

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2017

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made publication **Open to Public** ► Go to www.irs.gov/Form990 for instructions and the latest information.

Ā	For the	2017 cale	endar year, or tax year	beginning	July	1	, 2017, a	ınd endi	ng	Jun	e 30	, 20 18	
В	Check if	applicable	C Name of organization	Scranton F	ederation of 1	Teachers/AF	T Local#	/ 1147			D Employ	er identification	number
	Address	change	Doing business as So	ranton Fed	deration of Te	achers, AFT	Local #1	147				23-6298769	
	Name ci	nange	Number and street (or	PO box if ma	ail is not delivere	d to street add	lress)	Room/s	uite		E Telepho	ne number	-
	Initial ref	turn	431 Wyoming Avenu	e						ı		570-343-3911	
	Final return/terminated City or town, state or province, country, and ZIP or foreign postal code												
	Amende		Scranton, PA 18503	-1228						I	G Gross r	eceipts \$	565,803
$\overline{\Box}$			F Name and address of p		er. Rosemar	y Boland, Pr	esident		H(a) is	this a gro	oup return for	subordinates? Ye	s 🗹 No
_		J	929 Hickory St. Scra					~ 5				s included? 🔲 Ye	
1	Tax-exe	mpt status	501(c)(3)	☑ 501(c) (rt no) 494	7(a)(1) or	1 327				a list (see instruct	
J	Website		<u> </u>		/		V-71 7		H(c) (Group	exemption	number >	0787
K	Form of	organization	Corporation Trust	Associa	tion ☑ Other ►	Union	L Yea	ar of forma	ation 1	952	M State	of legal domicile	PA
P	art I	Summ	 -				(
_	1		escribe the organizat	ion's miss	ion or most s	ignificant a	ctivities:	Repre	sentatio	n of tl	ne organ	izatıon's	
စ္ပ		-	in Scranton, PA			_							
ğ													
σē	2	Check th	nis box ▶ 🗌 if the org	anızation	discontinued	its operation	ons or di	sposed	of more	than	25% of	ıts net assets	
줧	3		of voting members of					./\			3		22
્રૈજ	4		of independent votin	-			-	line 1b	λ		4		18
es les	5		mber of individuals e	_	_						5		4
~ <u>₹</u>	6		mber of volunteers (e		•		/:.\Y	// . \	(2)		6		20
₹5	7a		related business reve			ımn (C), line	12.	8.	100/		7a		0
Ξ	Ь		lated business taxab				4)/	50,18	/a .) .	7b		0
SEANINED MARK 117 & 2019						7 4.4	(N	7	1 PF	ior Ye	ar	Current	Year
Ë	8	Contribu	tions and grants (Pa	rt VIII, line	1h)	.\<.	KOY N	1.2	$\overline{}$		39,523		35,521
Zž	9		service revenue (Pa			//	M. /.	(\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		_	529,979		512,839
A §	10	•	ent income (Part VIII,			and 7d)	\ <u>\</u> .C	3.7.7			1,659		1,666
(Å	11		venue (Part VIII, colu				11e)	/			12,443		15,777
U)	12		enue—add lines 8 thr					ne 12)			583,604		565,803
_	13		nd similar amounts p								3,000		4,000
	14		its paid to or for members (Part IX, column (A), line 4)								0		0
v	15		other compensation,	•			A), lines	5–10)			202,654		207,681
JSe	16a		onal fundraising fees								0		0
Expenses	Ь		draising expenses (F	-				0				· ·· - ·	_
ũ	17	Other ex	penses (Part IX, colu	ımn (A), lin	es 11a-11d,	11f-24e)					400,631		402,803
	18		penses. Add lines 13), line 25	i) . [606,285		614,484
	19	•	less expenses. Sub		•			ľ			-22,681		-48,681
- 20	3		<u> </u>						Beginning	of Cui	rent Year	End of Y	ear ear
sets	20	Total ass	sets (Part X, line 16)					[461,916		417,107
ASS	21	Total liab	pilities (Part X, line 26	5)				[265,755		269,627
Net Assets or	22	Net asse	ets or fund balances.	Subtract I	ine 21 from li	ne 20 .		[196,161		147,480
₽	art II	Signa	ture Block										
Ur	nder pena	Ities of perju	ury, I declare that I have ex	amined this i	return, including	accompanying	schedules	s and state	ements, an	d to th	e best of	my knowledge ar	nd belief, it is
tru	e, correc	t, and comp	lete Declaration of prepar	er (other than	officer) is based	l on all informa	tion of whic	ch prepare	er has any	knowle	edge.		
			Peni K	and.	_						11-15	-18	
Sig	gn	Sign	nature of officer	X						Dat	e		
He	ere	N	KENIN KI	145									
		Тур	e or print name and title										
Ps	nid	Print/Ty	pe preparer's name		Preparer's sign	ature		D	ate		Check	☐ if PTIN	
	epare	r									self-em	ployed	
	se On	1	name ►							Firm	's EIN ▶		
		Firm's a	address ►							Pho	ne no.		
Ma	ıy the II	RS discus	s this return with the	preparer :	shown above	? (see instr	uctions)						es 🗌 No
For	Papen	vork Redu	ction Act Notice, see	the separa	te instruction	s.		Cat	No 11282	Υ		Form	990 (2017)

Part 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 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 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	~	V
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		NA
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	٧	
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		,
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	;	,
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		~
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		/
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	/	
	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		,
	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		,
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		,
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		v
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		,
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		•
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	-	,
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		~
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		~
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		~

Ves. No. Ves. No. Ves. No. Ves. No. Ves. No. Ves.	Part	V Checklist of Required Schedules (continued)								
b II "Ves" to line 20a, did the organization attach a copy of its audited financial statements to this return? 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 17 If "Yes," complete Schedule I, Parts I and III 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 27 If "Yes," complete Schedule I, Parts I and III 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule II, Part I and III 24 Did the organization and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule II, Part I was issued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule II. Part I was susued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule II. Part I was usued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule II. Part I was recommended and a second of the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule II. Part I I was an an one beath of "issuer for bonds outstanding at any time during the year? 25 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization spend and a second second on any of the organization engage in an excess benefit transaction with a disqualified persons? If "Yes," complete Schedule II. Part IV 26 Id the organization apart that tengaged in an excess benefit transaction with a disqualified persons? If "Yes," complete Schedule II. Part IV 27 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, director, tru				Yes	No					
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 21 If "Yes," complete Schedule I, Parts I and III. 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 21 If "Yes," complete Schedule I, Parts I and III. 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002 If "Yes," answer lines 240 through 24d and complete Schedule IX. If "No," go to line 25a to 10 the organization maintain an acsrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24b Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25c Section 501(c(3), 501(c)4), and 501(c)2) organizations. Did the organization engage in excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I. Part II. 25c Section 501(c)3), 501(c)4), and 501(c)2) organizations. Did the organization engage in excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I. Part II. 26c Did the organization are that the nagged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I. Part II. 27c Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, or disqualified persons? If "Yes," complete Schedule II. Part III. 28c Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, or disqualified persons? If "Yes," complete Schedule II. Part IV. 29c Did the organization provide a grant or other assistance to an officer, director, trustee, or key empl	20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~					
domestic government on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		~					
22 V 23 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and foremer officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 24 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," yo to line 25s 25a Did the organization maintain an escrow account other than a refunding escrow at any time during the year of the organization with an adsulated person of trustees, and a strength of the organization act as an "on behalf of" issuer for bonds beyond a temporary period exception? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization excess benefit transaction with a disqualified person of uning the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization excess benefit transaction with a disqualified person of uning the year? 25b Jip 25c Did the organization aware that it engaged in an excess benefit transaction with a disqualified person on any of the organization organization approach any of the organization organization approach any of the enganization organization approach any of the enganization organization approach any of these persons? If "Yes," complete Schedule L, Part IV 25c Did the organization april to a business transaction with one of the following parties (see Schedule L, Part IV 26c A neithy of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27c An entity of which a current or former officer, director, trustee, or key emp	21									
Part IX, column (A), line 27 II "Yes," complete Schedule I, Parts I and III 23 Did the organization answer "Yes" to Part VII, Section A, Iline 3, 4, or 5 about compensation of the organization invest and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J, "Part II" (This," or Join Image 25s b) Did the organization invest any proceeds of tax-exempt bond seue 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 I, "Part I" ("No," or Join Image 25s b) Did the organization and sain or in behalf of "issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? "I" "No," or Join Image 25s 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 I, Part II b) Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? If "Yes," complete Schedule I, Part II b) Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? If "Yes," complete Schedule I, Part II b) Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? If "Yes," complete Schedule I, Part II b) Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? If II' Yes, "complete Schedule I, Part II c) Is the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? If I''s complete Schedule I, Part II c) If the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, director, trustee, key employees, highest compensated employees, or disqualfied persons If "Yes," complete Schedule I, Part II c) In t			21		~					
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organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 23		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		~					
employees? If "Yes," complete Schedule J. 23 V 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 25 Did the organization miset any proceeds of tax-exempt bonds beyond a temporary period exception? 26 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 27 Did the organization and so (1c)(1,5) of (1c)(4), and 50 (1c)(26) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 28 Section 50 (1c)(5), 50 (1c)(4), and 50 (1c)(26) organizations. Did the organization engage 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 prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I I. 29 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 III II. 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV II. 29 A current or former officer, director, trustee, or key employees (ir "Yes," complete Schedule L, Part IV II. 29 Lift he organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule R. Part IV II. 30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule R. Part II. 31 Lift he organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule R. Part II. 31 Did the organization selled to any tax-exempt or taxable entity? If "Yes," complete	23		ľ		ľ					
Dot 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 b. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c. Did the organization aniantan an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d. Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year? 4dd V. Section 501(e)(3), 501(e)(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 II 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-E27 If "Yes," complete Schedule L, Part II (If "Yes," complete Schedule L, Part II (If If I										
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b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 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? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3), and 501(c)(24), 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 . b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a proveyer, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I I. 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 I. 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): A current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director,			ĺ		١.					
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conservation contributions? If "Yes," complete Schedule M			29		~					
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30			1						
Part I			30		~					
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31									
complete Schedule N, Part II 32	20		31							
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sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	·	32		-					
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	33		22		,					
or IV, and Part V, line 1	34	·	33							
Did the organization have a controlled entity within the meaning of section 512(b)(13)?	04		34	v						
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2. 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. 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. 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	35a		-	<u> </u>	~					
controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			000							
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related organization? If "Yes," complete Schedule R, Part V, line 2	36		1 1							
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and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	·								
Part VI										
		Part VI	37		~					
19? Note. All Form 990 filers are required to complete Schedule O.	38									
		19? Note. All Form 990 filers are required to complete Schedule O.	38	~						

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Form 99	90 (2017)			Page :
Part	V Statements Regarding Other IRS Filings and Tax Compliance			3-
	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 3	A	,.	1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1	1 4	,
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	1 :		1
	reportable gaming (gambling) winnings to prize winners?	1c	~	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	Ţ.		1
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 4		_	١.,
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	V	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		<u>, </u>	,
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		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	L	MA
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	<u> </u>	~
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		'	
e-	(FBAR).	- 15 	<u> </u>	الله ا
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		V
b c	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		NA
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		1/4/7
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	/	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Ca	<u> </u>	+
-	gifts were not tax deductible?	6b	1	
7	Organizations that may receive deductible contributions under section 170(c).		7.	 ,
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	, 1	•	
	and services provided to the payor?	7a		NA
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		NC
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		NA
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		NA
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		NA
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		NA
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		NA
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			1
•	sponsoring organization have excess business holdings at any time during the year?	8		MA
9	Sponsoring organizations maintaining donor advised funds.	انست		4

	Did the diganization have differenced business gross income of ψ1,000 of more during the year;	Ja	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		MA
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		1
b	If "Yes," enter the name of the foreign country: ▶	,	i.	
	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		V
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		NA
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	~	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			j
	gifts were not tax deductible?	6b	~	
7	Organizations that may receive deductible contributions under section 170(c).		1.	,
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	1, .		
	and services provided to the payor?	7a		NA
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		NO
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			—
	required to file Form 8282?	7c		NA
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		NA
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		NA
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		NA
ĥ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		WA
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7		,,,,,
	sponsoring organization have excess business holdings at any time during the year?	8		NA
9	Sponsoring organizations maintaining donor advised funds.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ı	
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		NA
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		NA
10	Section 501(c)(7) organizations. Enter:	1		
а	Initiation fees and capital contributions included on Part VIII, line 12	,		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1		
11	Section 501(c)(12) organizations. Enter:	₫ :		•
а	Gross income from members or shareholders		.*.	ļ ·
b	Gross income from other sources (Do not net amounts due or paid to other sources	1 .	1 ,	
	against amounts due or received from them.)	7, 1		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	~	NA
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	,	F	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1 , 1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		WA
_	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	1.		' '
С	Enter the amount of reserves on hand	+		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		MPY
	1. Too, has terred a form the to report these payments. In the provide an explanation in defication			(2017)

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	See in:	struct	
<u>Secti</u>	on A. Governing Body and Management			,
		\[\(\bar{\alpha}\)	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.		3	
ь 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 any other officer, director, trustee, or key employee?	2	1:5	V
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		,
4 5 6 7a	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? Did the organization have members or stockholders? 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?	4 5 6	<i>y</i>	<i>V</i>
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 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		f.,, d-
a b 9	The governing body?	8a 8b	7	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	000 1	~
Secu	on B. Policies (This Section B requests information about policies not required by the Internal Rever	iue C	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		~
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	_	NA
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		~
b 12a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a 12b	\	19.19
c	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	; '	V V
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		<u> </u>
b	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	-	NA
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ► 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.	า 501(c)(3)s	only)
19 20	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. State the name, address, and telephone number of the person who possesses the organization's books and re			, and
	Kevin Kays 431 Wyoming Ave , Scranton, PA 18503 570-343-3911			

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Form 990 (2017)

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 no	r any relate	d org	aniz	zatio	on c	ompe	nsa	ited any currer	t officer, directo	r, or trustee.
				(C)					
(A)	(B)	/			sition	e than o		(D)	(E)	(F)
Name and Title	Average	ı				ıs both		Reportable	Reportable	Estimated
	hours per week (list any	office	er an			or/trust	tee)	compensation from	compensation from related	amount of other
	hours for related organizations below dotted line)		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) Rosemary Boland	60 hours									
President	†			1		~		24,000	o	0
(2) Matt Loftus	20 hours									
First Vice President	<u> </u>	1		~				21,600	o	0
(3) Pat Festa	15 hours									
2nd Vice President				~				8,334	0	0
(4) Kevin Kays	20 hours									
Secretary-Treasurer				1	1	L	_	21,600	0	0
(5) Vince Wojnar	5 hours						1	i		
3rd Vice President				~	ļ			0	0	0
(6) Jennifer Telesco	2 hours					}]		
Trustee		~			_			0	0	0
(7) Jerry Baldauff	2 hours									
Trustee		~			L			0	0	0
(8) Ted Anderson	2 hours									
Trustee		~					_	0	0	0
(9) Steve Bartnicki	2 hours									
Executive Committee	<u> </u>	~						00	0	
(10) Dave Powell	2 hours									
Executive Committee	<u> </u>	~		<u> </u>	<u> </u>		<u>_</u>	0	0	0
(11) Vince Amico	2 hours		l					}		
Executive Committee		~						0	0	0
(12) Dan Walter	2 hours							ļ		
Executive Committee		~	<u> </u>	_				0	0	0
(13) Ann Geiger	2 hours									
Executive Committee	ļ	~	<u> </u>	_	_			0	0	0
(14) Mary Delmar	2 hours									
Executive Committee		~		L			L	0	0	0

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1000	VII Section A. Officers, Directors, Trust	tees, key =	mpio	yee		na r	ligne	<u>st u</u>	ompensated =	:mployees (corre	(inuea)
	(A)	(B)			Pos	sition			(D)	(E)	(F)
	Name and title	Average	1 '				e than o		Reportable	Reportable	Estimated
		hours per	office				tor/trust		compensation	compensation from	m amount of
		week (list any hours for	유급	3	₽	<u>\$</u>	en H	Ę	from the	related organizations	other compensation
		related	direc		Officer	Key employee	hes	Former	organization	(W-2/1099-MISC)	from the
		organizations below dotted	당a	iona		盲	èe co]	(W-2/1099-MISC)		organization and related
		line)	Individual trustee or director	Institutional trustee		yee	mpe				organizations
			8	stee			Highest compensated employee				
3	Francis Regan	2 hours		\forall	\vdash	\vdash		\vdash			
	itive Committee	<u> </u>	-	<u> </u>	₩	ـــ		\vdash	0	<u> </u>	0 0
3	Kathleen Beckwith	2 hours	٠,						1		_
	Itive Committee	-	· ·	₩'	├—	\vdash		\vdash	0		00
	Marissa Byron	2 hours	٠,			'	'			 	_
	Itive Committee	2 hours	-	₩	\vdash	 	 	\vdash	0		0 0
2f	Lisa Ross Itive Committee	2 hours		1			'		0	ļ ,	o
	Jennifer Zaleski	2 hours	+	+	\vdash	 	 	┼─	 	,	
J	itive Committee	2 110ui 3	1		1				o	1,	0
(20)	tive Committee	 	一	\vdash	\vdash	一	├─	\vdash	 	<u> </u>	
<u>\</u>		†	1		'	1	!				
(21)			<u> </u>						-		
(22)		 		\forall	\vdash	\vdash	 	 	 		
			'				<u> </u> '				
(23)											
(24)											
(25)											
1b	Sub-total			<u>.</u>	-	•	· .		75,534	(0 0
С	Total from continuation sheets to Part		n A					>	0		0 0
d	Total (add lines 1b and 1c)		<u> </u>	<u>. </u>		<u> </u>	<u> </u>	<u> </u>	75,534	(0
2	Total number of individuals (including but reportable compensation from the organi	t not limited						e) w	ho received mo	ore than \$100,0)00 of
			,						· to all		Yes No
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete S</i>							mp	oloyee, or high	est compensat	
A	• •									tion from	. 3 V
4	For any individual listed on line 1a, is the organization and related organizations	sum of rep	poπa:	318 (150	COLL	iper <i>ו</i> כי	isatio f "Va	n a	nd other comp	ensation from	the ch
	individual	greater un	dπ ψ.	100,	000	15 11	160	٥,	Complete Sch	edule o loi sa	. 4
5	Did any person listed on line 1a receive o	vr accrue co	 hmpe	nsat	tion	fro	m an√	un.	related organiz	· · · · · · ·	
3	for services rendered to the organization?										
Section	on B. Independent Contractors	· · · · · · · · · · · · · · · · · · ·									
1	Complete this table for your five highest of	compensat	.ed inc	depr	end	ent	contr	acto	ors that receive	ed more than \$1	100,000 of
	compensation from the organization. Repyear.										
	(A) Name and business add	Iress							(B) Description of se	ervices	(C) Compensation
N/A				_		_					· · · · · · · · · · · · · · · · · · ·
					_						
							!	 			
								 			
	Total number of independent contracto	re (includir	og bi	it n	ot I	limit	ed to	L th	ose listed abo	ave) who	·
_	received more than \$100,000 of compensation							,	0	740, 4110	

Pari	VIII	Statement of Revenue					<u></u>
		Check if Schedule O contains a res	ponse or note to	any line in this	Part VIII		🛚
	•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Grants	1a b	Federated campaigns 1a Membership dues 1b	0				
is, Gifts, imilar Ai	d e	Fundraising events 1c Related organizations 1d Government grants (contributions) 1e	22,305 0				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above 1f Noncash contributions included in lines 1a-1f \$	13,216				
Con	g h	Total. Add lines 1a–1f	> 1	35,521			
			Business Code				
Program Service Revenue	2a	Dues Income	900099	512,839			
Ce H	b		_	0			
ervi	d d			0			
m S	e			0			
gra	f	All other program service revenue.		0			
P.	g	Total. Add lines 2a-2f	▶	512,839			
	3	Investment income (including divident					
		•	•	1,666	0	0	1,666
	4 5	Income from investment of tax-exempt be		0			
	,	Royalties	(II) Personal				
	6a	Gross rents					j
	b	Less. rental expenses					ı
	С	Rental income or (loss)					
	d	Net rental income or (loss)	•	0			
	7a	Gross amount from sales of (i) Securities	(II) Other				:
		assets other than inventory					i
	b	Less: cost or other basis and sales expenses . Gain or (loss)					
	c d	Net gain or (loss)	<u> </u>	0			
nue		Gross income from fundraising					
Other Revenue		events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a					
the	_	Less: direct expenses b					
0		Net income or (loss) from fundraising	events .	0			
		Gross income from gaming activities. See Part IV, line 19 a					
		Less: direct expenses b					
		Net income or (loss) from gaming acti	vities ▶	0			
	10a	Gross sales of inventory, less returns and allowances a	Í				
	b	Less: cost of goods sold b					
	С	Net income or (loss) from sales of inve		0			
		Miscellaneous Revenue	Business Code			·	
	11a	Conference Reimbursements	900099	207			
		ER&D Class Income	900099	15,570			
	C	All other revenue		0			 -
	d	All other revenue	•	15,777			
ł	-	Total revenue See instructions		565.803		0	1,666

Par	IX Statement of Functional Expenses				· · · · · · · · · · · · · · · · · · ·
Section	on 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respons				
8b, 9t	ot include amounts reported on lines 6b, 7b, o, 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	0			
2	Grants and other assistance to domestic individuals. See Part IV, line 22	4,000			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0			
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	156,282			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	27,808			
9	Other employee benefits	8,584			
10	Payroll taxes	15,007			
11	Fees for services (non-employees):				
а	Management	0			
b	Legal	34,976			····
C	Accounting	1,200			
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
40	- 1	0			
12	Advertising and promotion	5,605			
13	Office expenses	5,605	<u></u>		
14	Information technology	0			
15 16	Royalties	17,463	-		
16 17	Occupancy	25			
18	Travel	25			
10	for any federal, state, or local public officials	o			
19	Conferences, conventions, and meetings .	4,615			
20	Interest	0			
21	Payments to affiliates	313,044			· · · · · · · · · · · · · · · · · · ·
22	Depreciation, depletion, and amortization .	0			
23	Insurance	518			
24	Other expenses. Itemize expenses not covered				•
_7	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.)	٠, ٥			
а	Member Communications	16,949			
b	ER&D Class Expenses	4,392			
c	Contributions	2,580			
d	Miscellaneous Expenses	1,436			-
e	All other evidences	0	_		
25	Total functional expenses. Add lines 1 through 24e	614,484			
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)	o			

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	rt X	<u> </u>	<u> </u>
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	41,186	1	41,948
	2	Savings and temporary cash investments	334,039	2	287,513
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	84,954	4	83,020
	5	Loans and other receivables from current and former officers, directors,			,
		trustees, key employees, and highest compensated employees.		<u> </u>	9,
		Complete Part II of Schedule L	0	5	0
	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			, in
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			<u>''</u>
sts		organizations (see instructions). Complete Part II of Schedule L	0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
4	8	Inventories for sale or use	0	8	0
i	9	Prepaid expenses and deferred charges	1,737	9	4,626
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 46,459		125	a.
		· · · · · · · · · · · · · · · · · · ·	0	10c	
	b		0	11	0
	11 12	Investments—publicly traded securities	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	461,916	16	417,107
	17	Accounts payable and accrued expenses	265,755	17	269,627
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	0
es	22	Loans and other payables to current and former officers, directors,			
Ħ		trustees, key employees, highest compensated employees, and		· <u> </u>	
Liabilities		disqualified persons. Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	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	o	25	0
	26	Total liabilities. Add lines 17 through 25	265,755		269,627
		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and		-;	
es		complete lines 27 through 29, and lines 33 and 34.		•	<u> </u>
anc	27	Unrestricted net assets	196,161	27	147,480
Bal	28	Temporarily restricted net assets	0	28	0
둳	29	Permanently restricted net assets	0	29	0
Ē		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and	* * 1 * 2 * 4 * * * * * * * * * * * * * * * *		Agents against and
ō		complete lines 30 through 34.		4	
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds	0	30	0
SS	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
it A	32	Retained earnings, endowment, accumulated income, or other funds.	196,161	32 33	147,480
ž	33	Total net assets or fund balances	461,916		417,107
	34	Total liabilities and net assets/fund balances	401,710		Form 990 (2017)

Par	Reconciliation of Net Assets			
	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)		56	5,803
2	Total expenses (must equal Part IX, column (A), line 25)		61	4,484
3	Revenue less expenses. Subtract line 2 from line 1		-48	8,681
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4		190	6,161
5	Net unrealized gains (losses) on investments			0
6	Donated services and use of facilities			0
7	Investment expenses			0
8	Prior period adjustments			0
9	Other changes in net assets or fund balances (explain in Schedule O)			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			_
	33, column (B))		147	7,480
<u>Part</u>	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>	<u> </u>	
		<u></u>	Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		٠, ١٤	".:J
	If the organization changed its method of accounting from a prior year or checked "Other," explain	in [F]	- S	
	Schedule O.		-	,
2a	· · · · · · · · · · · · · · · · · · ·		- 1	V
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or	or 🚎		
	reviewed on a separate basis, consolidated basis, or both:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		- 1
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			Ψ,
b	Were the organization's financial statements audited by an independent accountant?	. 2b		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on separate basis, consolidated basis, or both:	a .	'. at	· ;
		- 1	* *	,
	Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		<u> </u>	لنت
С	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	.		NA
	If the organization changed either its oversight process or selection process during the tax year, explain i		70.15. 1	/
	Schedule O.	11 12 4		4.
20	As a result of a federal award, was the organization required to undergo an audit or audits as set forth i	.n		
3a	the Single Audit Act and OMB Circular A-133?	"' _{3a}		/
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
D	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		NA
	Toganisa addition addition of the state of t		n 990	
		1 011	555	(2017)

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

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. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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

• Se	ection 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Name	of organization			Employer ide	ntification number
Scran	ton Federation of Teachers/	AFT Local #1147			23-6298769
Part	I-A Complete if the	e organization is exempt und	er section 501(c) or is a section 527	organization.
1	Provide a description of definition of political car	f the organization's direct and in npaign activities")	direct political ca	mpaign activities in Par	t IV. (see instructions for
2		y expenditures (see instructions)			16,197
3		cal campaign activities (see instruc			
Part	I-B Complete if the	e organization is exempt und	er section 501(c)(3).	
1	Enter the amount of any	excise tax incurred by the organization	ation under section	n 4955 ▶ 🤄	
2	Enter the amount of any	excise tax incurred by organization	n managers under	section 4955 ▶ \$	3
3	If the organization incurre	ed a section 4955 tax, did it file Fo	rm 4720 for this ye	ear?	
4a					Yes No
b	If "Yes," describe in Part				
Part		e organization is exempt und			(c)(3).
1	Enter the amount direct activities	ly expended by the filling organiz	zation for section	527 exempt function	;
2	Enter the amount of the	filing organization's funds contrib	outed to other org	anizations for section	
		vities			
3	Total exempt function e	expenditures. Add lines 1 and 2	. Enter here and	on Form 1120-POL,	
4	Did the filing organization	n file Form 1120-POL for this year	?		Yes No
5	organization made payme the amount of political co	ses and employer identification nu- ents. For each organization listed, ontributions received that were pro- fund or a political action committe	enter the amount mptly and directly	paid from the filing organ delivered to a separate p	ization's funds. Also enter political organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing 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)					

Pai	t II-A	Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).									
A	Check ►	if the filing organization bel address, EIN, expenses, ar				iliated group memb	oer's name,				
B (Check ▶	☐ If the filing organization che	ecked box A and	l "limited control" p	rovisions apply.						
			bbying Expend			(a) Filing	(b) Affiliated				
		(The term "expenditures"	means amount	s paid or incurred	l.)	organization's totals	group totals				
18	a Total lo	obbying expenditures to influen	ce public opinio	n (grass roots lobb	ying)		- · · · · · · · · · · · · · · · · · · ·				
ŀ	Total lo	obbying expenditures to influen	ce a legislative b	oody (direct lobbyir	ng)						
(Total lo	obbying expenditures (add lines	s 1a and 1b) .								
(d Other	exempt purpose expenditures									
•	Total e	xempt purpose expenditures (a	add lines 1c and	1d)							
1	Lobbyi columi	ng nontaxable amount. Ente	r the amount	from the following	g table in both						
	If the ar	nount on line 1e, column (a) or (b)	is: The lobbyin	g nontaxable amou	nt is:	و اس م	3 4				
	Not ove	r \$500,000	20% of the a	amount on line 1e.							
	Over \$5	00,000 but not over \$1,000,000	\$100,000 plu	us 15% of the excess	over \$500,000.	'					
	Over \$1	,000,000 but not over \$1,500,000	\$175,000 plu	us 10% of the excess	over \$1,000,000.]` . ' .					
	Over \$1	,500,000 but not over \$17,000,000	\$225,000 plu	us 5% of the excess	over \$1,500,000.	ļ , i					
	Over \$1	7,000,000	\$1,000,000.								
(Grassr	oots nontaxable amount (enter	25% of line 1f)								
ŀ	n Subtra	ct line 1g from line 1a. If zero o	r less, enter -0-								
i	Subtra	ct line 1f from line 1c. If zero or	less, enter -0-								
j		e is an amount other than ze ng section 4911 tax for this ye		e 1h or line 1i, di			Yes No				
	(Som	e organizations that made a s See t	section 501(h) e he separate ins	tructions for lines	ve to complete all 2a through 2f.)	of the five colum	ns below.				
		Lobbyi	ng Expenditure	s During 4-Year A	veraging Period						
	Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total				
28	Lobbyi	ng nontaxable amount									
t	•	ng ceiling amount of line 2a, column (e))	S S Tag								
	Total lo	obbying expenditures									
	d Grassr	oots nontaxable amount									
		oots ceiling amount of line 2d, column (e))		, ,		,					
f	Grassr	oots lobbying expenditures									

Schedule C (Form 990 or 990-EZ) 2017

Sche	dule C (Fo	orm 990 or	990-EZ) 2017															
Par	t II-B		nplete if th					mp	t under	section	501	1(c)(3)) an	d.	has NOT 1	iled F	orm	5768
For	each	"Ves"	response	00	lines	12	through	11	helow	provide	in	Part	W	_	detailed	(a)	(
0,	cacii	103,	response	OH	mics	1 a	unougn	,,	Delow,	provide	""	i air	,,	a	uctanea			

For a	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a)		(b)	
desc	cription of the lobbying activity.	Yes	No	An	nount	
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: Volunteers?				A.	* ·
a s			 			""
þ			 	,,,,,		<u>'.</u>
c d						
	· · · · · · · · · · · · · · · · · · ·	-				
e	• •	-	 	-		
f	Grants to other organizations for lobbying purposes?			ļ		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	<u> </u>	├─-	 		
h :	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				——	
:		-			——	
)	Total. Add lines 1c through 1i	ختَـُ		1 1	,	• . 1
2a		13,			<u></u>	1
b		'''	' -			
C C		1		3 3 40.		ا, ۲
d Dow	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1/5			<u>`</u>	. 1
rarı	501(c)(6).	;)(ə), (or se	cuon		
_					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	~	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	'	
3_	Did the organization agree to carry over lobbying and political campaign activity expenditures from the	prior	year?	3		~
Part	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," O answered "Yes."				ine 3	, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	s of	4		_	
а			2a			
b			2b			
C	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of		1			
-	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb		7 7 1			
	and political expenditure next year?		4	1		
5	Taxable amount of lobbying and political expenditures (see instructions)		5	_		
Par	t IV Supplemental Information			'		
Provid	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro e instructions); and Part II-B, line 1. Also, complete this part for any additional information.	up lis	t); Pa	rt II-A, br	ies 1 a	and
						
						-
		-				<u>.</u>

	m 990 or 990-EZ) 2017	Page 4
Part IV	Supplemental Information (continued)	
	,	
•		
	······································	
	, 	
····		
••••••		

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number 23-6298769 Scranton Federation of Teachers/AFT Local #1147

Pai	Organizations Maintaining Donor Adv			or Accounts.
	Complete if the organization answered	(a) Donor advis		(b) Funds and other accounts
1	Total number at end of year	(1)		.,
2	Aggregate value of contributions to (during year)	· · · · · · · · · · · · · · · · · · ·		
3	Aggregate value of grants from (during year) .			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor	advisors in writing th	at the assets held	in donor advised
	funds are the organization's property, subject to the	e organization's exclu	sive legal control?	· · · · · . Tyes I No
6	Did the organization inform all grantees, donors, a only for charitable purposes and not for the beneficonferring impermissible private benefit?	fit of the donor or dor	nor advisor, or for	any other purpose
Par	Conservation Easements. Complete if the organization answered '	"Yes" on Form 990,	Part IV, line 7.	
1	Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., recreat Protection of natural habitat Preservation of open space	-	Preservation of a	historically important land area certified historic structure
2	Complete lines 2a through 2d if the organization he easement on the last day of the tax year.	eld a qualified conserv	ation contribution	in the form of a conservation Held at the End of the Tax Year
а	Total number of conservation easements			. 2a
b	Total acreage restricted by conservation easement	ts		. 2b
С	Number of conservation easements on a certified h	nistoric structure inclu	ded in (a)	. 2c
d	Number of conservation easements included in historic structure listed in the National Register .	(c) acquired after 7/2		
3	Number of conservation easements modified, transtax year ►	sferred, released, extir	nguished, or termin	nated by the organization during the
4 5	Number of states where property subject to conservation be a written policy reviolations, and enforcement of the conservation ea	garding the periodic	monitoring, inspe	
6	Staff and volunteer hours devoted to monitoring, inspect	ting, handling of violation	s, and enforcing cor	nservation easements during the year
7	Amount of expenses incurred in monitoring, inspectin	ng, handling of violation	s, and enforcing co	nservation easements during the year
8	Does each conservation easement reported on line and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports of balance sheet, and include, if applicable, the text of organization's accounting for conservation easement	of the footnote to the o	rganızatıon's fınan	cial statements that describes the
Par	Organizations Maintaining Collections Complete if the organization answered '			ther Similar Assets.
1a	If the organization elected, as permitted under SF, works of art, historical treasures, or other similar public service, provide, in Part XIII, the text of the form	assets held for publ	c exhibition, educ	cation, or research in furtherance of
b	If the organization elected, as permitted under S works of art, historical treasures, or other similar public service, provide the following amounts relative	assets held for publing to these items:	c exhibition, educ	cation, or research in furtherance of
	(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X			▶ \$
	(ii) Assets included in Form 990, Part X			> \$
2	If the organization received or held works of art, following amounts required to be reported under S	FAS 116 (ASC 958) re	lating to these item	ssets for financial gain, provide the
а	Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X			> \$
b	Assets included in Form 990. Part X			• \$

Part	Organizations Maintaining	g Collections of A	Art, His	torical 1	Freasures	, or Ot	her Similar A	ssets (d	conti	nued)
3	Using the organization's acquisition, collection items (check all that apply)		her reco	rds, chec	k any of th	ne follov	wing that are a	significa	nt us	e of its
а	☐ Public exhibition		ď	☐ Loan	or exchang	ge prog	rams			
b	☐ Scholarly research		е	☐ Other	r					
С	☐ Preservation for future generation	s								
4	Provide a description of the organization.	ation's collections a	and expl	ain how t	hey further	the org	ganızatıon's exe	mpt pur	pose	ın Parl
5	During the year, did the organization assets to be sold to raise funds rathe								Yes	☐ No
Parl	IV Escrow and Custodial Arr	angements.								
	Complete if the organization 990, Part X, line 21.						·		n Fo	orm
1a	Is the organization an agent, trusted included on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in F	art XIII and comple	ete the fo	llowing ta	able:		<u> </u>	Amount		
С	Beginning balance					10	; [_		
d	Additions during the year					1d	1			
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amou	int on Form 990, Pa	art X, line	21, for e	scrow or c	ustodia	l account liabilit	y? 🗌	res -	☐ No
b	If "Yes," explain the arrangement in F	art XIII. Check here	e if the e	kplanatioi	n has been	provide	ed on Part XIII .			
Par	V Endowment Funds.	·								
	Complete if the organization	answered "Yes"	' on For	m 990, F						
		(a) Current year	(b) Pri	or year	(c) Two yea	rs back	(d) Three years bac	k (e) Fo	ur yea	rs back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses				· <u> </u>					
d	Grants or scholarships									_
	Other expenditures for facilities and programs									
f	Administrative expenses									-
g	End of year balance		-					_		
2	Provide the estimated percentage of	the current year en	d balanc	e (line 1a	. column (a	ı)) held :	as:			
- a	Board designated or quasi-endowme			- (,,	-,,				
b	Permanent endowment ►	%	' "							
c	Temporarily restricted endowment ▶	. %								
	The percentages on lines 2a, 2b, and		10%.							
3a	Are there endowment funds not in the			zation tha	at are held	and ad	ministered for ti	he		
-	organization by:	, p	3						Ye	s No
	(i) unrelated organizations							3a(i	_	-
	(ii) related organizations					• •		3a(i	~-	
h	If "Yes" on line 3a(II), are the related of							3b	_	
4	Describe in Part XIII the intended use					• •		05		
Part										
r ai	Complete if the organization		on For	m aan r	Part IV lin	- 11a	See Form 990	Part Y	line	10
	Description of property	(a) Cost or oth			or other basis		Accumulated	(d) Bo		
	Description of property	(a) Cost of our			ther)		epreciation	(u) be	iuk vai	iue
1a	Land						1 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
b	Buildings									
С	Leasehold improvements									
d	Equipment		0		46,459		46,459			0
е	Other									
Total.	Add lines 1a through 1e. (Column (d)	nust equal Form 99	0, Part	(, column	(B), line 10)c.)	•			0

Part VII	Investments - Other Securities				
	Complete if the organization ans			T	
	(a) Description of security or categor (including name of security)	ry 	(b) Book value		od of valuation of-year market value
(1) Financial	derivatives				
(2) Closely-ł	neld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)	••••				
(F)					· · · · · · · · · · · · · · · · · · ·
(G)					
(H)	45 000 D LV L (D) L (O) L				
	b) must equal Form 990, Part X, col (B) line 12)		· 		
Part VIII	Investments—Program Relate		000 Bort IV lin	o 11a Cao Farm	000 Dart V Ima 12
	Complete if the organization ans	swered tes on For	(b) Book value		
	(a) Description of investment		(b) Book value	1 ' '	od of valuation of-year market value
<u></u>				 	<u> </u>
(1)				<u>- </u>	 -
(3)		·····			
(4)	· · · · · · · · · · · · · · · · · · ·				
(5)					
(6)			····		
(7)					. · _ ,
(8)	-			 	
(9)			· · · ·		
	b) must equal Form 990, Part X, col. (B) line 13) 🕨		<u> </u>		
Part IX	Other Assets.				
	Complete if the organization ans		m 990, Part IV, lin	e 11d. See Form	
		(a) Description			(b) Book value
<u>(1)</u>					
(2)					
<u>(3)</u>					
_(4)			· -	-	
(5)					
(6)					
<u>(7)</u>					
(8)					
(9)	mn (b) must equal Form 990, Part X, c	ol (P) lino 15)			
Part X	Other Liabilities.	.or (b) lifte 15.)			
raitA	Complete if the organization ans	wered "Vec" on For	m 990 Part IV lin	a 11a or 11f Saa	Form 990 Part Y
	line 25.	swered res on ror	iii 990, r ait iv, iiii	e i le oi i ii. See	TOTTI 330, Fatt A,
1.	(a) Description of liability	(b) Book value	7	· · · · · · · · · · · · · · · · · · ·	
(1) Federal in		(5) 5000 14150			
(2)		· · · · · · · · · · · · · · · · · · ·			
(3)					
(4)					
(5)	 	·			
(6)					
(7)		 			
(8)		 			
(9)					
	b) must equal Form 990, Part X, col (B) line 25)				
	uncertain tax positions. In Part XIII, prov	ride the text of the footno	ote to the organization	n's financial statemer	nts that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Par		•	er Return.
	Complete if the organization answered "Yes" on Form 990,		
1	Total revenue, gains, and other support per audited financial statements		. 1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1	
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities		<u> </u>
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
.	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1	· · · · · · · · · · · · · · · · · · ·	3
4_	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	4.	
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part VIII.)		
b	Other (Describe in Part XIII.)		10
С 5	Add lines 4a and 4b		
Part			
ı aıt	Complete if the organization answered "Yes" on Form 990,		per rietarii.
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
- а	Donated services and use of facilities	2a	
b	Prior year adjustments		
c	Other losses		
ď	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		i i
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	li.
b	Other (Describe in Part XIII.)	4b	
C	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ne 18.)	5
	XIII Supplemental Information.	·	
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and		
z; Par	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to provide any additional	information.

Schedule D (For		Page \$
Part XIII	Supplemental Information (continued)	
•		
-		
-		
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SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

23-6298769

Name of the organization Employer identification number Scranton Federation of Teachers/AFT Local #1147 Part I 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.		res	,
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use	1		
	☐ Travel for companions ☐ Payments for business use of personal residence	ŀ	١.	
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees	[ĺ
	☐ Discretionary spending account ☐ Personal services (such as, maid, chauffeur, chef)	-		
		. %	. 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, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
		, -		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the		•	ر ز
•	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a	[1.5.32]	*	[
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			.!
	☐ Compensation committee ☐ Written employment contract		•	
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			1
	Approval by the board of compensation committee		'	
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:			,
_		4-		<u> </u>
a	Receive a severance payment or change-of-control payment?	4a 4b		
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	40 4c		
С	Participate in, or receive payment from, an equity-based compensation arrangement?	40		ļ
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		٠.	[,]
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		,	'}
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	ł		
9	compensation contingent on the revenues of:	ļ	,	.]
_	The organization?			
a b	Any related organization?	5b		
b	If "Yes" on line 5a or 5b, describe in Part III.	35		
	in res offline 3a of 3b, describe in Fact in.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	, ,		•
Ü	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.	- 		
	The soft line of ob, describe in that in.	,	٠,	`
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
•	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject	 -		
U	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			لند

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Schedule J (Form 990) 2017

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

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.

NOVE: THE SULL OF COUNTIES (D)(I) THIS INCIDENCE IN THE COURT HAVE AND AN ACT OF THE COUNTIES OF THE COUNTIES OF THE COURT HAVE AND ACT OF THE COUNTIES OF THE COUNTIES OF THE COURT HAVE AND ACT OF THE COUNTIES OF THE COUNTIES OF THE COURT HAVE AND ACT OF THE COUNTIES OF THE COUNTIES OF THE COURT HAVE AND ACT OF THE COUNTIES OF THE COUNTIES OF THE COURT HAVE AND ACT OF THE COUNTIES OF THE COURT HAVE AND ACT OF THE COURT HAVE AND AC	בפני	(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	ווופן אווי אפרוסון ע' וווופן	a, applicable coluil		S IOI tilat iitaividual.
	-				(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable	compensation	Denents	(a)-(n)(a)	as deferred on prior Form 990
				Compensation				
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16	(E)							

Schedule J (Form 990) 2017

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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.
Part VII 5 \$120,947 was estimated as a payable to the Scranton School District for reimbursement of Rosemary Boland's (President) release time from the school district. She remained
an employee of the school district and was paid directly by them The \$120,947 includes salary, taxes, and benefits. An additional salary amount was paid to President Boland directly
by the organization

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

m 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047 2017

Open to Public Inspection

Name of the organization Employer identification number Scranton Federation of Teachers/AFT Local #1147 23-6298769 Part VI A 6 The organization has dues paying members Part VI a 7a. Members elect the governing body Part VI A 7b. Members approve changes to the constitution and by-laws Part VI B 12c. The Executive Committee monitors the conflict of interest policy by completion of annual disclosure forms and with an internal audit of the financial records

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

Scranton Federation of Teachers/AFT Local #1147

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

Related Organizations and Unrelated Partnerships

Open to Public

OMB No 1545-0047

► Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number 23-6298769

(g) Section 512(b)(13) controlled entity? (f)
Direct controlling entity ŝ 7 7 7 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. Yes (f)
Direct controlling
entity (e) End-of-year assets N/A No N/A No N/A No (e)
Public charity status
(if section 501(c)(3)) (d) Total income Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (d) Exempt Code section 501(c)5 501(c)5 501(c)5 (c)
Legal domicile (state
or foreign country) (c)
Legal domicile (state
or foreign country) Washington, DC Pennsylvania Pennsylvania (b) Primary activity National Labor Union Central Labor Union (b) Primary activity State Labor Union (1) American Federation of Teachers EIN: 36-0725240 (a) Name, address, and EIN (if applicable) of disregarded entity (a) Name, address, and EIN of related organization 555 New Jersey Ave., NW Washington, DC 20001 1816 Chestnut St., Philadelphia, PA 19103 1258 O'Neill Highway Dunmore, PA 18512 (2) AFT Pennsylvania EIN: 25-1035208 (3) Northeast PA Area Labor Federation Partl Part II (1) N/A (2) 9 € 8 ල € 3 9 Schedule R (Form 990) 2017

Cat No 50135Y

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

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Schedule R (Form 990) 2017

(i) Section 512(b)(13) controlled entity? Schedule R (Form 990) 2017 Percentage ownership ŝ 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. Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, Yes (J) General or managing: partner? Yes No (h) Percentage ownership (i)
Code V—UBI
amount in box 20
of Schedule K-1
(Form 1065) end-of-year assets (g) Share of (h)
Disproportionate
allocations? Yes No (f) Share of total Income (g) Share of end-of-(e)
Type of entity
(C corp, S corp, or trust) (f) Share of total income because it had one or more related organizations treated as a partnership during the tax year (d)
(Direct controlling entity tax under sections 512—514) (e)
Predominant
income (related,
unrelated,
excluded from (c)
Legal domicile
(state or foreign country) (d)
Direct controlling
entity (b) Primary activity (c)
Legal
domicile
(state or
foreign country) (b) Primary activity (a) Name, address, and EIN of related organization (a)
Name, address, and EIN of related organization Pạn IV Part III (1) N/A (1) N/A 8 8 8 <u>©</u> ව € 9 9 ල ₹ 3 5

Part V

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

19	<u>a</u> :	ا	10	1d 7	1e /	7	1g /	1	;= 2	1j	¥:	E E	-	10 /	1. 1年、1	-	19 6	7	2	on thresholds.	g amount involved								Schedule R (Form 990) 2017
Receipt of (i) interest, (ii) annuties, (iii) royalties, or (iv) rent from a controlled entity												 								าships and transact	(d) Method of determining amount involved		21,600 Cash received	705 Cash received		Cash paid	198,283 Cash paid	Cash paid	Schedule F
												 								uding covered relation	(c) Amount involved		009'17	705		112,159	198,283	2,603	
												 						•		omplete this line, incli	(b) Transaction type (a — s)	,	d.	1p		19	19	19	
a necelption (V) interest, (III) annulues, (IIII) royalties, or (IV) rent from a controlled entity	Compared to second control of the test of the second control of th			d Loans or loan guarantees to or for related organization(s)	e Loans or loan guarantees by related organization(s)	f Dividends from related organization(s)	g Sale of assets to related organization(s)	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)	R Lease of Jacillules, equipment, of other assets from related organization(s)	Performance of services or membership or fundraising solicitat		o Sharing of paid employees with related organization(s)		p Heimbursement paid to related organization(s) for expenses	d neithburselhein paid by related organization(s) for expenses	r Other transfer of cash or property to related organization(s)	,	2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	(a) Name of related organization	Pennsylvania AFT	American Federation of Teachers		Pennsylvania AFT	(3)	American Federation of Teachers (4)	NE PA Area Labor Federation (5)	

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

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.

(a) (b) (c)	(a)	(2)	9	(e)		(6)	£	3	8	33
Name, address, and EIN of entity	Primary activity	Legal domicile		Are all partners		Share of	Disproportionate			Percentage
		(state or foreign country)	income (related, unrelated, excluded	section 501(c)(3)	total income	end-or-year assets	allocations	ᅙᇙ	managing partner?	diusiaumo
			from tax under	organizations?				(Form 1065)		
			sections 512—514)	Yes No		į	Yes No		Yes No	ļ
(1) N/A					1					-
(2)					7.8 A.76.		-			
(6)										
(4)										
(5)	·-									
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								Sch	edule R (Fo	Schedule R (Form 990) 2017

cneaule H (F	-orm 990) 2017	Page 3
Part VII	Supplemental Information. Provide additional information for responses to questions on Schedule R. See instructions.	
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