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Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2015

Open to Public Inspection

A F	or th	e 2015		ginning 01-01-2015 , and ending 1	2-31-20	L5			
		applicable	e C Name of organization CATSKILL TEACHERS ASSOCIA	TION			D Emplo	yer id	lentification number
		change	% THOMAS QUINN				14-1	7425	71
	me ch		Doing business as						
	tıal ret	turn	Number and street (or D.O. be	ox if mail is not delivered to street address)	l Doom/su	uto	E Teleph	one nu	ımber
Fir	nal :urn/te	ermınated		ox ii maii is not delivered to street address)	Koom/su	iite	(518)	943	-2345
_ An	nended	d return	City or town, state or province	e, country, and ZIP or foreign postal code	<u> </u>				
_ <sub>Ар</sub>	plication	on pendın	CATSKILL, NY 12414				<b>G</b> Gross	receipt	s \$ 130,228
			<b>F</b> Name and address o	of principal officer		H(2) I			fo
			THOMAS QUINN	n principal cineer			s this a group ubordinates?		Mes <b>V</b> No
			347 W MAIN STREET CATSKILL, NY 12401			H(b) A	re all subord	ınates	
			CATSRILL, WI 12401				ncluded? f "No " attack	ما د	t (coounctructions)
I Ta	ax-exe	empt statu	us	5) ◀ (Insert no )	527				t (see instructions) umber ► 0787
J W	ebsit	te:► N	I/A				Stoup exemp	.1011 11	umber P 0787
<b>K</b> For	m of c	organizatio	on Corporation Trust 🗸 Asso	ociation Other 🕨		l Year	of formation		<b>M</b> State of legal domicile NY
	rt I		mmary	oddier F		<b>=</b> 1001	or roundation		11 State of legal dofficies 111
Governance				ssion or most significant activities DESERVING STUDENTS IN THE C	CATSKIL	L SCHOO	L DISTRICT		
iove.	2	Check	this box 🔰 if the organization	on discontinued its operations or dis	sposed c	of more tha	an 25% of its	net a	ssets
ూ ×ర	3	Numbe	r of voting members of the go	verning body (Part VI, line 1a) .				3	13
Activities &	4	Numbe	r of independent voting memb	pers of the governing body (Part VI,	, lıne 1b)			4	13
툳	5	Total n	umber of individuals employe	d ın calendar year 2015 (Part V, lır	ne 2a) .			5	16
<u>F</u>	6	Total n	umber of volunteers (estimate	eıfnecessary)				6	0
•	7a Total unrelated business revenue from Part VIII, column (C), line 12								0
	ь	Net unre	elated business taxable incon	ne from Form 990-T, line 34				7b	0
							Prior Year		Current Year
<b>a.</b>	8		• •	III, line 1h)			105,	.639	115,415
Revenue	9 Program service revenue (Part VIII, line 2						0	0	
376	10			olumn (A), lines 3, 4, and 7d) .				32	80
	11			n (A), lines 5, 6d, 8c, 9c, 10c, and 1			9,	,507	12,808
	12	Tota 12)	al revenue—add lines 8 throug	ıh 11 (must equal Part VIII, columı	n (A ), lin	e	115,	178	128,303
	13	Gran	nts and similar amounts paid	(Part IX, column (A), lines 1-3)			10,	905	9,600
	14	Ben	efits paid to or for members (F	Part IX, column (A), line 4)				0	0
88	15	Sala 5-1		ployee benefits (Part IX, column (A	A), lines		19,	.024	16,129
<u>\$</u>	16a	n Prof	<i>,</i> fessional fundraising fees (Pa	rt IX, column (A), line 11e)				0	0
Expenses	Ь	Total	fundraising expenses (Part IX, colur	mn (D), line 25) 🛌					
ш	17			(A), lines 11a-11d, 11f-24e) .			95,	.083	97,735
	18	Tota	al expenses Add lines 13-17	' (must equal Part IX, column (A), lı	ıne 25)		125,	012	123,464
	19	Rev	enue less expenses Subtract	line 18 from line 12			-9,	834	4,839
Net Assets or Fund Balances						Beginni	ing of Current	Year	End of Year
SS et	20	Tota	al assets (Part X, line 16) .				33,	484	38,323
A B	21							0	0
<u> Ž</u> Ž	22	Net	assets or fund balances Sub	tract line 21 from line 20	<u>.</u>		33,	484	38,323
Unde my k	nowle	nalties d edge an		e examined this return, including ac d complete Declaration of preparer					
		- I B	****				2016-05-10		
Sigi		<b>▼</b> Sig	gnature of officer				Date		
Her	е		HOMAS QUINN TREASURER trpe or print name and title						
			Print/Type preparer's name	Preparer's signature	1 -	)ate	ch. I	PTIN	
Do:	Ч		BRADLEY CUMMINGS	BRADLEY CUMMINGS		2016-05-10	Check If self-employed		32821
Pai Pro		·~ -	Firm's name  PATTISON KOSKI	EY HOWE & BUCCI CPA			Firm's EIN 🕨		
	par		Fırm's address ► 45 FIVE MILE WO	OODS ROAD			Phone no (518	3) 943-	-2345
US	Or	шу	CATSKILL NY 13	2414					

May the IRS discuss this return with the preparer shown above? (see instructions)

. ✓ Yes ☐ No

art IV	Checklist	of Red	nuired	Schedule:

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Νo
3	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	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part $II$	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19?  If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?  If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $V$	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a		No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?  If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νo
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20Ь		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νo
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization 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	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>			
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>			
		28a		Νo
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νo
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part $I$ .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, 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," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

	990 (2015)			Page <b>5</b>
Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			.г
	·		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1</b> c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule $O$	3b		
4a	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)?	4a		No
b	If "Yes," enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	5c 6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
7	were not tax deductible?	6b		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N.a
d	If "Yes," indicate the number of Forms 8282 filed during the year	,c		No
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u> </u>
		F	orm <b>99</b> 0	(2015)

	Part VI	Governance.	. Management,	and Disclosure
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	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year  13			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 13			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
h	more members of the governing body?	7a 7b	Y es Y es	
	or persons other than the governing body?	76	163	
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu		e.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12~	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
		12a 12b		No
b	Did the organization have a written conflict of interest policy? If "No," go to line 13			No
b c	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b		No
b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c		
ь с 13	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13		No
b 13 14 15	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13		No
b c 13 14 15 a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14		No No
b c 13 14 15 a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14		No No No
b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14		No No No
b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14 15a 15b		No No No
b c 13 14 15 a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	12b 12c 13 14 15a 15b		No No No
b c 13 14 15 a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b 12c 13 14 15a 15b		No No No
b c 13 14 15 a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b 12c 13 14 15a 15b		No No No

20 State the name, address, and telephone number of the person who possesses the organization's books and records ►THOMAS QUINN 347 W MAIN STREET CATSKILL, NY 12414 (518) 943-2345

Part VII

# Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

## Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- ♦ List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers and	than on is	one bot rect	not box h ar or/tr	checl c, unle n office ustee	ess er )	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
(1) SAMANTHA EISSING SECRETARY AS NEEDED	0 0	х		х				0	0	C
(2) NICOLE MACCALINE POLITICAL ACTION AS NEEDED	0 0	х						600	0	(
(3) ROBERT STINSON  PRESIDENT AS NEEDED	0 0	х		х				1,500	0	(
(4) MICHAEL TIBAULT BUILDING REP AS NEEDED	0 0	×						500	0	C
(5) THOMAS QUINN TREASURER AS NEEDED	0 0	х		х				1,000	0	(
(6) KRISTINA GIANGRECO BUILDING REP AS NEEDED	0 0	х						500	0	(
(7) SHERI WHITNEY BUILDING REP AS NEEDED	0 0	х						0	0	(
(8) RHONDA GUDATH BUILDING REP AS NEEDED	0 0	х						500	0	(
(9) MARY JO VERDICHIZZI BUILDING REP AS NEEDED	0 0	х						0	0	(
(10) ALISON COLEMAN BUILDING REP AS NEEDED	0 0	х						500	0	(
(11) LISA NOYES BUILDING REP AS NEEDED	0 0	х						500	0	C
(12) CHERIE DOTTINO	0 0	х		х				500	0	C
VICE PRESIDENT AS NEEDED (13) BRYAN SUTTON	0 0	X						500	0	(
BUILDING REP AS NEEDED	0 0									

t VII	Section A. Officers	Directors,	Trustees,	Kev Emr	olovees	, and Highest	Compensated I	mplovees	(continued
-------	---------------------	------------	-----------	---------	---------	---------------	---------------	----------	------------

	<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	more t	han o	one I both	oox, an d	heck unless officer stee)	3	(D) Reportable compensation from the organization (W-		(E) Reportable compensation from related organizations (W-	c	(F) Estima nount of ompens from tl	other ation ne	
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		ganizatio relate rganizat	d	
												+			
												_			
											+				
1b	Sub-Total			<u>.                                    </u>			<u> </u>	<u> </u>							
c d	Total from continuation sheet Total (add lines 1b and 1c) .	s to Part VII, S	ection A	۹ . <u></u>	· .	· .	•			6,600	0			0	
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho receive	d more th	nan				
3	Did the organization list any <b>f</b> o					key	emplo	yee,	or highes	t compen	sated employee		Yes	No	
4	on line 1a? If "Yes," complete S  For any individual listed on line organization and related organ	e 1a, is the sum	of repo	rtabl	e co	• mpe ? <i>If</i>	nsatio	n and	d other con	npensation	on from the	3		No	
	ındıvıdual		• •		•	•		•			[	4		No	
5	Did any person listed on line 1 services rendered to the organ			-					_	anization • • •	or individual for	5		No	
Se	ection B. Independent Co														
1	Complete this table for your fix compensation from the organiz												ax year		
	N	(A) lame and business	address							Des	(B) scription of services		(C) Compensation		
Name and business address Description of services											+				

2 Total number of independent contractors (including but not limited to those listed above) who received more than

Part V	/##1	Statement of Revenue											
		Check if Schedu	ıle O contains a respor	nse or note to any lir		<u> </u>		<u> </u>					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514					
2 2	1a	Federated cam	paigns 1a										
Grants mounts	ь	Membership du	es <b>1b</b>	113,175									
Gr.	c	Fundraising eve	ents <b>1c</b>	2,240									
Giffis, nilar An	d	Related organiz	rations 1d										
Gi Jila		Government grants											
ns, Sin	e												
utio er :	f	All other contribution similar amounts no	ons, gifts, grants, and <b>1f</b> of included above										
Contributions, Giffs, Grants and Other Similar Amounts	g		ons included in lines										
Cont and	h	1a-1f \$  Total. Add lines	: 1a-1f		115,415								
O E	-"	Total: Add lines		· · · •									
Ele	2a			Business Code									
ever	b							_					
a 12≝	c												
Ģ F	ď												
33													
Program Serwce Revenue	e f	ΔII other progra	ım service revenue										
ľoď	'	All other progra	iiii service revellue										
	g		s 2a – 2f		0								
	3		ome (including dividend ar amounts)		80			80					
	4		tment of tax-exempt bond	<u></u>	0								
	5	Royalties		▶	0								
			(ı) Real	(II) Personal									
	6a	Gross rents											
	ь	Less rental											
	c	expenses Rental income	0	0									
	d	or (loss)	me or (loss)	<u>.</u>	0								
	"	Wee remar mean	(i) Securities	(II) Other									
	7a	Gross amount from sales of assets other than inventory	.,	.,									
	ь	Less cost or other basis and sales expenses Gain or (loss)											
	d	` '	s)	<u> </u>	0								
Other Revenue	8a	Gross income f events (not inc \$	rom fundraısıng										
æ		See Part IV, lin	e 18										
ē	_	المحمد	noncos h	1,890									
₹	b c		penses <b>b</b> loss) from fundraising (	1,274 events <b>.</b> -	616								
			rom gaming activities	· •									
			e 19										
	■-		a	1,132									
			penses <b>b</b> loss) from gaming activ		1,093								
		Gross sales of	ı										
		returns and allo											
			a	626									
		=	oods sold <b>b</b>	612	14								
	ᆣ	Miscellaneous	loss) from sales of inve	entory <b>p</b> - Business Code									
	11a	RETIREMENT		Dusiness Code	5,143	5,143		0					
	ь	REIMBURSEME			1,858	1,858							
		NYSUT			, ]	<u> </u>							
	С	REIMBURSEME			3,610	3,610							
	d	All other revenue			474	474		0					
	e	Total. Add lines		🕨									
	12	Total royonuo		_	11,085								

	IX Statement of Functional Expenses				
Section	n 501(c)(3) and 501(c)(4) organizations must complete all columns A				
	Check if Schedule O contains a response or note to any line in th	ıs Part IX I	(B)	(c)	
	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	4,600	4,600		
2	Grants and other assistance to domestic individuals See Part IV, line 22	,	, F 000		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	5,000	5,000		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	6,600	0	6,600	0
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	7,950		7,950	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	1,579		1,579	
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
С	Accounting	1,130		1,130	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0			
12	Advertising and promotion	0			
13	Office expenses	127		127	
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	1,885		1,885	
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0			
23	Insurance	1,334		1,334	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	DUES AND MEMBERSHIP FEES	87,881		87,881	
b	RETIREMENT PARTY	3,791		3,791	
c	GIFTS	1,527		1,527	
d	POLITICAL ACTION	60		60	
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	123,464	9,600	113,864	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2015) Page 11 Part X **Balance Sheet** (A) (B) Beginning of year End of year 1 1 33.484 2 2 38.323 Savings and temporary cash investments . . . . . . 0 3 4 5 Loans and other receivables from current and former officers, directors, trustees. key employees, and highest compensated employees Complete Part II of ol 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part 6 ol 7 0 7 ol 8 8 ol 0 9 9 Prepaid expenses and deferred charges . . . . . 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a b Less accumulated depreciation . . . . 10b 10c ol Λ 11 11 ol 0 12 Investments—other securities See Part IV, line 11 . . . . . . 12 ol 0 13 13 Investments—program-related See Part IV, line 11 . . 14 14 0 ol 0 15 15 33.484 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . . . . 16 38,323 ol 0 **17** 17 ol 18 0 18 οl n 19 19 0 20 0 20 ol 21 21 0 Escrow or custodial account liability Complete Part IV of Schedule D . 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified ol 22 0 ol 0 23 Secured mortgages and notes payable to unrelated third parties . . 23 24 24 Unsecured notes and loans payable to unrelated third parties . . . . 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 ol 26 26 **Total liabilities.**Add lines 17 through 25 . . . . Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete Balance lines 27 through 29, and lines 33 and 34. 33.484 38.323 27 27 28 28 Fund ol 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds . . . . . . . . . 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . Retained earnings, endowment, accumulated income, or other funds 32 ž 33 33.484 38,323 33 34 33.484 38.323 Total liabilities and net assets/fund balances . . . . . . . . . . . 34

Par	Check if Schedule O contains a response or note to any line in this Part XI		
1	Total revenue (must equal Part VIII, column (A), line 12)		
		1	128,303
2	Total expenses (must equal Part IX, column (A), line 25)	2	123,464
3	Revenue less expenses Subtract line 2 from line 1	3	4,839
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	33,484
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	38,323

#### **Financial Statements and Reporting** Part XII Check if Schedule O contains a response or note to any line in this Part XII . . . . . . . . . . . .

1	Accounting method used to prepare the Form 990						
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?						
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both						
	Separate basis Consolidated basis Both consolidated and separate basis						

b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Consolidated basis Both consolidated and separate basis Separate basis

c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Yes

No

Page **12** 

DLN: 93493131009216

### **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Political Campaign and Lobbying Activities**

OMB No 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

If the organization answered "Yes" on 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" on 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

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

<ul><li>Section 501(c)(4), (5), or (6)</li></ul>	organizations Complete Part III
--	---------------------------------

Name of the organization CATSKILL TEACHERS ASSOCIATION

**Employer identification number** 

14-1742571

Part I-A	Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- Provide a description of the organization's direct and indirect political campaign activities in Part IV
- Political expenditures

Þ		

3 Volunteer hours

1

art I-B	Complete if	f the organization	on is exempt under	section 501(c)(3).

- Enter the amount of any excise tax incurred by the organization under section 4955
- Enter the amount of any excise tax incurred by organization managers under section 4955
- rganization incurred a section 4955 tay, did it file Form 4720 for this year?

•	Ti tile organization i	iliculted a section	TJJJ tax, u	ila it ille i olili 47	20 101 11113	s year

Was a correction made?

If "Yes," describe in Part IV

Part I-C	Complete if the organization is exempt under section 501(c), except section 501(c)(3).	
		-

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities  •	\$
2		

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities

<b>F</b>				
				\$
	_	 	 	

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

Did the filing organization file Form 1120-POL for this year?

☐ Yes ☐ No

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	<b>(c)</b> EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2				
3				
4				
5				
6				

For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ. Cat No 50084S Schedule C (Form 990 or 990-EZ) 2015

Schedule C (F	Pag	je ∡
Part II-A	Complete if the organization is exempt under section $501(c)(3)$ and filed Form 5768 (election under section $501(h)$ ).	ī

A Check ▶ 🗔 if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ► If the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures  (a) Filing organization's group totals  (b) Affiliated group totals				
(The term "expenditures" manner employee poid or incorred )	Limits on Lobbying Expenditures		\., ,	· ,
( The term expenditures means amounts paid of meaned.)	(The term "expenditures" means amounts paid or incu	ırred.)	organization's totals	group totals

Total lobbying expenditures to influence public opinion (grass roots

1a lobbying)

- $oldsymbol{b}$  Total lobbying expenditures to influence a legislative body (direct lobbying)
- Total lobbying expenditures (add lines 1a and 1b)
- $oldsymbol{d}$  O ther exempt purpose expenditures
- Total exempt purpose expenditures (add lines 1c and 1d)

f Lobbying nontaxable amount. Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		

Grassroots nontaxable amount (enter 25% of line 1f)

Subtract line 1g from line 1a If zero or less, enter -0-

Subtract line 1f from line 1c If zero or less, enter -0-

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 i reporting section 4911 tax for this year?

Yes 🗆

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period					
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2012	<b>(b)</b> 2013	<b>(c)</b> 2014	<b>(d)</b> 2015	<b>(e)</b> Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

	Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	(a)	(b)
For each "Yes" r activity.	esponse on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	]	No Amount
legislatio	ne year, did the filing organization attempt to influence foreign, national, state or local on, including any attempt to influence public opinion on a legislative matter or referendum, the use of	Yes	
<b>a</b> 'olunteers?			•
<b>b</b> Paid staf	for management (include compensation in expenses reported on lines 1c through 1i)?		
<b>c</b> 1edıa advertıs	ements?		
<b>d</b> 1aılıngs to me	mbers, legislators, or the public?		
I			
<b>e</b> Publicati	ons, or published or broadcast statements?		<u> </u>
<b>f</b> Grants to	o other organizations for lobbying purposes?		
<b>g</b> Direct co	ntact with legislators, their staffs, government officials, or a legislative body?		
<b>h</b> Rallies, o	demonstrations, seminars, conventions, speeches, lectures, or any similar means?		
<b>i</b> Other activitie	s?		
	<u> </u>		
<b>j</b> Total Add line:	s 1c through 1ı		
	ctivities in line 1 cause the organization to be not described in section 501(c)(3)? enter the amount of any tax incurred under section 4912		
	enter the amount of any tax incurred by organization managers under section 4912		
•	ng organization incurred a section 4912 tax, did it file Form 4720 for this year?		
Part III-A	Complete if the organization is exempt under section 501(c)(4), section	501(c)(!	5), or section
	501(c)(6).		Yes No
1 Were sub	ostantially all (90% or more) dues received nondeductible by members?		1 Yes
	rganization make only in-house lobbying expenditures of \$2,000 or less?		2   No
	rganization agree to carry over lobbying and political expenditures from the prior year?		3   No
Part III-B	Complete if the organization is exempt under section $501(c)(4)$ , section $501(c)(6)$ and if either (a) BOTH Part III-A, lines 1 and 2, are answered line 3, is answered "Yes."		
	nents and similar amounts from members		
1   2   Section 1	162(e) nondeductible lobbying and political expenditures (do not include amounts of political	1 1	
expenses	s for which the section 527(f) tax was paid).		
<b>a</b> Current year			
2a			
<b>b</b> Carryover from	last year		
2b			
<b>c</b> 「otal			
2c			
3 Aggregat	te amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
f notices were loes the organ	sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess ization agree to carryover to the reasonable estimate of nondeductible lobbying and diture next year?		
4		1 - 1	
	amount of lobbying and political expenditures (see instructions)	5	
Part IV Provide the d	Supplemental Information escriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gri	oup list). Pa	rt II-A, lines 1 and
2 (see instru	ctions), and Part II-B, line 1 Also, complete this part for any additional information		and
Ret	urn Reference Explanation		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493131009216

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.

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization CATSKILL TEACHERS ASSOCIATION	Employer identification number
CHISINE TEACHERS 7650CENTION	14-1742571

### 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11 TAX RETURN REVIEW	A TENTATIVE COPY OF FORM 990 IS PROVIDED TO THE OFFICER/GOVERNING BODY SIGNING THE RETURN IT IS REVIEWED FOR ACCURACY AND COMPLETENESS ANY CHANGES ARE SUBMITTED TO THE PREPARER
FORM 990, PART VI, SECTION C, LINE 18 PUBLIC AVAILABILITY	GOVERNING DOCUMENTS AND TAX RETURNS ARE MADE AVAILABLE TO THE PUBLIC UPON ADVANCE REQUEST