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Email response from H. Vichey attached

1106

OMB No 1545-1150

2010

Open to Public Inspection

Form 990-EZ

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

Department of the Treasury
Internal Revenue Service

A For the 2010 calendar year, or tax year beginning **JULY 1**, 2010, and ending **JUNE 30**, 20 **11**

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

C Name of organization
AMERICAN FEDERATION OF TEACHERS 2882 N. TONAWANDA UNITED TCHRS

Number and street (or P O box, if mail is not delivered to street address) Room/suite
35 Grant Street

City or town, state or country, and ZIP + 4
NORTH TONAWANDA, NY 14120-3061

D Employer identification number
23058435 7058435

E Telephone number
716-694-5235

F Group Exemption Number
0787

G Accounting Method: ☒ Cash ☐ Accrual Other (specify) ►

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

I Website: ►

J Tax-exempt status (check only one) — ☒ 501(c)(3) ☒ 501(c)(5) (insert no) ☐ 4947(a)(1) or ☐ 527

K Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L 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 II, line 25, column (B) below) are \$500,000 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.)

Check if the organization used Schedule O to respond to any question in this Part I ☐

1	Contributions, gifts, grants, and similar amounts received	1	
2	Program service revenue including government fees and contracts	2	
3	Membership dues and assessments	3	101852
4	Investment income	4	
5a	Gross amount from sale of assets other than inventory	5a	
b	Less: cost or other basis and sales expenses	5b	
c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
6	Gaming and fundraising events		
a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
c	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	7a	
b	Less: cost of goods sold	7b	
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
8	Other revenue (describe in Schedule O)	8	14510
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	116362
10	Grants and similar amounts paid (list in Schedule O)	10	2475
11	Benefits paid to or for members	11	
12	Salaries, other compensation, and employee benefits	12	57445
13	Professional fees and other payments to independent contractors	13	
14	Occupancy, rent, utilities, and maintenance	14	7536
15	Printing, publications, postage, and shipping	15	220
16	Other expenses (describe in Schedule O)	16	31608
17	Total expenses. Add lines 10 through 16	17	99284
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	17078
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	11674
20	Other changes in net assets or fund balances (explain in Schedule O)	20	
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	28752

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form 990-EZ (2010)

SEP 21 2012

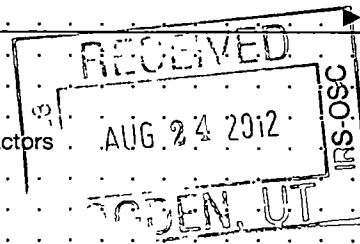
SCANNED OCT 22 2012

Revenue

#002

AUG 27 2012

RECEIVED ENTITY DEPT



Part II Balance Sheets. (see the instructions for Part II.)

Check if the organization used Schedule O to respond to any question in this Part II ☐

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	11674	22752
23 Land and buildings		/
24 Other assets (describe in Schedule O)	24	
25 Total assets	25	
26 Total liabilities (describe in Schedule O)	26	
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	11674	22752

Part III	Statement of Program Service Accomplishments (see the instructions for Part III)	
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Check if the organization used Schedule O to respond to any question in this Part III ☒

Expenses

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

What is the organization's primary exempt purpose? **TEACHERS' UNION**

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, and other relevant information for each program title.

28	the NTUT serves 358 active members, 37 substitutes and 337 retirees. Our purpose is to secure the conditions necessary to allow the greatest efficiency of teachers and schools. The Union shall affiliate with the New York State United Teachers and the American Federation of Teachers.		
	(Grants \$) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	28a	
29	PUBLICATIONS ISSUED, NTUT JOURNAL, DISTRIBUTED 5 TIMES ANNUALLY		
	(Grants \$) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	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 . . . ► <input type="checkbox"/>	30a	
31	Other program services (describe in Schedule O)		
	(Grants \$) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	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)

Check if the organization used Schedule O to respond to any question in this Part IV ☐

[illegible]

Part V**Other Information** (Note the statement requirements in the instructions for Part V.)Check if the organization used Schedule O to respond to any question in this Part V. ☐

	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		✓
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)		✓
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, explain in Schedule O 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 a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to 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 (see instructions)?		✓
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		✓
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 outstanding at the end of the tax year 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 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit 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		✓
c 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 ▶		
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 organization's books are in care of ▶ Telephone no. ▶		
Located at ▶ ZIP + 4 ▶		
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		
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
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		✓
c Did the organization receive any payments for indoor tanning services during the year?		✓
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		✓

- | | | Yes | No |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----|----|
| 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? | 45 | | ✓ |
| a 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions). | 45a | | ✓ |
| 46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I. | 46 | | ✓ |

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 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 ☐

- | | | Yes | No |
|-----------------------------------------------------------------------------------------------------------------|------------|-----|----|
| 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II. | 47 | | ✓ |
| 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. | 48 | | ✓ |
| 49a Did the organization make any transfers to an exempt non-charitable related organization? | 49a | | ✓ |
| b If "Yes," was the related organization a section 527 organization? | 49b | | ✓ |
- 50** 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 ▶

- 52** Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A ▶ ☐ Yes ☒ No

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	<div style="border-bottom: 1px solid black; padding-bottom: 5px;"> </div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;"> <div style="display: flex; justify-content: space-between;"> Signature of officer Date <u>8/23/2011</u> </div> </div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;"> <div style="display: flex; justify-content: space-between;"> Type or print name and title Teresa Lamparelli, Treasurer </div> </div>	
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Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no ▶			

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

Department of the Treasury
Internal Revenue Service

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.**

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

AMERICAN FEDERATION OF TEACHERS NORTH TONAWANDA UNITED TEACHERS

Employer Identification number

23 758435

LINE 8: OTHER REVENUE: Deposits from NTUT Benefit Trust to compensate their secretary, AFT-CIO, and NYSUT Member Benefits for advertising their programs in our newsletter

LINE 10: GRANTS AND ALLOCATIONS- Scholarship checks for \$400 each: 1. Sara Fretthold, 65 Riverview Ave, NT,NY 14120,
2. Samantha Harack, 807 Ohio St, NTNY, 14120, 3. Jenna Marcantonio, 1057 Remington Dr, NT, NY 14120, 4 Andrea Parish, 613 Woodbury Dr
NT, NY 14120, \$25 Savings bonds for elementary scholarship recipients in NT. 1. Irene Johnson, 1369 Abington Place, 2. Kaylee Omahen
97 Dale Dr, 3. Alexandra Scalzo, 147 Jackson Ave, 4. Alana Scherer, 539 Meadowbrook Dr., 5. Autumn Steele, 307 Elmwood Ave,
\$50 Savings Bonds for Middle School: 1. Carly McClinsey, 1443 Doebler Dr., 2. Megan Pellegrino, 40 Homestead Dr, 3. Steven Sass,
1702 Eddy Dr

Charitable donation to the NTHS Senior Class: \$200 for the pre-prom breakfast

TOTAL FOR LINE 10: \$2,475.00

LINE 16: OTHER EXPENSES: Expenses related to the NYSUT convention, NYSUT conferences, rented office equipment, office supplies, payroll charges, taxes, telephone and mileage reimbursement

Name of the organization

Employer identification number

PART IV: LIST OF OFFICERS AND KEY EMPLOYEES**23 758435****NTUT OFFICER PAY 7/1/10 to 6/30/11**

TITLE	NAME	Gross pay	Net pay
PRESIDENT			
L Roach	7/1/10 – 12/31/10	5159 10	4,464 52
G Lachut	1/1/11 – 6/30/11	5159 10	4,078 18
TREASURER			
T Lamparelli		4572 14	3,791 37
HIGH SCHOOL VICE PRESIDENT			
A Lentsch	7/1/10 – 12/31/10	1328 40	960 76
R Lucas	1/1/11 – 6/30/11	1328 40	1,253 35
MIDDLE SCHOOL VICE PRESIDENT			
L Czora	7/1/10 – 12/31/10	1328 40	1,053 96
B Zimmerman	1/1/11 – 6/30/11	1328 40	1,135 46
ELEMENTARY VICE PRESIDENT			
P Coia		2656 79	2,011 89
ELEMENTARY DELEGATE – A			
J Moskalik		1699 12	1,471 49
ELEMENTARY DELEGATE – B	P Mahady		
		1699 12	1,418 59
MIDDLE SCHOOL DELEGATE			
S Evarts	7/1/10 – 12/31/10	849 56	686 87
D Bonk	1/1/11 – 6/30/11	849 56	801 56
HIGH SCHOOL DELEGATE			
G Lachut	7/1/10 – 12/31/10	849 56	698 12
R Gauld	1/1/11 – 6/30/11	849 56	795 83
REC SECRETARY			
C Traina	7/1/10 – 12/31/10	658 03	
J Hennessy	1/1/11 – 6/30/11	658 03	619 45
GRIEVENCE CHAIR			
S O'Reilly		1893 43	1,564 61
NEW TEACHER CHAIRPERSON			
M Logan		1136 06	877 79
SICK BANK CHAIRPERSON			
T Lamparelli		1136 06	1,006 96
JOURNAL EDITOR			
J Aguliaro		1136 06	995 24
BENEFIT TRUST CHAIRPERSON			
G Lachut		1136 06	1,028 62
BENEFIT TRUST TREASURER	T Brosius		
7/1/10 – 12/31/10		374 30	172 84
D McClary	1/1/11 – 6/30/11	383 07	176 88
Office Secretary			
J Wachowicz		31,358 95	25,829 96
Total		69,527 26	57,445 15