Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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 www.irs.gov/form990.

Ā	For the	2016 calendar year, or tax year beginning July 1 , 2016, and end	ling Jur	ne 30	, 20 17	
В	Check if a	pplicable: C Name of organization United AcademicsAAUP/AFT Local 3203		D Employ	er Identification nu	mber
	Address c				03-0372108	
	Name cha		suite	E Telepho	ne number	
$\overline{\Box}$	Initial retu	· - I			808-656-1428	
$\overline{\Box}$	Final return					
$\overline{\Box}$	Amended			G Gross re	eceipts \$	677,052
Ħ	Application		H(a) is this a n		subordinates? Yes	
_	, dollar	politing			s included? Tes	
1	Tax-exem	pt status: ☐ 501(c)(3)			a list. (see instruction	
<u>:</u>	Website:		H(c) Group	exemption	number ➤ 07	87
ĸ.		ganization: ☐ Corporation ☐ Trust ☐ Association ☑ Other ► Labor L Year of form			of legal domicile:	VT
P	art I	Summary	2001	1 111 5 11115	0.1030.000.000	
		Briefly describe the organization's mission or most significant activities: Labo	r union organi	zing, rent	resentation of me	mher
g)		n workplace related matters. Increase membership in the organization.				
Activities & Governance	<u> </u>	i Workplace related marrers, increase membership in the organization.				
CE.	2 0	Check this box ▶☐ if the organization discontinued its operations or disposed	of more than	25% of	its not assots	
∾ફૂ	1	lumber of voting members of the governing body (Part VI, line 1a)				
_,0	I	lumber of voting members of the governing body (Fart VI, line 1a).				8
> 8		otal number of individuals employed in calendar year 2016 (Part V, line 2a)	o,	5		8
ŧ	1	otal number of individuals employed in calendar year 2010 (Fait V, line 2a)		6	 -	20
- 별		otal number of volunteers (estimate if necessary)		7a		
Ū,	1		-7 · · · ·	7b		0
U 2	Ь	let unrelated business taxable income from Form 990=T, line 34	Prior Ye		Current Yes	0
7	ا . ر	Contributions and grants (Part VIII, line 1h) $\sqrt{2}$. OCT LS_{227} .	1		- Carrone rec	
9		Contributions and grants (Part VIII, line 1h)		685072		<u>675603</u>
Revenue		Program service revenue (Part VIII, line 2g)	¥			
æ		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		1779		1449
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	J 			
		otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	 	686851		677052
	1	Grants and similar amounts paid (Part IX, column (A), lines 1–3)			 	
	1	Renefits paid to or for members (Part IX, column (A), line 4)	 		<u> </u>	
ě	1	alaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		148417		170519
Expenses		rofessional fundraising fees (Part IX, column (A), line 11e)			we ld. I fire v	
3		otal fundraising expenses (Part IX, column (D), line 25)			offelt offile	
4		Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		451207		438394
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	ļ	569624		608913
		evenue less expenses. Subtract line 18 from line 12		117227	F-4 (1/-	68139
Net Assets or Fund Balances			Beginning of Cu	rrent Year	End of Yea	
25 E	20 T	otal assets (Part X, line 16)		499347		567486
뚩	21 T	otal liabilities (Part X, line 26)		0		0
		let assets or fund balances. Subtract line 21 from line 20	L	499347	·	567486
_	art II	Signature Block				
Un	der penaltie	es of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to t	he best of r	ny knowledge and t	pelief, it is
trus	e, correct, a	and complete. Declaration of preparer (other than officer) is based on all information of which prepare	rer nas any knowi	eage.	12.17	
٥.				10/13	10017	
Sig		Signature of officer	Da	te / /		
He	re	JOSEPH M. KNOWLE TREASUREM				
		Type or print name and title			1	
Pa	id	Print/Type preparer's name Preparer's signature	Date	Check [∏ if PTIN	
	eparer			self-em	oloyed	
	e Only	Firm's name ▶	Fim	n's EIN 🕨		
		Firm's address ▶	Pho	ne no.		
May	y the IRS	discuss this return with the preparer shown above? (see instructions)	<u> </u>	<u> </u>	· · Yes	
For	Paperwo	rk Reduction Act Notice, see the separate instructions. Cat	No. 11282Y		Form 95	(2016)

rom 99	2016)	Page 2
Part		
	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>
1	Briefly describe the organization's mission:	
	To act as a collective bargaining agent and seek optimum working conditions. To provide members with represe process. To act as a liason between teachers, administrators and school committees. To promote professionalis	
	process to det de a mason between teachers, administrators and scrippi committees. To promote professionans	in altony members.
2	Did the organization undertake any significant program services during the year which were not listed on	the
	prior Form 990 or 990-EZ?	· Yes Vo
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any progr	_
	services?	· Yes 🗹 No
	If "Yes," describe these changes on Schedule O.	
	Describe the organization's program service accomplishments for each of its three largest program service expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ including grants of \$) (Revenue \$	

	***************************************	,
		·
		,

4b	(Code:) (Expenses \$including grants of \$) (Revenue \$	<u></u>
,	**************************************	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
,		
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		,
		,=1=04u4c=14u-==4u4p==4u0ab=
4c	(Code:) (Expenses \$ including grants of \$ ) (Revenue \$	)
	***************************************	
		~~~
•		
•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	**************
•		
	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶	

Parţ	IV Checklist of Required Schedules			
			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		/
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
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		1
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? <i>If "Yes," complete Schedule C, Part II</i>	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	1	
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		1
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		/
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	(d 45) 4 H24	✓
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? If "Yes," complete Schedule D, Part VII	11b		1
C	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? If "Yes," complete Schedule D, Part VIII	11c		1
d	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? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		√
b	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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		7
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
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		√
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		1
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		√
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		<u>·</u> ✓
18 -	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		<u>,</u>
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		✓

Part	Checklist of Required Schedules (continued)	<u>'</u>		age -
	District the second of the sec		Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
D D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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		1
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
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? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	20		Ť
	\$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	ı	1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
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		1
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	200		
	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		✓
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? If "Yes," complete Schedule L, Part III	27		✓
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):	猫		
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		√
	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		√
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		
	Part I	31		✓
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
	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		✓
	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		√
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
	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	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	-55		<u> </u>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	37		√
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	"		·
	19? Note. All Form 990 filers are required to complete Schedule O.	38_	1	

Part				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No.
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 22			-
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and]	,	ĺ
	reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		ŀ	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 20	1 1	i	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	<u> </u>	
3a	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
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		✓
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		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
b	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b		6ь		
7	gifts were not tax deductible?	- OD		-
a	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		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		1
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
_	required to file Form 8282?	7c		✓
ď	If "Yes," indicate the number of Forms 8282 filed during the year	_		,
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		√
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		1
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		1
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		√
ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		✓
10	Section 501(c)(7) organizations. Enter:			
a b	Initiation fees and capital contributions included on Part VIII, line 12			
11	Section 501(c)(12) organizations. Enter:		J	
а	Gross income from members or shareholders			1
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		
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?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
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		İ	
C	Enter the amount of reserves on hand	 		, -
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓_
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Schedule O contains a response or note to any line in this Part VI	See ins	struct	ions.
Sect	ion 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 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.		THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS O	A TOTAL PARTY OF THE PARTY OF T
b 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	· ist	1	
any other officer, director, trustee, or key employee?		2		/
4 5	supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?	3 4 5		✓
6 7a	Did the organization have members or stockholders?	6 7a	√	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	√	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		1) 13x	
a b 9	The governing body?	8a 8b	✓	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9 ve Cr	ode)	✓
			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		√
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		1
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b		✓
¢	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13 14 15	Did the organization have a written whistleblower policy?	13	✓	✓
a b	The organization's CEO, Executive Director, or top management official	15a 15b	\	.* '
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		√
	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?	16b	.1	a
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed none Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(c)(3)s	only)
19	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.	erest _l	policy	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re Joe Kudrle, same as page 1	cords:	>	

ane	7

	000	(2016	٠,
-nm	HHL	12010	31

	<u>- i </u>	
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, a	no
	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, and 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.

	arry rollato	u oig	CU IIZ	alic	7110	ompe	1130	ted any curren	it Officer, directo	, or trustee.	
				-	C)						
(A)	(B)	١			ition			(D)	(E)	(F)	
Name and Title	Average					than o		Reportable	Reportable	Estimated	
	hours per					or/trus			compensation from		
	week (list any				_		÷	from	related	other	
	hours for related	호호	ısti	Officer	8	를	Former	the organization	organizations (W-2/1099-MISC)	compensation from the	
	organizations	90.00	돐	4	ğ	8 2	₫	(W-2/1099-MISC)	(44-2/1033-14/130)	organization	
	below dotted	성표	ᆲ	1	Key employee	1 6 8	1	,		and related	
	tine)	Individual trustee or director	Institutional trustee		8	\$\delta\$			•	organizations	
		%	St ee		ł	Highest compensated employee	l				
	ļ	ļ	ļ	_		8.	L				
(1) John Forbes, President	10 hr week				,	l					
Burlington, VT 05405		1		1				23100	0		0
(2) Joe Kudrie, Treasurer	10 hr week										Ť
Burlington, VT 05405				✓		<u></u>		16500	0		0
(3) Alison Pechenick, Secretary	5 hr week										_
Burlington, VT 05405				✓		[550	0		0
(4)											_
		}									
(5)			П				Г				_
		1									
(6)			П					-			_
		1		-							
(7)								 			
(1)	†	Ì									
(8)		<u> </u>		_	\vdash		_				—
		ĺ									
(9)			Н		-						—
		\					1				
(10)	 	 	Н		-	 	-		-		—
(10)		1									
144)		-	-		_		 —				
(11)	ļ	(ļ	[
(40)			Н		├	<u> </u>					—
(12)		ł									
	_	-	Ш	-			ļ_				_
(13)	 										
			Ш			<u> </u>	<u> </u>	<u> </u>		ļ <u></u>	
(14)											
		1 :					l	1		i	

Part	VII Section A. Officers, Directors, Trus	lees, Key E	mploy	/ees	s, ar	nd H	lighe	st Ç	ompensated E	mployees (cont	nued) •
					•	C)					
	(A)			ot ch		ition more	than o	one	(D)	(E)	(F)
	Name and title	Average	box,	unles	s pe	rson	ıs both	an	Reportable	Reportable compensation from	Estimated amount of
		hours per week (list any					or/trust		compensation from	related	other
		hours for	or di	Insti	Officer	Key	휲호	Former	the	organizations (W-2/1099-MISC)	compensation from the
		related organizations	rect du	utio	ğ	emp	est c	ĕ	organization (W-2/1099-MISC)		organization
		below dotted	1 2 2	nal t	Ì.,	Key employee	W X				and related organizations
		line)	Individual trustee or director	Institutional trustee		ě	ens				Organizations
				Ве			Highest compensated employee	Ì			
(15)											
2000											
(16)											
								<u> </u>			
(17)								ŀ			
						_		├—			ļ <u>.</u>
(18)											
(19)								┝			
713/									1		
(20)					\vdash			┢			
3==1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,										
(21)							_				
(22)											
								 			
(23)								ŀ			
(0.4)			-					-			
(24)											
(25)					<u> </u>	Н					
320/											
1b	Sub-total		• •	•			•	>	40150		
С	Total from continuation sheets to Part	VII, Sectio	n A					▶			
d	Total (add lines 1b and 1c)						_:_	<u> </u>	40150		<u> </u>
2	Total number of individuals (including but		to th	ose	list	ed a	above	e) w	ho received m	ore than \$100,0	00 of
	reportable compensation from the organi	zation >							· · ·		
•	Did the appointing list any farmon of	fiaan dinaa					leave e		Javas ar biab	ast sampanast	Yes No
3	Did the organization list any former of employee on line 1a? If "Yes," complete to							:mp	noyee, or riigh	lest compensat	ed 3
4	For any individual listed on line 1a, is the							 n a	nd other comp	ensation from t	
-	organization and related organizations										
	individual							-, 			4 /
5	Did any person listed on line 1a receive of	r accrue co	mpei	nsat	tion	fror	n any	un un	related organiz	ation or individ	ual and the contract
	for services rendered to the organization	? If "Yes," c	ompl	ete	Sch	edu	ile J f	or s	such person	<u></u>	5 ✓
Section	on B. Independent Contractors										
1	Complete this table for your five highest	compensate	ed ind	lepe	end	ent	contr	acto	ors that receive	ed more than \$1	00,000 of
	compensation from the organization. Rep	ort compe	nsatio	n fo	or th	ne c	alend	ar y	ear ending wit	h or within the o	organization's tax
	year.							1			
	(A) Name and business add	ress						1	(B) Description of s	ervices	(C) Compensation
								-	· · · · · · · · · · · · · · · · · · ·		·
		 -				•		 			
						-		-	_		
							-				
2	Total number of independent contractor							th	ose listed abo	ove) who	
	received more than \$100,000 of compens									, ·	121 (25)

Form **990** (2016)

Part	VIII						
	_	Check if Schedule O contains a response	onse or note to	any line in this	Part VIII		<u>.</u> 🛚
ı				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ıts ıts	1a	Federated campaigns 1a					
irar	b	Membership dues 1b	590963			l	}
Program Service Revenue and Other Similar Amounts	С	Fundraising events 1c		l			İ
	d	Related organizations 1d	84640	1			}
	e	Government grants (contributions) 1e		1		1	ĺ
	f	All other contributions, gifts, grants,					
the par		and similar amounts not included above 11		l		ļ	ł
a Oth	g	Noncash contributions included in lines 1a-1f: \$		İ			
and	h	Total. Add lines 1a-1f	▶	675603		l II	
			Business Code			 	
en	2a			İ		}	}
Rev							
ice Re	c						
eΣ	d						
S E	e		.=			 	
gra	f	All other program service revenue .				 	
P	g	Total. Add lines 2a–2f				·	l
	3	Investment income (including divider	nds. interest.			1	1
		and other similar amounts)		1449			
	4	Income from investment of tax-exempt bon	L L	1445			
	5	Royalties				 	
		(1) Real	(ii) Personal				
	6a	Gross rents		į			į
	b	Less: rental expenses		!			
	C	Rental income or (loss)		[ļ
	d	Mat wantal impages as (lane)					
	7a	Gross amount from sales of (i) Securities	(II) Other			 	
	, 4	assets other than inventory		i		ļ	
1	b	Less: cost or other basis		Ì		1	1
	_	and sales expenses .		į			
-	С	Gain or (loss)		ŀ			
	d	Net gain or (loss)	•		-		
	•	Trongamor (1033)				 	
Other Revenue	8a	Gross income from fundraising	j				
Š		events (not including \$	ļ	į		1	!
8		of contributions reported on line 1c).					
٦		See Part IV, line 18 a		ļ		ļ	
£	b	Less: direct expenses b					
	C	Net income or (loss) from fundraising ev	/ents . ▶				
	9a	Gross income from gaming activities.					
1		See Part IV, line 19 a	İ			1	
	b	Less: direct expenses b		ŀ			
	С	Net income or (loss) from gaming activity	ties >		•	J	
	10a	Gross sales of inventory, less					
ļ		returns and allowances a		ļ		j	
-	b	Less: cost of goods sold b		Į.		\	
	С		tory ►				
ľ			Business Code				
ł	11a			ŀ		1	
)	ь						
1	C						
	d	All other revenue			····	 	
[e	Total. Add lines 11a–11d	Þ				
	12	Total revenue. See instructions					

Form **990** (2016)

Form 99	0 (2016)				Page 10
Part	IX Statement of Functional Expenses				· (A)
Sectio	n 501(c)(3) and 501(c)(4) organizations must com	plete all columns. Al	other organization	is must complete co	iumn (A).
	Check if Schedule O contains a respons	se or note to any lin	e in this Part IX . (B)	(c)	(D)
Do no 8b, 9b	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	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				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				4
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16			,	
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	40150			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	124548			<u> </u>
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	5821		<u> </u>	<u> </u>
11	Fees for services (non-employees):				
а	Management				
b	Legal	3780			
C	Accounting	5967			
d	Lobbying				
e	Investment management fees				
f g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	839			
12	Advertising and promotion				-
13	Office expenses	5188			
14	Information technology	672		<u> </u>	
15	Royalties			<u> </u>	
16	Occupancy				<u> </u>
17	Travel		<u> </u>	 	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				<u> </u>
20	Interest				
21	Payments to affiliates	363637			
22	Depreciation, depletion, and amortization	275			
23	Insurance	2/3			
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	General Member Services	52481			
b					
c					ļ
d					
е	All other expenses	5555			
25_	Total functional expenses. Add lines 1 through 24e	608913		ļ	
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	n 990 (2	016)			Page 11
Р	art X				
		Check if Schedule O contains a response or note to any line in this Pa		· · ·	
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	35186	1	60966
	2	Savings and temporary cash investments	458397	2	500319
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		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 II of Schedule L		. 6	,
Assets	7	Notes and loans receivable, net		7	
Ş	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	5764	⊢ →	6201
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	3704	3	6201
	Ь	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	499347	16	567486
\rightarrow	17	Accounts payable and accrued expenses	0	17	307430
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
w	22	Loans and other payables to current and former officers, directors,			
Liabilities	22	trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	-	22	·
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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	
	26	Total liabilities. Add lines 17 through 25	0	26	0
es		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
Ę	27	Unrestricted net assets	499347	27	567486
lak	28	Temporarily restricted net assets		28	307.00
D D	29	Permanently restricted net assets		29	·
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
S	30	Capital stock or trust principal, or current funds		30	==
set	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds .		32	
<u>e</u>	33	Total net assets or fund balances	499347		567486
~	34	Total liabilities and net assets/fund balances	499347		567486
					Form 990 (2016)

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)	,
Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line)	🗆
Revenue less expenses. Subtract line 2 from line 1	677052
Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	608913
Net unrealized gains (losses) on investments	68139
Donated services and use of facilities	499347
7 Investment expenses	
8 Prior period adjustments	
9 Other changes in net assets or fund balances (explain in Schedule O)	
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	
33. column (B))	
	567486
Part XII Financial Statements and Reporting	_
Check if Schedule O contains a response or note to any line in this Part XII	<u>. , ⊔</u>
1 Accounting method used to prepare the Form 990: ✓ Cash ☐ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.	es No
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:	7
Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?	
Separate basis Consolidated basis Both consolidated and 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?	1
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. 3b	
Form	90 (2016)

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 2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► 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.

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

ray) la	oo saparato msu ucuoms), t	11611			
• Se	ection 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			~
Name	of organization			Employer ider	ntification number
	AcademicsAAUP/AFT Lo				03-0372108
		e organization is exempt und			
1	Provide a description of definition of political car	f the organization's direct and in mpaign activities")	direct political ca	impaign activities in Part	IV. (see instructions for
2	Political campaign activit	ty expenditures (see instructions)		▶ \$	}
3	Volunteer hours for politi	cal campaign activities (see instru	ctions)	<u> </u>	
Part	-B Complete if th	<u>e organization is exempt und</u>	er section 501(c)(3).	
1		excise tax incurred by the organization			
2		excise tax incurred by organization			
3		ed a section 4955 tax, did it file Fo			
4a			• • • • • •	· · · · · · · · ·	Yes No
	If "Yes," describe in Part			\	/ \/O\
Part		e organization is exempt und			(c)(3).
1		ly expended by the filling organize			
2		filing organization's funds contrib			
-	527 exempt function acti	vities	ated to other org	s s s s s s s s s s s s s s s s	
3	Total exempt function e	expenditures. Add lines 1 and 2	. Enter here and	on Form 1120-POL.	
_					
4		n file Form 1120-POL for this year			
5		ses and employer identification nu			
	organization made payme	ents. For each organization listed,	enter the amount	paid from the filing organi	zation's funds. Also enter
	the amount of political co	ontributions received that were pro	mptly and directly	delivered to a separate p	olitical organization, such
	as a separate segregated	fund or a political action committe	e (PAC). If addition	nal space is needed, provi	de information in Part IV.
	(a) Name	(b) Address	(o) EIN	(d) Amount paid from filling organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

~	•
Page	4

Sched	ule C (Form 990 or 990-EZ) 2016					Page :
Part	II-A Complete if the organization section 501(h)).	n is exempt	under section 50	01(c)(3) and file	d Form 5768 (ele	
A C	heck ► ☐ If the filing organization be name, address, EIN, expe					oup member's
вС	heck > if the filing organization ch	ecked box A	and "limited cont	trol" provisions a	apply.	_
	Limits on Lob				(a) Filing	(b) Affiliated
	(The term "expenditures" m	eans amounts	s paid or incurred.)	organization's totals	group totals
1a	Total lobbying expenditures to influence	public opinior	n (grass roots lobby	ring)		
b	Total lobbying expenditures to influence	•				
c	Total lobbying expenditures (add lines 1	_	• • • • • • • • • • • • • • • • • • • •			
d	Other exempt purpose expenditures .	•				
е	Total exempt purpose expenditures (ad					
f	Lobbying nontaxable amount. Enter		,			
	columns.		_			
,	If the amount on line 1e, column (a) or (b) is	: The lobbying	g nontaxable amoun	t is:		
	Not over \$500,000		mount on line 1e.		. 75	e e e
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	s 15% of the excess	over \$500,000.	* ***	#* - #
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	s 10% of the excess	over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plu	s 5% of the excess o	ver \$1,500,000.		•
	Over \$17,000,000	\$1,000,000.				
g	Grassroots nontaxable amount (enter 2	% of line 1f)				
h	Subtract line 1g from line 1a. If zero or l	ess, enter -0-	. ,			
i	Subtract line 1f from line 1c. If zero or le			· ·		
j	If there is an amount other than zero	on either line	1h or line 1i, did	I the organization	file Form 4720	
_	reporting section 4911 tax for this year	? _ <u></u> .	<u> </u>	<u></u>		Yes No
	4-Y	ear Averaging	Period Under sec	tion 501(h)		
	(Some organizations that made a se	ction 501(h) e	lection do not hav	e to complete all	of the five colum	ns below.
	See the	separate ins	tructions for lines	2a through 21.)		
						
	Lobbyin	Expenditure	s During 4-Year A	veraging Period	T	
	Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount					

Lobbying Expenditures During 4-Year Averaging Period						
	Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2 a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))	4		-		
f	Grassroots lobbying expenditures					-

	(election under section 501(h)).	1.	a)		(b)	
	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed ption of the lobbying activity.	Yes	T	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?		<u> </u>			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	<u></u>	<u> </u>	1		
C	Media advertisements?	<u></u>	<u> </u>			
d	Mailings to members, legislators, or the public?		ļ	 		
e	Publications, or published or broadcast statements?		-	}		
f	Grants to other organizations for lobbying purposes?		├			
9	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h :	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?	-	 	 		
) ;	Other activities? Total. Add lines 1c through 1i	<u> </u>	-	 		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	ł		 		
	If "Yes," enter the amount of any tax incurred under section 4912		 			
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	1	1	<u> </u>		
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1]			
Part l)(5),	or se	ction		
	501(c)(6).					,
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	✓	
3 Part I	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				L	<u> </u>
. ant	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."				line :	3, is
1	Dues, assessments and similar amounts from members		1			
	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	s of				
а	Current year		2a	L		
b	Carryover from last year		2b			
C	Total		2c			
	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of		ļ	ĺ		
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb			ĺ		
	and political expenditure next year?		4			
	Taxable amount of lobbying and political expenditures (see instructions)	•	5	L		
Part		!!	4\. D	4 II A I		
	e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	up lis	t); Pai	τ II-A, II	nes 1	and
(See i	instructions); and Part II-B, line 1. Also, complete this part for any additional information.					
			*****			-
			 -			

SCHEDULE 0 (Form 990 or 990-EZ)

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.

OMB No. 1545-0047 2016

Department of the Treasury Internal Revenue Service

► 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.

Open to Public Inspection

Name of the organization	Employer Identification number
United AcademicsAAUP/AFT Local 3203	03-0372108
Dat W. Carlina A. Carrantina D. and at Maria	
Part VI Section A. Governing Board and Management:	
Line 6: The organization is based on membership dues, therefore, the organization has members	
Line 7: The members nominate and elect members of the governing board.	

Part VI Section B. Policies	
Line 11B: Form 990 is prepared by the higher organization, reviewed by the Treasurer and President	of the organization.
Line 15B: Compensation is reviewed during the annual budget process and approved by the Executi	/e Board.
Part VI Section C. Disclosure:	
Line 19: Specified documents are made available by member's requests. IRS Form 990 is available in	PDF format to facilitate distribution
Additionally, independent organizations such as GuideStar provides organizational information for p	ublic view.
***************************************	***************************************
	· · · · · · · · · · · · · · · · · · ·
	

SCHEDULE O (Form 990 or 990-EZ)

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.

2016

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

Open to Public Inspection

Name of the organization	Employer identification number
United AcademicsAAUP/AFT Local 3203	03-0372108
Part VI Section A. Governing Board and Management:	
Line 6: The organization is based on membership dues, therefore, the organization has members	
Line 7: The members nominate and elect members of the governing board.	
Part VI Section B. Policies	
Line 11B: Form 990 is prepared by the higher organization, reviewed by the Treasurer and President of	the organization
Enter 115. Form 500 is propuled by the higher organization, reviewed by the freesance and freesance of	the organization.
Line 15B: Compensation is reviewed during the annual budget process and approved by the Executive	Board.
Part VI Section C. Disclosure:	
Line 40. Considered de company and anniholds by manufacture and a 100 feet and 100	
Line 19: Specified documents are made available by member's requests. IRS Form 990 is available in F	PDF format to facilitate distribution
Additionally, independent organizations such as GuideStar provides organizational information for pul	blic view.
	·

Schedule O (Form 990 or 990-EZ) (2016)	
Name of the organization	Employer identification number
	,
	
·	
·	
,	
,	