A, LINE 1	<p>BOARD OF DIRECTORS: THE FOLLOWING INDIVIDUALS SERVED ON AN AVERAGE WEEKLY HOUR OF 1 ON ALP A BOARD OF DIRECTORS IN 2022. ALL PAYMENTS TO THESE INDIVIDUALS REPRESENT REIMBURSEMENT FOR EXPENSES OR LOST BENEFITS (FLIGHT PAY LOSS) AND NONE OF THE PAYMENTS REPRESENT COMPENSATION FOR SERVICES RELATED TO THEIR SERVICE ON THE ALPA BOARD. THESE AMOUNTS ARE TAXABLE TO THE RECIPIENT AS REPORTABLE COMPENSATION: Christopher Abell 99 Mark Allen 399 Phillip Anderson 421 Benjamin Anderson 4,297 Derek Archer 7,695 Jacob Astin 3,442 Michael Bell 1,196 Ryan Bennett 18 Wesley Blankenship 3,382 Julien Boisvert 5,619 Riley Box 1,347 Adam Bradley 274 Samuel Brennan 4,529 Chad Bruch 5,500 William Brynjolfsson 139 Michael Carpenter 62 Marc Cervantes 2,047 Terry Chan 377 Anthony Chibnik 457 Mark Circelli 1,087 Chad Claringbold 833 Christopher Clay 17,771 Armel Cloarec 5,217 Jay Cowieson 1,224 Kevin Crant 9,420 James Crytser 228 Justin Cunningham 957 Dana Dann-Messier 17,568 Andrew Derrick 1,174 William Dressler 4,059 Jeffrey Engberg 1,661 Jacob Eve 186 Adam Feldman 146 Adam Fitzsimmons 1,241 David Forbes 1,402 Chase Freeman 127 Randi Freyer 4,758 Christopher Gill 24,528 Timothy Gilleran 578 Alan Godfrey 5,461 Kimberley Gott 259 William Gresslin 70 Curtis Hafer 4,696 Coleman Hamilton 106 Richard Harper 8 Jason Harris 3,080 Darren Hartmann 629 Shlomo Hatchwell 1,314 Tyler Hover 1,351 Bradley Janzen 4,710 Steven Johnson 290 Glenn Johnson 745 Joshua Kallet 78 Todd Koss 8,053 Thomas Kramer 1,400 Genevieve Lang 738 Michele Lavigna 13,146 Sean Lee 239 Brian Lethert 1,003 Anthony Lind 422 Nils Lundblad 2,003 Emilio Marcos 25,254 Samuel Mason 17,032 James Mccullough 108 Michael Mclean 5,217 Eric Meenk 16 Thomas Merrill 17,423 Jonathan Miranda 377 Francisco Moreno Navas 543 Wendy Morse 1,307 James Muchowicz 88 Shaun Murray 174 Antonio Nassar 1,411 Eric Nelson 2,119 Kesar Nizzar 985 Christopher Norman 44,347 Scott Norton 91 Brandon Oberdorfer 1,332 Joseph Occhiuzzo 692 Noel Ojeda 1,029 Kevin O'mahoney 64 Shane Ouellette 5,662 Jonathan Parra 383 Lawrence Payne 9,705 Austin Peterson 23 Greg Pinckney 33 Marc Piquette 181 David Power 3,623 Patrick Ramirez 915 William Rodgers 3,194 Bryan Rosenthal 75 Joshua Rowe 410 Barry Rutberg 14,094 David Shepherd 181 Bradley Small 9,275 Shannon Smith 129 Ashley Sweet Wegner 2,717 Kevin Templin 5,620 Todd Thursby 31,220 Peter Van Stee 308 Stephane Wauthoz 5,217 Douglas Whitesell 2,981 Timothy Williams 1,493 Anne Worster 41 Noorullah Yoosufani 4,014 Israel Young 101 Douglas Zink 2,216 ----- TOTAL \$408,686</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	OTHER CHANGES IN NET ASSETS ARE ATTRIBUTABLE TO: (\$ 72,464) MEC RETURN OF FUNDS (\$ 1,044,607) MEDICAL RELATED LOSS OTHER THAN POSTRETIREMENT BENEFIT COST (\$ 3,560,157) PENSION RELATED LOSS OTHER THAN NET PERIODIC PENSION COST (\$ 91,116) TRANSLATION LOSS ----- (\$ 4,768,344) TOTAL

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	OVERSIGHT PROCESS: THE CONSOLIDATED FINANCIAL STATEMENTS WERE AUDITED BY AN INDEPENDENT CERTIFIED PUBLIC ACCOUNTING FIRM. THE ORGANIZATION'S EXECUTIVE TEAM ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND THE SELECTION OF THE INDEPENDENT CERTIFIED PUBLIC ACCOUNTING FIRM.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

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	
See Additional Data Table								

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 CONTINENTAL BUILDING 25 CHURCH ST HAMILTON HM12 BD	CAPTIVE INS.	BD	ALPA	C CORP	-2,135,946	11,128,839	100.000 %	Yes	
(2) ALPA CANADA INSURANCE TRUST 360 ALBERT STREET STE 1210 OTTAWA, ONTARIO K1R 7X7 CA	VEBA	CA	N/A	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.

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

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

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

k Lease of facilities, equipment, or other assets from related organization(s)

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

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

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

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

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

s Other transfer of cash or property from related organization(s)

Yes

No

No

Yes

No

Yes

No

Yes

No

Yes

Yes

No

No

Yes

No

Yes

Yes

No

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

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

Schedule R (Form 990) 2022

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

[illegible]

Part VII

Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 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
7950 JONES BRANCH DRIVE 400S MCLEAN, VA 22102 14-1936814	CHARITABLE	VA	501(C)(3)	12-TYPE I	ALPA	Yes	
7950 JONES BRANCH DRIVE 400S MCLEAN, VA 22102 52-0946056	RENT PROPERTY	VA	501(C)(2)		ALPA	Yes	
7950 JONES BRANCH DRIVE 400S MCLEAN, VA 22102 52-1062313	PAC	VA	527		ALPA	Yes	
7950 JONES BRANCH DRIVE 400S MCLEAN, VA 22102 54-1587464	VEBA	VA	501(C)(9)		ALPA	Yes	
7950 JONES BRANCH DRIVE 400S MCLEAN, VA 22102 54-1775762	VEBA	VA	501(C)(9)		ALPA	Yes	
7950 JONES BRANCH DRIVE 400S MCLEAN, VA 22102 65-1297729	VEBA	VA	501(C)(9)		ALPA	Yes	
7950 JONES BRANCH DRIVE 400S MCLEAN, VA 22102 82-1580173	VEBA	HI	501(C)(9)		ALPA	Yes	
7950 JONES BRANCE DRIVE 400S MCLEAN, VA 22102 32-0584293	VEBA	VA	501(C)(9)		ALPA	Yes	
7950 JONES BRANCH DRIVE 400S MCLEAN, VA 22102 61-1890518	RENT PROPERTY	DC	501(C)(2)		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
ALPA EMERGENCY RELIEF FUND INC	B	1,009,918	COST
THE 1625 MASSACHUSETTS AVE NW CORP	D	58,019	COST
304 PENNSYLVANIA AVENUE CORP	K	785,010	LEASE AGREEMENT
THE 1625 MASSACHUSETTS AVE NW CORP	K	350,004	PAYMENTS
FEDEX PILOTS POST MDCR RTR PM REIM PLAN	L	293,935	COST
ALPA PILOT WELFARE BENEFIT PLAN	L	562,701	COST
KITTY HAWK INSURANCE CO LTD	L	85,010	COST
FEDEX PILOTS POST MDCR RTR PM REIM PLAN	Q	111,122	COST
HAWAIIAN PILOTS POST MEDICARE HEALTH	Q	93,753	COST
KITTY HAWK INSURANCE CO LTD	R	2,374,357	COST