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990-EZ

Form

Department of the Treasury  
Internal Revenue ServiceShort Form  
Return of Organization Exempt From Income TaxUnder 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 \$500,000 and total assets less than \$1,250,000 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

2009

Open to Public  
Inspection

A For the 2009 calendar year, or tax year beginning July 1, , 2009, and ending June 30 , 20 10

- B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

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

C Name of organization

American Federation of Teachers 2882 North Tonawanda United Teachers

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

1333 Strad Ave

Room/suite

207

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

North Tonawanda, NY 14120

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 Tax-exempt status (check only one) — ☒ 501(c) ( ) ◀ (insert no ) ☐ 4947(a)(1) or ☐ 527H 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 Form 990-EZ or Form 990 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 \$500,000 or more, file Form 990 instead of Form 990-EZ. \$ 285,044

## 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	270,343
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	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 \$ reported on line 1) of contributions	6a	
	6b	Less: direct expenses other than fundraising expenses	6b	
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c		
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less: cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe: benefit trust secr copay, refunds, aft receipts, vote-cope returns)	8	14,701	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	285,044	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	2575
	11	Benefits paid to or for members	11	173,720
	12	Salaries, other compensation, and employee benefits	12	71,502
	13	Professional fees and other payments to independent contractors	13	0
	14	Occupancy, rent, utilities, and maintenance	14	7,124
	15	Printing, publications, postage, and shipping	15	283
	16	Other expenses (describe: insurance, payroll tax, mileage, education, office exps, meetings)	16	41,342
	17	Total expenses. Add lines 10 through 16	17	296,546
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-11,502
	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	23,176
	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	

## Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 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	23,176	22 11,674
23 Land and buildings		23
24 Other assets (describe: )		24
25 Total assets		25
26 Total liabilities (describe: )		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	23,176	27 11,674

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form 990-EZ (2009)

SCANNED OCT 19 2010

5

## Expenses

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

**28** see attached

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

28a

29 publications issued, NTUT journal, distributed to membership 5 times annually

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

29a

30 a. advance working conditions for members, b. promote interest of public education through leadership and educational conferences, c. protect members' rights, 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

[illegible]

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

	Yes	No
<b>33</b> Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . . . .	<b>33</b>	✓
<b>34</b> Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes . . . . .	<b>34</b>	✓
<b>35</b> 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 why the organization did not report the income on Form 990-T.		
<b>a</b> Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? . . . . .	<b>35a</b>	✓
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>35b</b>	✓
<b>36</b> Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .	<b>36</b>	✓
<b>37a</b> Enter amount of political expenditures, direct or indirect, as described in the instructions. ► <b>37a</b> _____	<b>37a</b>	
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	<b>37b</b>	✓
<b>38a</b> 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 outstanding at the end of the period covered by this return? . . . . .	<b>38a</b>	✓
<b>b</b> If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . .	<b>38b</b>	
<b>39</b> Section 501(c)(7) organizations Enter:		
<b>a</b> Initiation fees and capital contributions included on line 9 . . . . .	<b>39a</b>	
<b>b</b> Gross receipts, included on line 9, for public use of club facilities . . . . .	<b>39b</b>	
<b>40a</b> Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► _____ ; section 4912 ► _____ , section 4955 ► _____		
<b>b</b> Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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 . . . . .	<b>40b</b>	✓
<b>c</b> Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . .		
<b>d</b> Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . .		
<b>e</b> 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 . . . . .	<b>40e</b>	✓
<b>41</b> List the states with which a copy of this return is filed. ► <b>New York</b>		
<b>42a</b> The organization's books are in care of ► <b>Teresa Lamparelli</b> Telephone no. ► <b>716-694-5235</b> Located at ► <b>1333 Strad Ave, #207, North Tonawanda, NY 14120</b> ZIP + 4 ► <b>14120-3061</b>		
<b>b</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)? . . . . .	<b>42b</b>	✓
If "Yes," enter the name of the foreign country: ► _____ See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .		
<b>c</b> At any time during the calendar year, did the organization maintain an office outside of the U S ? . . . . .	<b>42c</b>	✓
If "Yes," enter the name of the foreign country: ► _____		
<b>43</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the tax year . . . . .	<b>43</b>	<input type="checkbox"/>
<b>44</b> Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>44</b>	✓
<b>45</b> 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 . . . . .	<b>45</b>	✓

**Part VI** **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46–49b and complete the tables for lines 50 and 51.

<b>46</b>	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 . . . . .	<b>46</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>47</b>	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .	<b>47</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>48</b>	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	<b>48</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>49a</b>	Did the organization make any transfers to an exempt non-charitable related organization? . . . . .	<b>49a</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>b</b>	If "Yes," was the related organization a section 527 organization? . . . . .	<b>49b</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>50</b>	Complete this table for the organization's 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."			

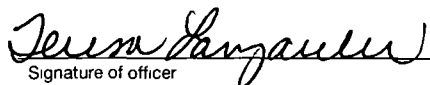
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
none				

**f** Total number of other employees paid over \$100,000 . . . ▶ \_\_\_\_\_

**51** Complete this table for the organization's 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		

**d** Total number of other independent contractors each receiving over \$100,000 ▶ \_\_\_\_\_

<b>Sign Here</b>	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.			
	 Signature of officer		8-6-2010 Date	
<b>Paid Preparer's Use Only</b>	Teresa Lamparelli, NTUT Treasurer Type or print name and title			
	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4		EIN	Phone no

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

### **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	= 343
Teacher assistants	= 7
Retirees	= 332
Unpaid leave	= 2
Substitutes	= 30
=====	
total members	= 714
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

**Part II: Statement of Functional Expenses**

Line 10 – Grants and Allocations

**NTUT Scholarship Winners 2010**

NAME	ADDRESS	AWARD LEVEL	AMOUNT
Bethany Buetel	6183 Baer Rd Sanborn , NY 14132	high school	500 00
Abbigal Doyle	384 Stenzil S t N T NY 14120	high school	500 00
Alexander Lamparelli	80 Crown Royal Dr Williamsville, NY 14221	high school	500 00
Thomas Ray	1733 Cudaback Ave Niagara Falls, NY 14303	high school	500 00
Samantha Bentz	1076 Pioneer Dr N T , NY 14120	elem school (savings bond)	25 00
Robert Casal	257 Tremont St N T , NY 14120	elem school (savings bond)	25 00
Marie Cuccia	390 Homestead Dr N T , NY 14120	elem school (savings bond)	25 00
Rachel Krawczyk	215 S Meadow Dr N T , NY 14120	elem school (savings bond)	25 00
Michael Russell	505 Prospect Ave N T , NY 14120	elem school (savings bond)	25 00
Gretchen Ringler	235 Di Matteo Dr N. T , NY 14120	mid school (savings bond)	50 00
Dakota Witkopt	488 Meadow N T , NY 14120	mid school (savings bond)	50 00
Katherine Zgolak	208 Belmont Ct West N T , NY 14120	mid school (savings bond)	50 00
Mariya Baranov	211 Clair Ave N T NY 14120	high school (check)	50 00
TOTAL SCHOLARSHIP EXP			===== \$2,325 00

**Charitable Donations**

DATE	ORGANIZATION	EVENT	AMOUNT
11/13/09	Parkinson's Association	In memory of EV father	250 00

6/14/2010	NTHS Senior Class	Prom breakfast	200 00
	<b>Line 22 – Grants and Allocations</b>	<b>TOTAL</b>	<b>2,575.00</b>

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

10/30/09	17,411 63
11/19/09	17,411 63
12/16/09	17,213 63
1/15/10	17,337 38
2/19/10	17,584 88
3/8/10	17,188 88
4/6/10	17,485 88
5/14/10	17,386 88
6/25/10	34,699 51
<b>TOTAL DUES</b>	<b>173,720 30</b>



NTUT OFFICER PAY: 7/1/09 to 6/30/10

TITLE NAME	Gross pay	Net pay
PRESIDENT L Roach	10,306	8400
TREASURER T Lamparelli	4,552	3929
HIGH SCHOOL VICE PRESIDENT A Lentsch	2,636	2351
MIDDLE SCHOOL VICE PRESIDENT L Czora	2,636	2435
ELEMENTARY VICE PRESIDENT P Coia	2,636	1991
ELEMENTARY DELEGATE – A J Moskalik	1,678	1546
ELEMENTARY DELEGATE – B P Mahady	1,678	1420
MIDDLE SCHOOL DELEGATE S Evarts	1,678	1531
HIGH SCHOOL DELEGATE G Lachut	1,678	873
REC SECRETARY C Traina	1,294	1170
GRIEVENCE CHAIR S O'Reilly	1,872	1588
NEW TEACHER CHAIRPERSON M Chido	1,123	480
SICK BANK CHAIRPERSON T Lamparelli	1,123	1020
JOURNAL EDITOR J Aguiaro	1,123	1014
BENEFIT TRUST CHAIRPERSON G Lachut	1,123	1041
BENEFIT TRUST TREASURER T Brosius	374	350
NEGOTIATION TEAM MEMBER L Roach	3,123	2546
NEGOTIATION TEAM MEMBER J Leon	3,123	2546
NEGOTIATION TEAM MEMBER G Lachut	3,123	2546
NEGOTIATION TEAM MEMBER P Coia	3,123	2546
NEGOTIATION TEAM MEMBER J Moskalik	3,123	2546
NEGOTIATION TEAM MEMBER M Watson	3,123	2546
Office Secretary J Wachowicz	30,446	25,087
Total	86,694	71,502