

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.

Open to Public Inspection Information about Form 990 and its instructions is at www.lrs.gov/form990. A For the 2016 calendar year, or tax year beginning JUL 1, 2016 and ending JUN 30, 2017 C Name of organization D Employer identification number Check if applicable NORWALK FEDERATION OF TEACHERS Address change LOCAL # 1723, AFT / AFL-CIO Name change 06-6107600 Doing business as Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 9 MOTT AVENUE SUITE # 302 203-939-1009 term City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ 925,535. Amended NORWALK, CT 06850 H(a) Is this a group return F Name and address of principal officer: HOWIE ZIPERSTEIN for subordinates? Yes X No 9 MOTT AVE, SUITE #302, NORWALK H(b) Are all subordinates included? 501(c)(3) X 501(c) (5) **◄** (insert no.) 4947(a)(1) or If "No," attach a list (see instructions) Tax-exempt status J Website: ► N/A H(c) Group exemption number ► 0787 X Association Other > K Form of organization: Corporation Trust L Year of formation: 1967 M State of legal domicile: CT Part I Summary Briefly describe the organization's mission or most significant activities: THE BETTERMENT OF THE WORKING Governance CONDITIONS OF MEMBERS IN THE EDUCATION PROFESSION. Check this box __ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 0 Number of independent voting members of the governing body (Part VI, line 1b) 4 15 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 70 Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 7b 0. **Current Year** Prior Year žβ 1,152,350 915,453. Contributions and grants (Part VIII, line 1h) Revenue 3 Program service revenue (Part VIII, line 2g) 0. 0. 2,342. 2,109. 310 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 2.485. 7.740. =1'1 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) ,156,944. 925,535. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,950. ₹13 820. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. Benefits paid to or for members (Part IX, column (A), line 4) О. 14م 142,206. 124.119. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) **∠**15 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. b Total fundraising expenses (Part IX, column (D),-line 25) 888,689. 736,116. Other expenses (Part IX, column (A), lines 11a-11d, 1122 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 258 Revenue less expenses. Subtract line 18 from https://example.com/substact 862,185. 031,715. 125,229. 63,350. Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 664,412. 731,565. 70,498. 74,301. 21 Total liabilities (Part X, line 26) 593,914. 657,264 Net assets or fund balances. Subtract line 21 from line 20 | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign HOWIE ZIPERSTEIN, TREASURER Here Type or print name and title PTIN Print/Type preparer's name Preparer's signature Paid self-employed P01319045 DAHL F. BOWSER STEIGER & COMPANY,

06-1443759 Firm's EIN Phone no. 203-327-5717 X Yes Form **990** (2016)

632001 11-11-18 LHA For Paperwork Reduction Act Notice, see the separate instructions.

STAMFORD, CT 06905-0227

Firm's address ▶ 1100 SUMMER STREET

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

Preparer

Use Only

Firm's name KAHAN,

LOCAL # 1723, AFT / AFL-CIO 06-6107600 Form 990 (2016) Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: THE BETTERMENT OF THE WORKING CONDITIONS OF MEMBERS IN THE EDUCATION PROFESSION. Did the organization undertake any significant program services during the year which were not listed on the Yes X No prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 5,750 • including grants of \$) (Expenses \$ __) (Revenue \$ SCHOLARSHIPS TO STUDENTS AT TWO NORWALK HIGH SCHOOLS, AND AWARDS TO STUDENTS AT FOUR NORWALK MIDDLE SCHOOLS, BASED ON SPECIFIC CRITERIA. 443,015. including grants of \$) (Expenses \$) (Revenue \$ DUES PAID TO STATE AND NATIONAL ORGANIZATIONS ON BEHALF OF MEMBERS. (Code ___) (Expenses \$ _ including grants of \$ _____) (Revenue \$ Other program services (Describe in Schedule O.) 333,433. including grants of \$ 782,198. Total program service expenses Form 990 (2016)

NORWALK FEDERATION OF TEACHERS LOCAL # 1723, AFT / AFL-CIO

06-6107600

Form 990 (2016)

Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? X If "Yes." complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors? 2 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for 3 X public office? If "Yes," complete Schedule C, Part I 3 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 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 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 X 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete 8 Х Schedule D, Part III 8 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? X 9 If "Yes," complete Schedule D, Part IV 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 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X 11 as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X Part VI 11a 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 X c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c 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 X Part X, line 16? If "Yes," complete Schedule D, Part IX 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11<u>f</u> 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Х 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 Х Х Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? 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 X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any 15 X foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to X or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, X column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines X 18 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Form 990 (2016)

complete Schedule G, Part III

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	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		X_
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		X _
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		X _
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		X_
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				
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
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			ĺ
	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		X
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			ĺ
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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).	,		κ,`
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b		28b		X
	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		x
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		x
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		X
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	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	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	X	
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		
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	_	X
38	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	х	
		Form	990	(2016)

LOCAL # 1723, AFT / AFL-CIO

	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 12 12 12		103	110
	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?	1c		
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 2a 15			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u> </u>
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		X
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		<u>X</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
		5c		
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?	6a		<u>X</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_		7.7
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_		<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			X
_	If "Yes," indicate the number of Forms 8282 filed during the year	7c	۲.	
u	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	^ 7е	·- · · · · ·	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
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	_	~ -
9	Sponsoring organizations maintaining donor advised funds.			۷,
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	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			
11	Section 501(c)(12) organizations. Enter			
а	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)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	_	
	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.	46		
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 13b			
142	Enter the amount of reserves on hand	14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a		Λ
	199, Table and a 1 office 20 to report anoso paymonts in 199, provide an explanation in ochecutie O		990	(2016)

Form 990 (2016) LOCAL # 1723, AFT / AFL-CIO 06-6107600 Page 6

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion 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	7		
	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): 	~ .	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	7:	ئىدۇ ـ	
	officer, director, trustee, or key employee?	2		X
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		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			<u> </u>
	persons other than the governing body?	7b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	1.		>
а	The governing body?	8a	x	·
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	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? If "Yes," provide the names and addresses in Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	1.52		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a		11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	1.14		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	ĺ	x
 b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	1		
-	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13	х	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent		_ <u>_</u>	
-	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		,	
а	The organization's CEO, Executive Director, or top management official	15a	X	* - *
b	Other officers or key employees of the organization	15b	X	
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			<u> </u>
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		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100	†	
-	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	j *	-
Sec	tion C. Disclosure	100		-
17	List the states with which a copy of this Form 990 is required to be filed ▶CT		-	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availal	ole	
. •	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	d finan	ıcial	
.5	statements available to the public during the tax year	mai		
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	HOWIE ZIPERSTEIN - (203)939-1009			
	9 MOTE AVENUE SILTER #302 NORWALK OF 06850			

Form 990 (2016) LOCAL # 1723, AFT / AFL-CIO 06-6107600

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

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

Check if Schedule O contains a response or note to any line in this Part VII

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

(A) Name and Title	(B) Average hours per week	box offic	not c	ss pe	nore rson	than is bot or/trus	han	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MARY YORDON	68.00							· -	·	
PRESIDENT				X				69,250.	0.	0.
(2) JOSEPH GIANDURCO	20.00									
1ST VICE PRESIDENT				X				4,970.	0.	0,
(3) KRISTINA SAUNDERS	12.00									
2ND VICE PRESIDENT				X				5,105.	0.	0.
(4) HOWIE ZIPERSTEIN	25.00									
TREASURER				X				12,345.	0.	0.
(5) CLARE JUDEN	8.00									
SECRETARY				X				<u>2,7</u> 50.	0.	0.
(6) JOHN ALTIERI	15.00									
EXECUTIVE SECRETARY				X				5,400.	0.	0.
(7) MICHAEL RICHARDS	12.00								_	_
MEMBERSHIP SECRETARY			_	X				2,890.	0.	0.
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Page **7**

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(C)

(D)

06-6107600

(E)

Page 8

(F)

LOCAL # 1723, AFT / AFL-CIO

(B)

Form 990 (2016)

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8

LOCAL # 1723, AFT / AFL-CIO

Part VIII Statement of Revenue X Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under (B) Related or (C) Unrelated (A) Total revenue exempt function business revenue revenue ts, Grants Amounts 1. 金额线 1 a Federated campaigns 1a 886,853. Membership dues 1b c Fundraising events 1c 28,600. d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f \$_ h Total. Add lines 1a-1f Business Code Service 2 a Program \$ f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 3 2,342 2,342. other similar amounts) Income from investment of tax-exempt bond proceeds 4 5 Royalties (i) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less: cost or other basis, 77. P. W. 16. and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold ' c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 11 a SEE SCHEDULE " O 7,740. 900099 All other revenue 不是可能概念 Total. Add lines 11a-11d .740. Th. O. K. W. 925,535. Total revenue See instructions.

Form 990 (2016) LOCAL # 1723, AFT / AFL-CIO
Part IX Statement of Functional Expenses

	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons		this Part IX .		X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	1,950.	1,950.		
2	Grants and other assistance to domestic	İ			
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign	}			
	organizations, foreign governments, and foreign	1			
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,			10 015	
	trustees, and key employees	100,660.	81,715.	18,945.	
6	Compensation not included above, to disqualified	}			
	persons (as defined under section 4958(f)(1)) and	1			
	persons described in section 4958(c)(3)(B)	12.054	12.054		
7	Other salanes and wages	13,254.	13,254.		
8	Pension plan accruals and contributions (include	}			
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	10 205		10,205.	
10	Payroll taxes	10,205.		10,203.	
11	Fees for services (non-employees):	}	}		
a	Management	32,627.	32,627.		
þ	Legal .	15,100.	34,041.	15,100.	
C	Accounting	13,100.		13,100.	
d	Lobbying Professional fundraising services. See Part IV, line 17		· · · · · · · · · · · · · · · · · · ·		
e	Investment management fees				
f	50 00 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
9	column (A) amount, list line 11g expenses on Sch O.)	2,409.	ļ	2,409.	
12	Advertising and promotion	2/200.			
13	Office expenses	2,428.		2,428.	
14	Information technology				
15	Royalties				
16	Occupancy	10,704.		10,704.	
17	Travel	1,670.	1,670.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	33,660.	33,660.		
20	Interest				
21	Payments to affiliates	443,015.	443,015.		
22	Depreciation, depletion, and amortization	4,621.		4,621.	
23	Insurance	1,176.		1,176.	
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 0.)				
а	ODD TODAYO THE GOLD II O II	168,557.	168,557.		
b	COURT INDE	5,750.	5,750.		
c					
d					
е		14,399.		14,399.	
25_	Total functional expenses. Add lines 1 through 24e	862,185.	782,198.	79,987.	0
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined	,	i i		
	educational campaign and fundraising solicitation.				
	Check here I if following SOP 98-2 (ASC 958-720)		i		

Par	tΧ	Balance Sheet	<u> </u>		
		Check if Schedule O contains a response or note to any line in this Part X .			<u></u>
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	411,700.	2	484,121.
	3	Pledges and grants receivable, net	6,610.	3	6,610.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			* * * *
		trustees, key employees, and highest compensated employees Complete			34
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			* 3
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ø		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	250.	9	273.
	10a				
		basis. Complete Part VI of Schedule D 10a 230, 955.	W.		
	ь	Less: accumulated depreciation 10b 51,446.	184,130.	10c	179,509.
	11	Investments - publicly traded securities	61,578.	11	60,825.
	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	144.	15	227.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	664,412.	16	731,565.
	17	Accounts payable and accrued expenses	70,498.	17	74,301.
	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	
Š	22	Loans and other payables to current and former officers, directors, trustees,			1
Ě		key employees, highest compensated employees, and disqualified persons	,		- / -
Liabilities		Complete Part II of Schedule L .		22	
_	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 .	70 400	25	74 201
	26	Total liabilities. Add lines 17 through 25	70,498.	26	74,301.
	1	Organizations that follow SFAS 117 (ASC 958), check here ▶			
Ses	1	complete lines 27 through 29, and lines 33 and 34.			
auc	27	Unrestricted net assets		27	
Ba	28	Temporarily restricted net assets		28	
Ē	29	Permanently restricted net assets		29	
Ī		Organizations that do not follow SFAS 117 (ASC 958), check here			
S O		and complete lines 30 through 34.	593,914.	30	657,264.
set	30	Capital stock or trust principal, or current funds	0.		057,204.
As	31	Paid-in or capital surplus, or land, building, or equipment fund	0.		0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	593,914		657,264.
_	33	Total net assets or fund balances Total liabilities and not assets/fund balances	664,412		731,565.
	34	Total liabilities and net assets/fund balances		. 54	1 (31/303)

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	990 (2016) LOCAL # 1723, AFT / AFL-CIO	00-010	7000	Pag	<u>e 12</u>
Pai	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			•	
			0.21		2 E
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,5	
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u>85.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			<u>50.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	59.	3,9	<u> 14.</u>
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			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	<u>65</u>	7 <u>,2</u>	<u>64.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	:. ·	·		ᆜ
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				3
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			-
2a			2a	X	<u></u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			** \$^ \$
	separate basis, consolidated basis, or both:			ζ,	7. 2.2
	X Separate basis Consolidated basis Both consolidated and separate basis		\ \	1 /	ĺ
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basıs,	*	,	į
	consolidated basis, or both.			ж.	^
	Separate basis Consolidated basis Both consolidated and separate basis		,	,	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,	dhev		,
	review, or compilation of its financial statements and selection of an independent accountant?	-	2c	X	<u></u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	nedule O.		*	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S			s.	
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ured audit			
_	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		<u> </u>

Form **990** (2016)

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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.

2016

Open to Public 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

•	Section 501(c)(4), (5), or (6) organiza	tions, Complete Part III			
		FEDERATION OF	PEACHERS	Empl	oyer identification number
		1723, AFT / AFI			06-6107600
Pá	art I-A Complete if the org	anization is exempt un	der section 501(c)	or is a section 527 o	
ــــــــــــــــــــــــــــــــــــــ	······································	·			
1	Provide a description of the organiz	ation's direct and indirect politi	cal campaign activities		
2	Political campaign activity expendit	ures		▶\$	
3	Volunteer hours for political campai	gn activities			
Pa	art I-B Complete if the org	anization is exempt un	der section 501(c)	(3).	
1	Enter the amount of any excise tax	incurred by the organization ur	der section 4955		
2	Enter the amount of any excise tax	incurred by organization manag	gers under section 495	5 . ▶\$	
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	O for this year?		Yes No
4a	Was a correction made?		******		Yes No
_ t	of "Yes," describe in Part IV				
Pa	art I-C Complete if the org	janization is exempt un	der section 501(c)	, except section 501(c)(3).
1	Enter the amount directly expended	by the filing organization for s	ection 527 exempt fund	ction activities > \$	
2	Enter the amount of the filing organ	ization's funds contributed to c	other organizations for s	section 527	
	exempt function activities			▶\$	
3	Total exempt function expenditures	. Add lines 1 and 2. Enter here	and on Form 1120-POL	-,	
	line 17b			▶\$	
4	Did the filing organization file Form	1120-POL for this year?			Yes No
	Enter the names, addresses and er	-	EIN) of all section 527 p	olitical organizations to which	h the filing organization
	made payments. For each organiza				
	contributions received that were pr	omptly and directly delivered to	a separate political org	ganization, such as a separa	te segregated fund or a
	political action committee (PAC) If	additional space is needed, pro	ovide information in Pari	t IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	()	, ,	\-\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	filing organization's	contributions received and
			}	funds. If none, enter -0-	promptly and directly
					delivered to a separate political organization.
					If none, enter 0.
			- 		
		}			
			1		1
		 			
				 	
_		 		 	
			J	,	

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990 EZ) 2016 I Part II-A Complete if the organization	<u>LOCAL</u> anizatio	# 172 on is exe	3, AFT / AFT mpt under section	FL-CIO on 501(c)(3) and file	06-6 ed Form 5768 (e	107600 Page 2 lection under
section 501(h)).				 		
		•		n Part IV each affiliated	group member's nam	ne, address, EIN,
expenses, and share		, ,	•			
B Check ► if the filing organizat	ion check	ed box A ar	nd "limited control" pr	ovisions apply.	(a) Filing	(b) Affiliated group
		oying Expe leans amou	nditures ints paid or incurred	.)	organization's totals	totals
1a Total lobbying expenditures to influ	ence pub	lic opinion (grass roots lobbying)			
b Total lobbying expenditures to influ	ence a le	gislative boo	dy (direct lobbying)			
c Total lobbying expenditures (add lin	nes 1a an	d 1b)				<u> </u>
d Other exempt purpose expenditure	s .					<u> </u>
e Total exempt purpose expenditures	s (add line	s 1c and 1c	1)			
f Lobbying nontaxable amount. Ente	r the amo	unt from the	e following table in bo	th columns.		
If the amount on line 1e, column (a) or	r (b) is:	The lob	bying nontaxable an	ount is:	, , , ,	4.
Not over \$500,000		20% of	the amount on line 1e		, ,	1 1 1 1
Over \$500,000 but not over \$1,000	0,000	\$100,00	00 plus 15% of the ex	cess over \$500,000.	, , ,	
Over \$1,000,000 but not over \$1,50	00,000	\$175,00	00 plus 10% of the ex	cess over \$1,000,000.	, , , ,	
Over \$1,500,000 but not over \$17,0			00 plus 5% of the exce			, a ' , " "'A '
Over \$17,000,000		\$1,000,	000.		, ,	
						* * * * * *
i Subtract line 1f from line 1c. If zero j if there is an amount other than zer reporting section 4911 tax for this y (Some organizations the	ro on eithe year?	er line 1h or 4-Year Ave	eraging Period Under	r section 501(h)	of the five columns b	Yes No
			ate instructions for li			
	Lobi	oying Expe	nditures During 4-Ye	ar Averaging Period		
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					\$ 7	
(150% of line 2a, column(e))				<u> </u>	, , , , ,	
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))				, ,	,	
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990-EZ) 2016 LOCAL # 1723, AFT / AFL-CIO 06-6107600 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

(election under section 501(h)).

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: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, semmars, conventions, speeches, lectures, or any similar means? i Other activities? j Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If Yes,* enter the amount of any tax incurred by organization managers under section 4912 c If Yes,* enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization numer a section 4912 tax, did it left 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 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only inhouse lobbying expenditures of \$2,000 or less? 1 Did the organization make only inhouse lobbying and political exampain activity expenditures from the prior year? 3 X Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members Section 182(e) nondeductible lobbying and political expenses for which the section 527(f) tax was paid). 2 a Current year b Carryover from last year c Total 4 If notices were sent and the amount on line 2c	or ea	nch "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteer? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enfor the amount of any tax incurred under section 4912 d if the filing organization incurred a section 4912 tax, did if the 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). Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political cambain activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political cambain activity expenditures from the prior year? 1 Dues, assessments and similar amounts from members Section 162(e) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members Section 162(e) onondeductible lobbying and political expenses for which the section 527(f) tax was paid). 2 Current year 5 Cotal Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on			Yes	No	Amo	unt
tocal legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 d if the filing organization incurred a section 4912 tax, did if the Form 4720 for this year? Part IIII-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in house lobbying expenditures of \$2,000 or less? 2 Did the organization make only in house lobbying and political campaign activity expenditures from the prior year? 1 Dies, assessments and similar amounts from members Section 162(e) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes," 1 Dies, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenses for which the section 527(f) tax was paid). 2 Current year 2 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate	1	During the year, did the filing organization attempt to influence foreign, national, state or	7	, s		Ţ
or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total Add lines 1c through 11 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 d if the filing organization incurred a section 4912 to filing organization incurred by organization managers under section 4912 d if the filing organization incurred as ection 4912 tax, did if the 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). Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 1 Dues, assessments and similar amounts from members 2 2 X 2 Dues, assessments and similar amounts from members 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 2 2 Exection 1501(c)(5), or section 501(c)(6) and if either the organization is exempt under section 501(c)(6), section 501(c)(5), or section 501(c)(6) and if either the section 5027(f) tax was paid). 2 2 2 3 4 5 5 Exction 1502(e) ondeductible lobbying and political expenditures (do not include amounts of political		local legislation, including any attempt to influence public opinion on a legislative matter	· · · · · · · · · · · · · · · · · · ·	.*	*	2
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4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5	C	•	•			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5	3			3		
expenditure next year?	4			}		
5 Taxable amount of lobbying and political expenditures (see instructions) 5			a political		1	
	_	·			 	
Part IV Supplemental Information					<u> </u>	
			iup iist, rait ii	A, III 65 1	anu 2 (566	
	ınstrı	ctions); and Part II-B, line 1. Also, complete this part for any additional information.				
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1 Also, complete this part for any additional information.						
						
						
						•

SCHEDULE D

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990. Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. NORWALK FEDERATION OF TEACHERS

Employer identification number

Name of the organization LOCAL # 1723, AFT / AFL-CIO 06-6107600 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure □ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a a Total number of conservation easements b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax

- Number of states where property subject to conservation easement is located
- Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
- Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
 - In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and

include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenue included on Form 990, Part VIII, line 1
 - (ii) Assets included in Form 990, Part X
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a Revenue included on Form 990, Part VIII, line 1 . . .
- b Assets included in Form 990, Part X

Schedule D (Form 990) 2016

No

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

632051 08-29-16

NORWALK FEDERATION OF TEACHERS LOCAL # 1723. AFT / AFL-CIO

Sche		1723, AFT								Page 2
Par	t III Organizations Maintaining C	collections of A	rt, Hist	orical Tr	easures, or O	ther s	Simil	ar Asse	ts (continu	ed)
3	Using the organization's acquisition, accessi	on, and other record	ls, check	any of the	following that are	a signi	ficant	use of its	collection	items
	(check all that apply).									
а	Public exhibition	d		Loan or exc	hange programs					
b	Scholarly research	е		Other						
C	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ey further tl	ne organization's	exemp	t purpo	ose in Parl	t XIII.	
5	During the year, did the organization solicit o	r receive donations	of art, he	stoncal trea	sures, or other sir	nılar as	sets		_	
	to be sold to raise funds rather than to be ma	aintained as part of t	he orga	nization's co	ollection?				Yes	No
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the	organizatio	n answered "Yes'	on Fo	rm 990), Part IV,	line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the organization an agent, trustee, custod	an or other intermed	lary for	contribution	s or other assets	not inc	luded		_	
	on Form 990, Part X?				•				Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	able:						
									Amount	
C	Beginning balance .						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for 6	escrow or cu	ustodial account l	ability?	?		Yes	L No
b	If "Yes," explain the arrangement in Part XIII									<u> </u>
Par	t V Endowment Funds. Complete	f the organization ar	swered	"Yes" on Fo	orm 990, Part IV, I	ne 10.				
		(a) Current year	(b) P	nor_year	(c) Two years bac	k (d)	Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance									
ь	Contributions									
C	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance				<u> </u>				Ĺ	
2	Provide the estimated percentage of the cur	rent year end baland	e (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
C	Temporarily restricted endowment ▶	%								
	The percentages on lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	nd administered f	or the	organı	zation	_	
	by								<u> </u>	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization								3b	
4	Describe in Part XIII the intended uses of the		wment	<u>funds</u>						
Pai	t VI Land, Buildings, and Equipm									
	Complete if the organization answere									
	Description of property	(a) Cost or o			, ,	c) Accu		I .	(d) Book	value
		basis (investi	nent)		(other)	aepre	ciation	<u> </u>		
	Land				4,650.					,650.
	Buildings			8	6,400.	2	3,0	58.	63	<u>,342.</u>
	Leasehold improvements			 -						
	Equipment			2	9,905.	2	8,3	88.	1	<u>,517.</u>
	Other .			L						
Total	l. Add lines 1a through 1e. (Column (d) must e	egual Form 990. Part	X, colur	nn (B), line 1	10c)				179	,509.

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negule D (Form 990) 2016	LUCAL	**	1/43.	ALI	/	AFH

06-6107600 Page 3

(a) Description of security or category (including name of security)	(b) Book value	11b. See Form 990, Part X, line 12. (c) Method of valuation: Cost of	or end-of-year market valu
) Financial derivatives	 		· · · · · · · · · · · · · · · · · · ·
Closely-held equity interests			
Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			· · · · · · · · · · · · · · · · · · ·
(G)		<u> </u>	<u> </u>
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		<u> </u>	<u> </u>
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" or		11c See Form 990, Part X, line 13.	· · · · · · · · · · · · · · · · · · ·
(a) Description of investment	(b) Book value	(c) Method of valuation. Cost	or end-of-year market valu
(1)			
(2)		ļ.,	
(3)			
(4)			
(5)	 	ļ	
(6)			
(7)		 	
(8)		<u> </u>	
(9)		 	
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			. , , ,
Part IX Other Assets.			
Complete if the organization answered "Yes" o		11d. See Form 990, Part X, line 15.	(h) Book value
	escription	 	(b) Book value
	 		
(2)			
			
(4)			
(4) (5)			
(4) (5) (6)			
(4) (5) (6) (7)			
(4) (5) (6) (7) (8)			
(4) (5) (6) (7) (8) (9)	15)		
(4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line	15)		>
(4) (5) (6) (7) (8) (9) (otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.		a 11e or 11f. See Form 990. Part X. li	▶ ne 25
(4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of		11e or 11f. See Form 990, Part X, li	ne 25.
(4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the image of the complete in the organization of liability.			ne 25.
(4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the complete if the organization of liability (1) Federal income taxes			ne 25.
(4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the image of th			▶ ne 25.
(4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of a) Description of liability (1) Federal income taxes (2) (3)			▶ ne 25.
(4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the image of th			ne 25.
(4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the complete in the organization of liability (1) Federal income taxes (2) (3) (4) (5)			ne 25.
(4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the complete in the organization of liability (1) Federal income taxes (2) (3) (4) (5) (6)			ne 25.
(4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the complete if the organization of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)			▶ ne 25.
(4) (5) (6) (7) (8) (9) Otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the complete in the organization of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)			▶ ne 25.
(4) (5) (6) (7) (8) (9) Otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the organization of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)	on Form 990, Part IV, line		ne 25.
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of the image of t	25.)	(b) Book value	

LOCAL # 1723, AFT / AFL-CIO Schedule D (Form 990) 2016 06-6107600 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2 Net unrealized gains (losses) on investments 2a Donated services and use of facilities b 2b Recovenes of prior year grants 2<u>c</u> d Other (Describe in Part XIII) 2d e Add lines 2a through 2d Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIII) c Add lines 4a and 4b 40 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements 1 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a Prior year adjustments 2b Other losses 2c Other (Describe in Part XIII.) 2d e Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4, Part XI, line 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

23

Schedule D (Form 990) 2016

632054 08-29-16

SCHEDULE J (Form.990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Part I

NORWALK FEDERATION OF TEACHERS

Employer identification number LOCAL # 1723, AFT / AFL-CIO 06-6107600 **Questions Regarding Compensation**

			Yes	No_
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,		,	
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items		* * * *	
	First-class or charter travel Housing allowance or residence for personal use		-	1
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees		-1	
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			İ.
			٠,	1
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,		6	,
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
			7.4	,
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			, , ,
	CEO/Executive Director Check all that apply. Do not check any boxes for methods used by a related organization to	. 2		4
	establish compensation of the CEO/Executive Director, but explain in Part III.	, ,		į.
	Compensation committee Written employment contract	* * * * * * * * * * * * * * * * * * * *	***	
	Independent compensation consultant Compensation survey or study	* ,	, N.	1
	Form 990 of other organizations X Approval by the board or compensation committee		*	* .****
				ľ
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing	, ,	*	*
	organization or a related organization		» "\	**
а	Receive a severance payment or change-of-control payment?	4a		X _
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	ž* *		
			**	,i
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			- ş ,
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			1
а	The organization?	5a		1
b	Any related organization?	5b		
	If "Yes" on line 5a or 5b, describe in Part III.			,
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of.			
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			1
	not described on lines 5 and 6? If "Yes," describe in Part III	_7		<u> </u>
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9	ĺ	1

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2016

/ AFL-CIO LOCAL # 1723, AFT

Schedule J (Form 990) 2016

06-6107600

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(B) Breakdown o	(B) Breakdown of W.2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	eg eg	(E) Total of columns	<u> </u>
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive	(iii) Other reportable	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred
		compensation	compensation				
(3)	0						
	ı)						
(3)	0						
	()						
(5)	0						
(ii)	0						
(5)	(,
1)	9						
1)	9						
<u> </u>							
1)	(0)						
	(11)						
1)	(0)						
3	(i)						
	(ii)						
1)	(9)						
(0)	(ii)		3				
0	(1)						
(ii)	0						
			1				
(ii)	ū				, ,		
i)	8						
(ii)	ij				,		
(5)							
(ii)	ı)						
0	(3)						
			ı			Sched	Schedule J (Form 990) 2016

NORWALK FEDERATION OF TEACHERS LOCAL # 1723, AFT / AFL-CIO

Schedule J (Form 990) 2016 LOCAL # 1723, AFT / AFL-CIO

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Page 3

06-6107600

Schedule J (Form 990) 2016	

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. Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public

Department of the Treasury Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form 990. Internal Revenue Service

Inspection

NORWALK FEDERATION OF TEACHERS **Employer identification number** Name of the organization 06-6107600 LOCAL # 1723, AFT / AFL-CIO FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: SEE DETAILS IN SCHEDULE " O " EXPENSES \$ 333,433. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. FORM 990, PART III, LINE 4D: AMOUNT FOR " PROGRAM SERVICES " CONSISTS OF : 1) CHARITABLE CONTRIBUTIONS **1**,950 PAID TO THE FOLLOWING: A) KARA KOVLAKAS GO FUND = 1,000 B) CT HOSPICE = 200 C) WEST ROCKS MIDDLE SCHOOL = 250 D) CITY OF NORWALK - SUMMER YOUTH EMPLOYMENT PROGRAM = 500 2) OFFICERS' SALARIES - ALLOCATED 81,715 TO PROGRAM SERVICES 3) OTHER STAFF SALARIES - ALLOCATED 13,254 TO PROGRAM SERVICES 4) LEGAL FEES - INCURRED FOR PROGRAM SERVICES 32,627 5) STAFF TRAVEL EXPENSES, INCURRED FOR 1,670 FULFILLING PROGRAM SERVICES

Name of the organization NORWALK FEDERATION OF TEACHERS LOCAL # 1723, AFT / AFL-CIO		Employer identification number 06-6107600
		
6) CONFERENCES, CONVENTIONS, AND MEETINGS		
ATTENDED FOR PROGRAM SERVICES	33,	660
7) NEGOTIATION & ARBITRATION COSTS	47,	775
8) OFFICER'S SALARY REIMBURSE TO BOARD OF		
ED - ALLOCATED TO PROGRAM SERVICES	114,	329
9) DEATH BENEFIT PAYMENTS TO FAMILIES		
OF DECEASED MEMBERS	4,	000
10) MEMBER RETIREMENT GIFTS		176
11) SEVERANCE AWARDS TO FORMER MEMBERS	2,	, 227
TOTAL	333,	, 433
FORM 990, PART VI, SECTION A, LINE 6:		
THE FEDERATION HAS APPROXIMATELY 867 DUES PAYING	NG MEMBERS	CONSISTING OF 86
NFT CERTIFIED TEACHERS.		
FORM 990, PART VI, SECTION A, LINE 7A:		
FROM THE FEDERATION'S APPROXIMATE 867 MEMBERS,		
TEACHER MEMBERS HAVE THE RIGHT TO PARTICIPATE I		

Schedule O (Form 990 or 990-EZ) (2016) Page 2 Name of the organization NORWALK FEDERATION OF TEACHERS Employer identification number LOCAL # 1723, AFT / AFL-CIO 06-6107600 FORM 990, PART VI, SECTION A, LINE 7B: FROM THE FEDERATION'S APPROXIMATE 867 MEMBERS, ALL OF THE 867 NFT CERTIFIED TEACHER MEMBERS HAVE THE RIGHT TO PARTICIPATE IN THE VOTING TO APPROVE ANY SIGNIFICANT DECISIONS OF THE GOVERNING BOARD. FORM 990, PART VI, SECTION B, LINE 11B: A COPY OF FORM 990 IS PROVIDED TO THE NFT PRESIDENT, MARY YORDON, AND TO THE NFT TREASURER, HOWIE ZIPERSTEIN, TO REVIEW AND APPROVE ALL DISCLOSURES AND FINANCIAL INFORMATION REPORTED ON THE FORM. THE ENTIRE EXECUTIVE COMMITTEE IS PROVIDED A COPY AFTER FILING WITH THE IRS AND THE NATIONAL AND STATE AFFILIATES OF THE AFT. FORM 990, PART VI, SECTION B, LINE 15: THE FEDERATION HAS A BUDGET COMMITTEE THAT APPROVES THE COMPENSATION AMOUNTS PROPOSED BY THE TREASURER, AND THE GENERAL MEMBERSHIP VOTES ON THE FINAL APPROVAL OF SUCH AMOUNTS. FORM 990, PART VI, SECTION C, LINE 18: UPON REQUEST, THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE FOR PUBLIC INSPECTION. FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST, THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FORM 990 AVAILABLE TO THE PUBLIC. FORM 990, PART VIII, LINE 11A:

AMOUNT CONSISTS OF:

Schedule O (Form 990 or 990-EZ) (2016) Name of the organization NORWALK FEDERATION OF TEACHERS LOCAL # 1723, AFT / AFL-CIO		Employer identification numbe 06-6107600
CONTRIBUTIONS FOR SCHOLARSHIP FUND	6,600	· · · · · · · · · · · · · · · · · · ·
ADVERTISING FEE INCOME, FROM AFT, AFL-CIO	1,140	
TOTAL	7,740	
FORM 990, PART IX, LINE 24A, COLUMN B: AMOUNT FOR " PROGRAM SERVICES " CONSISTS OF T	HE FOLLOWI	NG ITEMS :
A) NEGOTIATION & ARBITRATIION COSTS		47,775
B) OFFICER'S SALARY REIMBURSE TO BOARD		
OF ED - ALLOCATED TO PROGRAM SERVICES		114,329
C) DEATH BENEFIT PMTS TO FAMILIES OF DECEASED) MEMBERS	4,000
D) MEMBER RETIREMENT GIFTS		176
E) SEVERANCE AWARDS TO FORMER MEMBERS		2,227
TOŢAL		168,557
		· · · · · · · · · · · · · · · · · · ·
		

(g) Section 512(b)(13) **Employer identification number** Open to Public Inspection OMB No 1545-0047 2016 Direct controlling Yes 06-6107600 entity Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Direct controlling entity End-of-year assets <u>e</u> status (if section Public charity 501(c)(3)) Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Information about Schedule R (Form 990) and its instructions is at www.lrs.gov/form990. Total income Related Organizations and Unrelated Partnerships Exempt Code **©** section 501(c)(5)Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Legal domicile (state or Legal domicile (state or foreign country) foreign country) ► Attach to Form 990. NATIONAL ORGANIZATION FOR FEDERATION OF TEACHERS Primary activity / AFL-CIO Primary activity 9 FEACHERS UNIONS AFT 1723, AMERICAN PEDERATION OF TEACHERS, AFL-CIO Name, address, and EIN (if applicable) 36-0725240, 555 NEW JERSEY AVE., N.W. NORWALK LOCAL Name, address, and EIN of related organization of disregarded entity DC 20001 Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R WASHINGTON (Form 990) Part I Part II

Schedule R (Form 990) 2016

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controlled

entity?

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

NORWALK FEDERATION OF TEACHERS LOCAL # 1723, AFT / AFL-CIO

Schedule R (Form 990) 2016

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. Part III

06-6107600

(a) Name, address, and EIN Primary activity dominication of related organization country	(b) Primary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	Predomina (related, u excluded fro	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets		ritonate ons?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing Partner? (5) Yes No	(j) (k) General or Percentage managing ownership Partner? Yes No) ntage rship
													
					<u>-</u>								
Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	ganizations Taxable a	is a Corpo	oration or Trust. Co	omplete if the	e organization	answered "Y	es" on Form 9	90, Part IV,	line 34 b	ecause it had	d one or	more rela	ted
(a) Name, address, and EIN of related organization	N:	Prim	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity		(e) Type of entity (C corp., S corp., or trust)	(f) Share of total income		(g) Share of end-of-year assets	(h) Percentage ownership	Sectontrice (i	Non (X13) olifed ty?
				-									
							-	:		1			
				-									
632162 09-08-16				32						Sched	ule R (F	Schedule R (Form 990) 2016	2016

NORWALK FEDERATION OF TEACHERS LOCAL # 1723, AFT / AFL-CIO

Page 3

06-6107600

Schedule R (Form 990) 2016

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				>	Yes	ဍ
1 Durng the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	with one or more re	lated organizations listed	in Parts II-IV?		\dashv	-
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a	-	×
b Gift, grant, or capital contribution to related organization(s)				đ		×
c Gift, grant, or capital contribution from related organization(s)				10	×	
d Loans or loan guarantees to or for related organization(s)				Þ		×
				4	-	×
				2	-	:
P. Dindands from coloring to the coloring to the color				,	-	- - - - - - - - - - - - - - - - - - -
T Dividerius Horn refered digalitzation(s)				=	+	4
g Sale of assets to related organization(s)				19	+	×
h Purchase of assets from related organization(s)				£	-	×
i Exchange of assets with related organization(s)				;=		×
j Lease of facilities, equipment, or other assets to related organization(s)				<u>;</u> -	-	×
				<u> </u>		
k Lease of facilities, equipment, or other assets from related organization(s)				¥	\dashv	×
1 Performance of services or membership or fundraising solicitations for related organization(s)	nization(s)			=	-	×
m Performance of services or membership or fundraising solicitations by related organization(s)	ıızatıon(s)			Ę	\dashv	×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	on(s)			두	\dashv	×
 Shanng of paid employees with related organization(s) 				9	\dashv	×
					i i	;
p Reimbursement paid to related organization(s) for expenses				1	1	×
q Reimbursement paid by related organization(s) for expenses				19	-	×
r Other transfer of cash or property to related organization(s)				1		×
				45		×
L I	ho must complete th	is line, including covered	relationships and transaction thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	volved		
(1) AMERICAN FEDERATION OF TEACHERS - CT	D	25,000.	25,000.CASH RECEIVED			
(2) - GENERAL, GRANT FOR PAYROLL ASSISTANCE		Ö				
(3) AMERICAN FEDERATION OF TEACHERS - NATIONAL	ט	3,600.CASH	CASH RECEIVED		}	
(4) - ORGANIZATION ASSISTANCE PROGRAM		0.				1
(5)				j		Ì
· ·						
632163 09-06-16	33		Schedule R (Form 990) 2016	R (Form	990)2	92

Page 4 06-6107600

NORWALK FEDERATION OF TEACHERS LOCAL # 1723, AFT / AFL-CIO

Schedule R (Form 990) 2016

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

	1	ı	1	1	1		, .
(k) Percentage ownership							
(j) neral or naging utner? s No							
Ger 1 Pa			1		 		
(h) (i) (j) (k) (k) (k) Ospropor Code V-UBI General or Percentage allocations? of Schedule K-1 partner? ownership Yes No (Form 1065) Yes No							
opor- ate ions?			-		 		
Dispropulational							
(g) Share of end-of-year assets						1	
(f) Share of total							
(e) Are all Are all 501(c)(3) Orgs? Ares No							
Partne 501		_					
(d) Predominant income proceed (related, unrelated, excluded from tax under sections 512-514)							
(c) Legal domicile (state or foreign country)							
(b) Primary activity							
(a) Name, address, and EIN of entity							

Schedule R (Form 990) 2016

Schedule R	(Form 990) 2016	LOCAL #	1723,	AFT /	AFL-CIO		<u>06-6107600</u>	Page 5
Part VII	(Form 990) 2016 Supplemental Info	ormation.						
	Provide additional inforr	mation for response	es to questio	ons on Sch	edule R. See instructions.			
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