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# 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, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$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

2010

**Open to Public** Inspection

Α	For the	2010 calendar year, or tax year beginning $\mathcal{J}ULY$ 1, $\mathcal{Q}OIO$ , 2010, and ending $\mathcal{J}$	UNE	<i>30</i> , 20 //
В	Check if ap		nployer id	entification number
	Address c	hange AMERICAN FED. OF TEACHERS LOCAL 3579	23-	- 2000 502
Ļ	Name cha		lephone n	umber
닏	Initial retui	$\mathbf{I}$		
⊨	Terminate Amended	Crop or town, state or country, and ZIP + 4	roup Exe	mption
┢	Applicatio		umber 🕨	•
G	Account	ing Method: X Cash	< <b>▶</b> 🔯 ı	f the organization is not
ı	Websit		ach Schedule B	
J	Tax-exen	npt status (check only one) — 🗶 501(c)(3) 🔲 501(c) ( ) ◀ (insert no ) 🗌 4947(a)(1) or 🔲 527 (Form	990, 990	)-EZ, or 990-PF)
ĸ	Check ▶		lv <b>not</b> mo	ore than \$50,000. A
	Form 99	00-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions)		
	to file a	return, be sure to file a complete return		_
Г	Add lines	5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part	6,	
lın	ne 25, col	umn (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	► s	65712.
_	Part I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instr	uctions	
		Check if the organization used Schedule O to respond to any question in this Part I		<sup>′</sup> 🕱 ·
_	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	188
	3	Membership dues and assessments	3	104015
	4	Investment income	4	1.519
	5a	Gross amount from sale of assets other than inventory   5a		<del>,</del>
	Ь	Less: cost or other basis and sales expenses		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events	557	
	a	Gross income from gaming (attach Schedule G if greater than		
9	<u>₿</u>	\$15,000)	100	
o noxod	Б   Ь	Gross income from fundraising events (not including \$ of contributions		
á	<u> </u>	from fundraising events reported on line 1) (attach Schedule G if the		
	_	sum of such gross income and contributions exceeds \$15,000)   6b		
	С	Less: direct expenses from gaming and fundraising events 6c		
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract		
		line 6c)	6d	
	7a	Gross sales of inventory, less returns and allowances		
	b	Less: cost of goods sold		
	С	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe in Schedule O)	8	65712
:	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	
-	10		10	····
	11	Benefits paid to or for members	11	150
- 9	12 13 14 15	Salaries, other compensation, and employee benefits	12	
	2 13	Professional fees and other payments to independent confragrors	13	14336
Š	14	Occupancy, rent, utilities, and maintenance	14	2849
- ú	1	Printing, publications, postage, and shipping	15	44
	16	Other expenses (describe in Schedule O)	16	43408
<u> </u>	17	Total expenses. Add lines 10 through 16	17	60787
<u> </u>	2 18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	4925
1.7.5 M. V.	§   19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with		67.11
ک کے	<b>.</b>	end-of-year figure reported on prior year's return)	19	97156
Wot Accote	<u>5</u> 20	Other changes in net assets or fund balances (explain in Schedule O)	20	4282
_	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	104363 Form <b>990-EZ</b> (2010)
F	or Paper	work Reduction Act Notice, see the separate instructions. Cat No 10642		rom 33U-EL (2010)

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 10642I

Form 9	990-EZ (2010) AMERICAN FED OF	EACHERS LOC	AL 3579	d3-	2000512 Page 2
Pai	t II Balance Sheets. (see the instructions	for Part II.)		<del> </del>	
	Check if the organization used Schedule	O to respond to any qu			(B) End of year
22	Cash, savings, and investments			eginning of year 77/56 22	(B) End of year
23	Land and buildings			23	109 363
24	Other assets (describe in Schedule O)			24	
25	Total assets			77156 25	104363
26	Total liabilities (describe in Schedule O)			() 26	0
27	Net assets or fund balances (line 27 of column			97156 27	184363
Par	t III Statement of Program Service Accom Check if the organization used Schedule	plishments (see the inst	tructions for Part I		Expenses
1A/ba	t is the organization's primary exempt purpose?	SCHEDULE O	estion in this Part	111 · . <b>X</b> (R <sub>4</sub> 50	equired for section 1(c)(3) and 501(c)(4)
Desc	ribe what was achieved in carrying out the organization		ear and concise man		ganizations and section 47(a)(1) trusts; optional
	ervices provided, the number of persons benefited, and			1 70	others)
28	TO ORGANIZE WORKERS	10 SECURE IMP	ROVED WAGE		<del></del>
	BENEFITS AND WORKING CO	NOTTIONS THROUG	A COLLECTI		
	BARGAINING				1
	(Grants \$ ) If this amount	includes foreign grants, o	heck here	. ▶ □ 28	a
29					
	(Grants \$ ) If this amount	includes foreign grants, o	heck here	. ▶ □ 29	la l
30		morados foreign granta, e	<del></del>		
					:
	•				
		includes foreign grants, o			<u>a</u>
31	Other program services (describe in Schedule O)				
32	(Grants \$ ) If this amount Total program service expenses (add lines 28a	includes foreign grants, o	neck nere	. ► □ 31 ► 3	
_	t IV List of Officers, Directors, Trustees, and Ke				
	Check if the organization used Schedule	O to respond to any qu	estion in this Part	IV	🗀
	(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expense
		devoted to position	enter -0)	deferred compensation	
	PARIO ACERRA	PRESIDENT 5.00		O	0
_	Im May CHAN	VICE PRESIDENT	<u> </u>	<del> </del>	$+$ $\overline{}$
4-	Im Moc CHARY	5.00		0	0
5	HARON GAVIN-LEVY	SECRETARY	<b>+</b> •		
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	HARIES ACHENBACH	TREASURER 5.0			0
		5.0	0	0	
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Form	990-E7	(2010)

AMERICAN FEDERATION OF TEACHER LOCAL 3519 93-2000502 Page 3

23-2000	502	
	Page	

	• •								<u> </u>			• • • •
Part V	Other	Infor	matio	n (Note	e the	statement	t require	ments	in the	instruction	ns for Pa	rt V.)
						Schedule						

			Yes No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34	X
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, explain in Schedule O why the organization did not report the income on Form 990-T.		
а	Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a	X
ь 36	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year (see instructions)?	35b 36	NAX
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶  37a  O	30	
b	Did the organization file Form 1120-POL for this year?	37b	X
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 tax year 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:		
a b	Initiation fees and capital contributions included on line 9	-37	-
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	28	
	section 4911 ► N/A ; section 4912 ► N/A ; section 4955 ► N/A		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit		, in the
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	NA
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on		1
	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	, s,	
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization	-	
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	X
41	List the states with which a copy of this return is filed. > None		1 :
42a	The organization's books are in care of ► HUITA DICKSOU Telephone no. ► 616.		
h	Located at ► 3,635 (REN) PONO KOAO BETH LETTEM PA 180 20 ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority	180	d0
-	over a financial account in a foreign country (such as a bank account, securities account, or other financial	1	Yes No
	account)?	42b	X
	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	<u> X</u>
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here	٠.,	J// -
	and enter the amount of tax-exempt interest received or accrued during the tax year		v/H
		1	Yes No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	X
С	Did the organization receive any payments for indoor tanning services during the year?	44c	X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an		
_	explanation in Schedule O	44d	NA

Form 99	0-EZ (2010)	AMERI	CAN F	ED 1	DF	TEACHER	c LOCAL	<u>.</u> 3	479	23-20050	r)	Page <b>4</b>	
45		ated organizati									Yes	<del></del>	
a	Did the or meaning Form 990	rganization rec of section 512 -EZ (see instru	eive any pa ?(b)(13)? If " ections)	yment fro Yes," Fo	om or orm 99 	engage in any 00 and Sched	transactio fule R may	n with need	a controlled to be comp	entity within the pleted instead of	45a /	X	
46	Did the or to candid	rganization end lates for public	gage, direct office? If "	y or ındi Yes," co	rectly, mplete	in political ca Schedule C,	mpaign act Part I	tivities	on behalf of	or in opposition	46	×	
Part '	501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.  Check if the organization used Schedule O to respond to any question in this Part VI												
47 48 49a b 50	Is the orga Did the or If "Yes," v Complete	rganization enganization a sch ganization ma ganization ma vas the related this table for the s) who each re	ool as descr ke any trans l organization the organiza	ibed in sefers to a in a secti	ection in exer ion 52' ve high	170(b)(1)(A)(ii) mpt non-char 7 organization nest compens 10 of compens	? If "Yes," o itable relate o? ated emplo sation from	omple d orga  oyees ( the or	ete Schedule anization? .  (other than organization. It	fficers, directors, f	47 48 49a 49b trustees atter "None.	nd key	
	(a) Name ar	nd address of each than \$100,0		d more		(b) Title and hours per devoted to	week	(c) (	Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expe account other allow	and	
	/	U/A									-		
									-				
f 51	Complete \$100,000	aber of other enter this table for of compensations and address of the compensations are also address of the com	the organiz	ation's f	live hiç zation.	thest comper If there is nor	nsated inde ne, enter "N	epende lone."		ors who each rece	eived mor		
		N/	4										
d 52	Did the or	ber of other in ganization cor ot charitable tr	nplete Sche	dule A?	Note:	All section 50	1(c)(3) orga			7(a)(1) · · · · ► □	Yes 🗆	O No	
Under potrue, cor	enalties of per rect, and com	rjury, I declare that	I have examine of preparer (otl	ed this retuner than of	rn, inclu ficer) is t	ding accompanyi based on all infor	ng schedules a	and stat	ements, and to t	the best of my knowled wledge		ef, it is	
Sign Here	) -	Signature of office	DICKS	Ban W	TR	EASURBL				10/19/1/ Date			
Paid Prepa	Print	/Type preparer's n		F	Preparer	's signature			Date	Self-employed	PTIN		
Use (	Firm	's name ▶					<del></del>			irm's EIN ▶			
May th	e IHS disc	uss this return	with the pro	eparer st	nown a	bove? See in	structions	· ·		<u></u> . <b>&gt;</b> [	Yes 🗌	No	

#### **SCHEDULE C** (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047 2010

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

Department of the Treasury Internal Revenue Service If the organization answered "Yes," to 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," to 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.

		," to Form 990, Part IV, line 5 (Proxy	Tax) or Form 990-E	Z, Part V, li	ne 35a (Proxy T	ax), then	
	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III					
Nam	e of organization  MERKAN	FED OF TEXHER	s LOCAL	3579	1 ·	ntification number	
Pai	rt I-A Complete if the	e organization is exempt und	er section 501(	c) or is a			
1	Provide a description of	the organization's direct and indire	ct political campa	ign activitie	es in Part IV.		
2	Political expenditures .				▶ \$		0
3	Volunteer hours						
Pai	t I-B Complete if the	e organization is exempt und	er section 501(	c)(3).			
_1_	Enter the amount of any	excise tax incurred by the organiza	tion under sectio	n 4955 .	▶ \$		
2	Enter the amount of any	excise tax incurred by organization	managers under	section 49	55 ▶ \$		
3	If the organization incurre	ed a section 4955 tax, did it file For	m 4720 for this ye	ear?	:	· · Yes	No
48	Was a correction made?					∏Yes 「	■ No
t	If "Yes," describe in Part	IV.					_
Par	rt I-C Complete if the	e organization is exempt und	er section 501(	c), except	section 501	(c)(3).	
1	Enter the amount directly	expended by the filing organization	ation for section	527 exem	pt function		
					▶ \$		٥
2	Enter the amount of the t 527 exempt function activi	filing organization's funds contributies	_	anizations	for section	•	Ò
3	•	penditures. Add lines 1 and 2.	Enter here and	on Form	1120-POI		· <b></b> -
					•		
4		file Form 1120-POL for this year?			•	Yes	No
5	Enter the names, addresse organization made paymer the amount of political cor	es and employer identification num nts. For each organization listed, e ntributions received that were prom	nter the amount popular in the property and directly	aid from the	ne filing organizo a separate p	zations to which the zation's funds. Also olitical organization	e filing enter , such
	as a separate segregated	fund or a political action committee	(PAC). If addition	al space is	needed, provid	de information in Pa	irt IV.
	(a) Name	(b) Address	(c) EIN	filing o	unt paid from rganization's none, enter -0-	(e) Amount of politic contributions received promptly and direct delivered to a sepan political organization, enter -0-	d and tly rate
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							

	Λ		1	1 -	ົ້ .	04./17								
Sched	tule C (Form 990 or 990-EZ) 2010 HMERC	AN FED O	IF IEALHERS	Loch 3	K19 d3	-2005 Rage 2								
Par		on is exempt	under section 50	1(c)(3) and file	d Form 5768 (ele	ection under								
	section 501(h)).													
	Check ▶ ☐ if the filing organization belongs to an affiliated group.													
B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.  Limits on Lobbying Expenditures (a) Filing (b) Affiliated														
	Limits on Lot (The term "expenditures" I	(a) Filing organization's totals	(b) Affiliated group totals											
18				3, cop 10.000										
ŀ		•												
		-		•										
Č		•												
	e Total exempt purpose expenditures (add lines 1c and 1d)													
columns.														
	If the amount on line 1e, column (a) or (b)	is:		<i>i</i> -										
	Not over \$500,000	20% of the a	mount on line 1e											
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	is 15% of the excess of	over \$500,000.		*								
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	is 10% of the excess of	over \$1,000,000										
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plu	is 5% of the excess ov		,									
	Over \$17,000,000	\$1,000,000.	<del></del>	<u></u>										
9	•													
h Subtract line 1g from line 1a. If zero or less, enter -0														
i	Subtract line 1f from line 1c. If zero or		- <del></del>											
j		_	•	•		☐ Yes ☐ No								
	reporting section 4911 tax for this yea	rr	<del> </del>	· · · · · ·										
	(Some organizations that n	nade a section	Period Under Sec 501(h) election do uctions for lines 2a	not have to com		e								
	Lobbyir	ng Expenditure	s During 4-Year Av	eraging Period										
	Calendar year (or fiscal year	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) Total								
	beginning in)	. ,		•••		• • • •								
2	Lobbying nontaxable amount													
ł	Lobbying ceiling amount (150% of line 2a, column (e))		***	s de di	(3 ; 3g) an									
	: Total lobbying expenditures													
•	Grassroots nontaxable amount		•											
	Grassroots ceiling amount (150% of line 2d, column (e))													
4	Grassroots lobbying expenditures		ļ .											

Schedule C (Form 990 or 990-EZ) 2010

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Forn	1 5768		
		(	a)		(b)	_
		Yes	No	Aı	nount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local	3.4	1,1035	7,		
	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)?	<u> </u>				_
C	Media advertisements?					_
d	Mailings to members, legislators, or the public?					
e f	Publications, or published or broadcast statements?		_			
g	Grants to other organizations for lobbying purposes?	<u> </u>				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				<del></del> .	_
i	Other activities? If "Yes," describe in Part IV			-	<del></del>	_
i	Total. Add lines 1c through 1i	, ,	1 /4 7		-	_
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		-362°	1 m	· · · · · · · · · · · · · · · · · · ·	_
b	If "Yes," enter the amount of any tax incurred under section 4912	مايوس في ۾ ان		Sale and Se		_
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .	- W.			_	-
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		221 100 200 200		·····	
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	)(5), (	or se	ction		
					Yes No	<del>_</del>
1	Were substantially all (90% or more) dues received nondeductible by members?			1	X	_
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	X	_
3	Did the organization agree to carryover lobbying and political expenditures from the prior year? .			3	X	7
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, li "Yes."	)(5), ( ine 3	or se is ar	ction swere	ed	
1	Dues, assessments and similar amounts from members		1			_
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				_
а	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	1			
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby					
_	and political expenditure next year?	•	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	-	5			
Part						_
compl	lete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; lete this part for any additional information.	and P	art II-	B, line	II. Also,	
	f = f = f = f = f					
!.!.	,					
	NONE					
	·	•••••				
		•••••		·		

#### SCHEDULE O (Form 990 or 990-EZ)

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.

20**10** 

90-EZ or to provide any additional information.

Open to Public

Inspection

Name of the organization Employer identification number LOCAL 3579 23-2000 502 990-EZFORM-10 BENEFITS AND