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Fiscal year
7/1/07 - 6/30/08

Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.

► The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150

2008

**Open to Public
Inspection**

A For the 2008 calendar year, or tax year beginning

, 2008, and ending

, 20

B Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Termination
☐ Amended return
☐ Application pending

Please
use IRS
label or
print or
type.
See
Specific
Instruc-
tions.

C Name of organization

AFT 2882 N. Tonawanda United Teachers

Number and street (or P O box, if mail is not delivered to street address)

1333 Strad Avenue

Room/suite

207

City or town, state or country, and ZIP + 4

North Tonawanda, NY 14120-3061

D Employer identification number

23 7058435

E Telephone number

(716) 694-5235

F Group Exemption
Number ►

• **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

G Accounting method ☒ Cash ☐ Accrual
Other (specify) ►

I Website: ►

J Organization type (check only one) — ☒ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

H Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

K Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts. If \$1,000,000 or more, file Form 990 instead of Form 990-EZ. ► \$

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	0
	2	Program service revenue including government fees and contracts	2	0
	3	Membership dues and assessments	3	248,990
	4	Investment income	4	4,282
	5a	Gross amount from sale of assets other than inventory	5a	0
	5b	Less: cost or other basis and sales expenses	5b	0
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	5c	0
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>		
	6a	Gross revenue (not including \$ of contributions reported on line 1)	6a	0
6b	Less: direct expenses other than fundraising expenses	6b	0	
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	0	
7a	Gross sales of inventory, less returns and allowances	7a	0	
7b	Less: cost of goods sold	7b	0	
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0	
8	Other revenue (describe ►)	8	19,757	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	269,029	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	2,725
	11	Benefits paid to or for members	11	175,223
	12	Salaries, other compensation, and employee benefits	12	48,790
	13	Professional fees and other payments to independent contractors	13	0
	14	Occupancy, rent, utilities, and maintenance	14	7,300
	15	Printing, publications, postage, and shipping	15	1,154
	16	Other expenses (describe ►)	16	38,746
	17	Total expenses. Add lines 10 through 16	17	273,933
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-4,909
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	28,085
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20. ►	21	23,176

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II.)

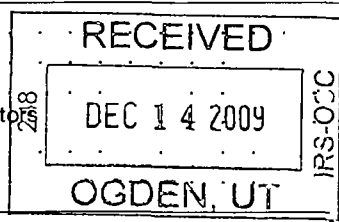
	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	28,085	23,176
23 Land and buildings	0	0
24 Other assets (describe ►)		
25 Total assets	28,085	23,176
26 Total liabilities (describe ►)		
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	28,085	23,176

For Privacy Act and Paperwork Reduction Act Notice, see the Instruction for Form 990.

Cat No 106421

Form **990-EZ** (2008)

SCANNED Jul 04 2010



Part III **Statement of Program Service Accomplishments** (See the instructions for Part III.)

Expenses

(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)

What is the organization's primary exempt purpose?

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

28 see attachment

(Grants \$) If this amount includes foreign grants, check here

28a

29 Publications issued: NTUT Journal, a local teachers union's newsletter published 5 times yearly distributed to all members

(Grants \$) If this amount includes foreign grants, check here

29a

30 a. Advance the working conditions and standards for membership, b. promote the interest of public
ed through leadership/educational workshops/conferences c. protect the rights of members
d. vote in elections or referenda at all union levels

(Grants \$) If this amount includes foreign grants, check here

30a

31 Other program services (attach schedule)

(Grants \$) If this amount includes foreign grants, check here

31a

32 Total program service expenses (add lines 28a through 31a)

32

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

[illegible]

Part V Other Information (Note the statement requirements in the instructions for Part VI.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		✓
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		✓
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?		✓
b If "Yes," has it filed a tax return on Form 990-T for this year?		
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N		✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a		
b Did the organization file Form 1120-POL for this year?		✓
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		
b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9 39a		
b Gross receipts, included on line 9, for public use of club facilities 39b		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ , section 4955 ▶		
b Section 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I		✓
c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶		
d Enter amount of tax on line 40c reimbursed by the organization ▶		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.		✓
41 List the states with which a copy of this return is filed. ▶		
42a The books are in care of ▶ <u>Teresa Lamparelli</u> Telephone no. ▶ <u>(716) 694-5235</u> Located at ▶ <u>1333 Strad Avenue, Suite 207, NT, NY</u> ZIP + 4 ▶ <u>14201-3061</u>		
b 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)?	Yes	No
If "Yes," enter the name of the foreign country: ▶		✓
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?		✓
If "Yes," enter the name of the foreign country ▶		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

- 46** 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

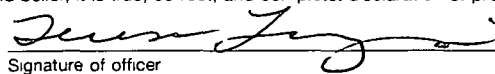
	Yes	No
46		✓
47		✓
48		✓
49a		✓
49b		
- 47** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 48** Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 49a** Did the organization make any transfers to an exempt non-charitable related organization?
- b** If "Yes," was the related organization(s) a section 527 organization?
- 50** Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
none				
Total number of other employees paid over \$100,000 ▶				

- 51** Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
none		
Total number of other independent contractors each receiving over \$100,000 ▶		

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 ▶  Date 12-7-09

Signature of officer

▶ **Teresa Lamparelli, Treasurer**

Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ _____ Date _____ Check if self-employed ▶ ☐

Firm's name (or yours if self-employed), address and ZIP + 4 ▶ _____ Preparer's Identifying Number (See instructions)

EIN ▶ _____ Phone no ▶ () _____

May the IRS discuss this return with the preparer shown above? See instructions ▶ ☐ Yes ☐ No

Part II: Statement of Functional Expenses Line 10 – Grants and Allocations
NTUT Scholarship Winners 2009

NAME	ADDRESS	AWARD LEVEL	AMOUNT
Angela Montaldi	711 Westbrook Dr N T , NY 14120	high school	650 00
Jonathan McCarthy	232 Niagara Street N.T NY 14120	high school	650.00
Lauren Mosier	438 Hopkins Road Williamsville, NY 14221	high school	650 00
Brad R Davis	1073 Rue Road N T , NY 14120	elem school (savings bond)	25 00
William Alvarado	247 Walck Road N T , NY 14120	elem school (savings bond)	25 00
Carlie Mc Clinsey	443 Doeble Dr N T , NY 14120	elem school (savings bond)	25 00
Destiny Kappa	East Robinson apt 2 N T., NY 14120	elem school (savings bond)	25 00
Andrew Rossi	1321 Abington Place N T , NY 14120	elem school (savings bond)	25 00
Laura Garrett	1343 Sweeney Street N T., NY 14120	mid school (savings bond)	50 00
Amber Kelly	628 Christiana Street N T , NY 14120	mid school (savings bond)	50 00
Andrew Walck	116 Forbes Terrance N T , NY 14120	mid school (savings bond)	50 00
TOTAL SCHOLARSHIP EXP			===== \$2,225 00

Charitable Donations

DATE	ORGANIZATION	EVENT	AMOUNT
1/14/09	SPECIAL OLYMPICS NEW YORK, INC	SPONSOR AN ATHLETE	300 00
5/13/09	SADD	Prom breakfast	200 00
			500.00

PART II: Statement of Functional Expenses

Line 11 – Benefits paid to or for members

Payments made to NYSUT, New York State United Teachers

Date	Amount
8/1/08	2,848
10/12/08	16,643
11/15/08	16,738
12/23/08	16,834
1/26/09	16,738
2/24/09	16,691
3/18/09	16,715
4/09/09	17,000
5/25/09	16,822
6/26/09	33,548
6/26/09	4,646
TOTAL DUES	175,223

PART II: Statement of Functional Expenses

Line 12- Salaries , other compensation, and employee benefits

NTUT OFFICER PAY: 2007-2008

TITLE	NAME	Gross pay
PRESIDENT	L Roach	9035
TREASURER	T Lamparelli	3614
HIGH SCHOOL VICE PRESIDENT	A Lentsch	1807
MIDDLE SCHOOL VICE PRESIDENT	L Czora	1807
ELEMENTARY VICE PRESIDENT	P Coia	1807
ELEMENTARY DELEGATE – A	J Moskalik	904
MIDDLE SCHOOL DELEGATE	S Evarts	904
HIGH SCHOOL DELEGATE (7/07-12/07)	C Traina	452
HIGH SCHOOL DELEGATE (1/08-6/08)	G Lachut	452
REC SECRETARY (7/07-12/07)	S Hansgate	271
REC SECRETARY (1/08-6/08)	C Traina	271
GRIEVENCE CHAIR	S O'Reilly	1807
NEW TEACHER CHAIRPERSON	M Chido	1084
SICK BANK CHAIRPERSON	T Lamparelli	1084
JOURNAL EDITOR	J Aguliaro	1084
BENEFIT TRUST CHAIRPERSON	G Lachut	1084
BENEFIT TRUST TREASURER	T Brosius	361
Total		27,828

Office Secretary

Janet Wachowicz

28,797

PART III – Statement of Program Service Accomplishments

Organization's primary exempt purpose The North Tonawanda United Teachers primary purpose is to secure conditions necessary to the greatest efficiency of teachers and school The Union shall affiliate with the New York State United Teachers and the American Federation of Teachers

Exempt Purpose Achievements

- 1 Number of Clients served
 - Teachers = 349
 - Teacher assistants = 7
 - Retirees = 335
 - Unpaid leave = 6
 - Substitutes = 30
 - =====
 - total members = 727
- 2 Publications issued NTUT Journal is a local teachers' union newsletter which is published five times per year and distributed to all of the members
- 3 Achievements
 - a Advance the standards of all members through aggressive negotiations with the school district board of education
 - b Promote the interests of public education through
 - i Teacher/union/leadership workshops and conferences
 - ii. Public awareness and scholarship
 - c Protect the rights of all members
 - d. Vote in elections or referenda at all union levels