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Form 990-EZ

## Short Form Return of Organization Exempt From Income Tax

2009

OMB No 1545-1150

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 \$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

Open to Public Inspection

Department of the Treasury Internal Revenue Service  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						tion					
A For the 2009 calenda			ar year,		July 1		and ending		une 30		20 10
B Check if applicable		Please	C Name of organization			· -	D Empl	oyer iden	tufication nur	nber	
Address change			use IRS label or	South Share Vocational Tech Teachers Association - Local 1896					91-2132764		
Name change			print or					E Telep	hone num	ber	
Instal return			type See	476 Webster Street				l	781-878-8822		
Terminated Amended return			Specific	City or town, state or country	, and ZIP + 4	<u> </u>		F Grou	ıp Exem	ntion	
=	Application		Instruc- tions.	Hanover, MA 02339				I	imber ▶		
=-		<del></del>	organi:	zations and 4947(a)(1) non	evemnt charitable tr	usts must attach	G Acco	<b>-</b>		☑ Cash ☐	Accrual
	- 3600	1011 30 1 (0)(0)		mpleted Schedule A (Form		asis mast attach		(specify)		Ousin	7 7 1001 0101
						an ration is	not				
							If the organization is <b>not</b> attach Schedule B (Form 990,				
			check o	nly one) — ✓ 501(c) (	) <b>◀</b> (insert no )	947(a)(1) or 5		EZ, or 990		cadic b (i oi	111 550,
_	heck >			zation is not a section 509(a	· ·	· · · · · —		-		25 0	00 4
			•	turn is not required, but if t		-	•	•			00. A
				e 9 to determine gross receip						11	37,777
_	art !			penses, and Changes					ctions t	for Part I \	
	_						es (occ inc	, 11130140		Or rait i.)	
	1		-	ts, grants, and similar ar					1		24 205
	2			revenue including govern				٠ . ا	2		31,305
	3		•	s and assessments				.	3	<del> </del>	6,472
	4	Investmen				<i></i>			4		
	5a			m sale of assets other the	•	<u>5a</u>					
	b			er basis and sales expen			<u> </u>				
Ф	С								5c		
Ž	6			tivities (complete applicable pa			ling, check here	▶□			
Revenue	а	Gross reve	enue (n	ot including \$	of cont	ributions	1				
æ		reported o	n line 1	)		<u>6a</u>					
	b	Less direc	t expe	nses other than fundrais	ing expenses .	<u>6b</u>					
	C	7a Gross sales of inventory, less returns and allowances							6c		
	7a										
	b	Less: cost	of goo	ds sold		<u>7b</u>					
	С	Gross prof	it or (lo	ess) from sales of invento	ory (Subtract line 7b	from line 7a) .			7c		_
	8	Other reve	nue (de	escribe -				) [	8		
	9	Total reve	nue. A	dd lines 1, 2, 3, 4, 5c, 6d	c, 7c, and 8	<u> </u>		▶	9		37,777
	10	Grants and	d sımila	r amounts paid (attach s	schedule)				10		4,535
	11	Benefits pa	aid to c	or for members				[	11		
Se	12	Salaries, o	ther co	empensation, and emplo	yee benefits 👍 . 💝	· Mickelly	길) [이토		12		1,813
xpenses	13	Profession	al fees	and other payments to	independent contra	ctors	Ser.	!	13		1,375
ğ	14			utilities, and maintenand	1 1/	 	181		14		<del></del>
ũ	15			ions, postage, and shipp	U II	. APR .0 .8.			15		
	16			describe > See attache	· · · · · · · · · · · · · · · · · · ·	MIN U.U.	2011	,	16		32,170
	17		-	Add lines 10 through 16		· OODEN.	0.157		17		39,893
-un	18			) for the year (Subtract li			, 🔾 🔭		18		(2,116)
Net Assets	19			nd balances at beginnin				e with			
		end-of-yea	ar figur	e reported on prior year'.	s return)				19		29,685
et.	20			net assets or fund balar	•				20		
—ž-	21			d balances at end of yea					21		27,569
Р	art II						more file Fo	rm 990		of Form 9	
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 (See the instructions for Part II.)  (A) Beginning of year (B) End of											
22	) <u>(</u>	ieh eavinge	and in	•			(~, be	<u> </u>	<del></del>		
22 Cash, savings, and investments						24,775					
	23 Land and buildings										
24 Other assets (describe ► Computer Equipment ) 2,794 24					2,794						
						27,569					
26 Total liabilities (describe > 26											
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)						27,569					

Part	Other Information (Note the statement requirements in the instructions for Part V.)			
			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	33		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
a	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?	35a		<b>√</b>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		1
36	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	36		✓
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?	37b		<b>✓</b>
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		. 🗸
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶		. :	
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	40b		- ·
С	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			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization	s	, -	
е	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	40e		
41	List the states with which a copy of this return is filed. ▶ Massachusetts			
42a	The organization's books are in care of ▶ Vincent Barba Telephone no. ▶	781-87	8-8822	2
	Located at ► South Shore Voc Tech High School, 476 Webster St, Hanover, MA ZIP + 4 ►	023	339	
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		Yes	No
	account)?	42b		✓
	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.			
_	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		
·	If "Yes," enter the name of the foreign country:	420	i .	<b>V</b>
43	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		. '	
			Yes	NI-
44	Did the organization_maintain_any_donor_advised-funds?-If-"Yes,"-Form-990_must_be completed instead of	_	res	No
_ <del>``</del>	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.	44		<b>✓</b>
		45	L	

Part \	Section 501(c)(3) 501(c)(3) organizat and complete the	organizations and stions and section 494 tables for lines 50 and	section 4947(a)(1) none 17(a)(1) nonexempt char d 51.	exempt charit itable trusts m	able trusts only. Ansternation answer question	All section ons 46–49b			
			political campaign activities			Yes No			
	candidates for public office? If "Yes," complete Schedule C, Part I								
	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II								
	•			•		48 49a			
	employees) who each rec	eived more than \$100,0	<u> </u>			· · · · · · · · · · · · · · · · · · ·			
	(a) Name and address of each employee paid more hours per week than \$100,000 (b) Title and average hours per week devoted to position		(c) Compensati	on (d) Contributions to employee benefit plans deferred compensation					
			•						
	•••••					1			
			· · · · · · · · · · · · · · · · · · ·	ļ. <u> </u>		+			
						+			
		••••							
	Total number of other em								
			nighest compensated indention. If there is none, enter "N		actors who each red	ceived more than			
	(a) Name and address of	each independent contractor	paid more than \$100,000	(b)	Type of service	(c) Compensation			
	•								
			·			<del></del>			
	<del></del>								
	Total number of other ind	enendent contractors of	each receiving over \$100,0	00					
•	Total Humber of Ottler ind	ependent contractors e	acii receiving over \$100,0			<del></del>			
	Under penalties of perjury and belief, it is true, corre	r, I declare that I have examine	ed this return, including accompar of preparer (other than officer) is	nying schedules and based on all informa	statements, and to the be	est of my knowledge any knowledge			
Sign	1/22/11								
Here Signature of officer Da					Date				
	VINCENT BARBA - TREASURER								
	Type or print name a								
Paid	Preparer's	and A.	Date -	Check if self-	Preparer's identifying nu	imber (See instructions)			
Prepare	er's signature	W 01-+101	2/1/	employed ▶	P006	27494			
Use On	yours if self-employed),				EIN ►				
May +b	address, and ZIP + 4	18 Alden Court, Plymouth, MA 02360 P with the preparer shown above? See instructions							
iviay in	ie ino discuss this return (	with the preparer snowi	above? See instructions	<u> </u>		✓ Yes			

## South Shore Vocational Technical Teachers Association – Local 1896 Attachment to Form 990-EZ – Part I Line 16 - Other Expenses July 1, 2009 through June 30, 2010

AFT Union Dues	\$ 31, 305
Bank Fees	100
Meals & Lodging	681
Postage	84
Total Other Expenses	\$ 32,170