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

Interr	nal Reve	nue Service Go to www.irs.gov/Form990 for instructions and the I	atest	information. りして	S Inspection
A F	or th	e 2018 calendar year, or tax year beginning SEP 1, 2018 and endin	g A	UG 31, 2019	
Bca	heck if	123 DISTRICT 29 AMERICAN FEDERATION OF		D Employer identific	cation number
	_Addre	SE TEACHERS			
	Name chang	e Doing business as		36-6	205524
	Initial	Number and street (or P.O. box if mail is not delivered to street address) Room	/suite	E Telephone number	<u></u>
\vdash	Final	2145 W 1107H DIACE		•	238-3074
	return- termir ated			G Gross receipts \$	231,649.
	Amen	ded CUTCACO TI 60642	ł	H(a) is this a group re	
H	_ireturn ∏Applii		$\neg \neg$	for subordinates	
	_ltiòn pendi	SAME AS C ABOVE		H(b) Are all subordinates in	
	- OV OV	empt status.	527	1	list (see instructions)
		te: NWW.IFT-AFT.ORG	134	•	n number ▶ <u>0787</u>
			Voor o		State of legal domicile: IL
	rt I	Summary	i tai c	n torniation. 1740 N	Jale of legal dofficile. 11
		Briefly describe the organization's mission or most significant activities: IMPROVE	THE STATE OF	ב כייאייוני רב	TEXCHED C
ల్ల	1	EDUCATIONAL WORKERS AND OTHER WORKERS IN THE			
Activities & Governance					
/eri		Check this box If the organization discontinued its operations or disposed of	more	1 1	
ő	3	Number of voting members of the governing body (Part VI, line 1a)		3	5
∘ ŏ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	0
ties		Total number of individuals employed in calendar year 2018 (Part V, line 2a)		5	0
tί	6	Total number of volunteers (estimate if necessary)		6	
Ac		Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
	b	Net unrelated business taxable income from Form 990-T, line 38	-	7b	0.
	_		-	Prior Year	Current Year
ne	8	Contributions and grants (Part VIII, line 1h)	-	0.	0.
le)	l	Program service revenue (Part VIII, line 2g)	<u> </u>	216,523.	231,592.
Revenue	l	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-	41.	57.
	l	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	0.	0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-	216,564.	231,649.
	l	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	0.	0.
	l	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	l	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u> </u>	3,917.	3,917.
Expenses	1	Professional fundraising fees (Part IX, column (A), line 11e)	-	0.	0.
άx		Total fundraising expenses (Part IX, column (D), line 25)		222 224	000 640
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	ı	209,024.	223,648.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) V ()	l	212,941.	227,565.
	19	Revenue less expenses Subtract line 18 from line 12	: -	3,623.	4,084.
Net Assets or Fund Balances		Total assets (Part X line 16)	Beg	inning of Current Year	End of Year
sset 3ala	20	Total assets (Part X, line 16)	<u> </u>	35,071.	39,155.
nd A		Total liabilities (Part X, line 26)	·	0.	0.
칕		Net assets or fund balances Subtract line 21 from line 20 OGDEN, UT		35,071.	_39,155.
	rt II	Signature Block			
		lties of perjury, I declare that I have examined this return, including accompanying schedules and s			y knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which pre	eparer	has any knowledge.	
		Sashi Mushle		1 2 11 1 a	1
Sigr	1	Signature of officer		Date	
Her	е	REBBIE KINSELA, TREASURER			
		Type or print name and title		ata la . F	T DTIM
		Print/Type preparer's name Preparer's suggesture	_	ate Check	PTIN
Paid		ROBERT J. HANNIGAN	1	2/03/19 self-employ	
Prep	arer	Firm's name BANSLEY AND KIENER, LLP		Firm's EIN	<u> 36-2152389</u>
Use	Only	Firm's address 8745 W HIGGINS RD STE 200			
		CHICAGO, IL 60631-2704		Phone no. 31	2-263-2700
May	the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

123 DISTRICT 29 AMERICAN FEDERATION OF

<u>Form</u>	990 (2018) TEACHERS	<u> 36-620</u>	5524	Page 2
Pai	rt III Statement of Program Service Accomplishments			
	Check if Schedule O contains a response or note to any line in this Part III			
				<u> </u>
1	Briefly describe the organization's mission.			
	IMPROVE THE STATUS OF TEACHERS, EDUCATIONAL WORKERS AND	OTHER V	NORKE	<u> </u>
	IN THE LOCAL AREAS.			
2	Did the organization undertake any significant program services during the year which were not listed on the			
_			□voc	X No
	prior Form 990 or 990-EZ?		165	A NO
	If "Yes," describe these new services on Schedule O			
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		Yes	X No
•				
	If "Yes," describe these changes on Schedule O.			
4	Describe the organization's program service accomplishments for each of its three largest program services, as it	measured by	expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	rs, the total e	kpenses, a	nd
		•	•	
	revenue, if any, for each program service reported			
4a	(Code) (Expenses \$) (Revenue)
	PROGRAM REPRESENTS APPROXIMATELY 380 TEACHERS AND OTHER	EDUCAT:	IONAL	
	WORKERS			
			_	
4b	(Code) (Expenses \$ including grants of \$) (Revenue	e S)
70	Code			
			-	
				
4c	(Code) (Expenses \$) (Revenue	e\$)
			•	
	,			
				
	· · · · · · · · · · · · · · · · · · ·			
			_	
4d	Other program services (Describe in Schedule O)			
Tu			1	
	(Expenses \$ including grants of \$) (Revenue \$.1	
4e	Total program service expenses			
			Form 99	90 (2018)

Form 990 (2018) TEACHERS
Part IV Checklist of Required Schedules

		•	V	NI-
	Is the expansion described in section 501(a)(3) or 4047(a)(1) (other than a private foundation)?		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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_=_		
٠	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
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		_X_
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		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u>X</u>
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		<u>X</u>
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	44.		X
	Part VI	11a		
D	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
_	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	1 10		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	ľ	X
А	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			
4	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		$\frac{\mathbf{x}}{\mathbf{x}}$
	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	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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_
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	4=		v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	16		х
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	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		<u>x</u> _
3200	3 12-31-18	Form	990	(2018)

Form 990 (2018) TEACHERS

Part IV Checklist of Required Schedules (continued)

			Yes	No
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			٦,
_	Schedule K If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	<u> 24u</u>		
254	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		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			
	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)			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	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			v
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			х
	If "Yes," complete Schedule N, Part I	31	<u> </u>	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		х
22	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<u> </u>
33	sections 301 7701-2 and 301 7701-37 If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
5	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		
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	X	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			ᆜ
	1 1 -		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	{		
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	l .	1	
	(gambling) winnings to prize winners?	1c	900	<u> </u> (2018)
832004	4 12-31-18	rorm	シコリ	(∠U 8)

		05524	Р	age 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)			,
			Yes	No
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	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	ļ <u>.</u>	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
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	<u> </u>	
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_	ļ	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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	ļ <u> </u>	X
C	, g	<u>5c</u>		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			l
	any contributions that were not tax deductible as chantable contributions?	_6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		İ	
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а				X
b		7b	-	-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required		1	
	to file Form 8282?	7c		X
	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		-
f		7 1		-
g			-	├
h	·	C?		
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		
9	Sponsoring organizations maintaining donor advised funds.			
а		9a		
b		9b_		
10	Section 501(c)(7) organizations. Enter	}		
_	Initiation fees and capital contributions included on Part VIII, line 12			
b				
11	Section 501(c)(12) organizations. Enter	ĺ		
a				
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	į	1	
120	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		ŀ
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
_	Section 501(c)(29) qualified nonprofit health insurance issuers.			
13	Is the organization licensed to issue qualified health plans in more than one state?	13a		
a	Note. See the instructions for additional information the organization must report on Schedule O	100		\vdash
h	Enter the amount of reserves the organization is required to maintain by the states in which the			ł
J	organization is licensed to issue qualified health plans			
^	Enter the amount of reserves on hand			
_	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	1	T
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or		İ	
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
-	The same and the contract of t			

If "Yes," complete Form 4720, Schedule O

123 DISTRICT 29 AMERICAN FEDERATION OF

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Form 990 (2018) TEACHERS 36-6205524 Page
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 1a 5			
	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.	İ		
ь	Enter the number of voting members included in line 1a, above, who are independent 1b 0	!	1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
_	officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
Ū	of officers, directors, or trustees, or key employees to a management company or other person?	3		_x_
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or	└		
7a		7a		х
	more members of the governing body?	- 1 a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	76		x
_	,	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		X	
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	_8b	Λ	_
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			.
<u></u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
	Did the consequence have been been been been been as office to 0	40-	Yes	No X
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,	401		
44-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
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	Describe in Schedule O the process, if any, used by the organization to review this Form 990	40-		v
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	١		
	ın Schedule O how this was done	12c		77
13	Did the organization have a written whistleblower policy?	13		X
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			
	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)			
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			
	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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE		_	
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)	s only	availa	able
	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, and	d finan	cıal	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	REBBIE KINSELLA - 773-238-3074			
	21/5 W 1100H DIACE CHICAGO II. 606/3			

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TEACHERS

36-6205524

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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	(C) Position (do not check more than one pox, unless person is both an officer and a director/trustee)				h an	ed any current officer, of (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	Officer	Officer	Key employee	Highest compensated employee	Рогтег	the	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) CHRIS PASKI	5.00									_		
VICE PRESIDENT		_		Х			L.	0.	600.	0		
(2) COLLEEN KOCH	5.00								600			
SECRETARY	5.00	_		X		<u> </u>		0.	600.	0		
(3) REBBIE KINSELLA	5.00	1							000			
TREASURER		_	<u> </u>	Х				0.	800.	0		
(4) ELAINE BERNAL	8.00	-								^		
CO-PRESIDENT				Х			_	0.	0.	0		
(5) ANDREW WEBER CO-PRESIDENT	8.00	-		x				0.	0.	0		

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

\$100,000 of compensation from the organization

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Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D)
Revenue excluded from tax under sections 512 - 514 (B) Related or Total revenue exempt function business revenue revenue ons, Gifts, Grants Similar Amounts 1 a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c 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 \$_ Total. Add lines 1a-1f Business Code 231,592. 611710 231,592. 2 a DUES AND FEES f All other program service revenue 231,592 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 57. 57. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (II) Other 7 a Gross amount from sales of assets other than inventory b Less cost or other basis 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 b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue e Total. Add lines 11a-11d 231,592. 231,649. Total revenue. See instructions 12

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Pa	t IX Statement of Functional Expens	es			
Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	er organizations must co	omplete column (A)	
	Check if Schedule O contains a respon	se or note to any line in	this Part IX		
	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				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign		•		
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	3,600.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				<u> </u>
9	Other employee benefits				
10	Payroll taxes	317.			
11	Fees for services (non-employees)				
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		_		
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses	9.			
14	Information technology				
15	Royalties	-			
16	Occupancy			<u> </u>	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	F 742			
19	Conferences, conventions, and meetings Interest	5,742.			
20	Payments to affiliates	216,807.			
21 22	Depreciation, depletion, and amortization	210,007.			-
23	Insurance				
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	DONATIONS	800.			
b	RETIREMENT	200.			
С	RAFFLE PRIZES	90.			
d					
е	All other expenses				
25	Total functional expenses Add lines 1 through 24e	227,565.			
26	Joint costs. Complete this line only if the organization	1			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				<u> </u>

TEACHERS

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Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year 35,071. 39,155 1 Cash - non-interest-bearing 1 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 4 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a b Less accumulated depreciation 10b 10c Investments - publicly traded securities 11 11 Investments - other securities See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 35,071 39,155 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 0. 0. Total liabilities. Add lines 17 through 25 26 complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 35,071. 39,155. 27 Unrestricted net assets 27 28 Temporarily restricted net assets Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 35,071. 39,155. 33 33 Total net assets or fund balances 35,071 39,155. Total liabilities and net assets/fund balances

123 DISTRICT 29 AMERICAN FEDERATION OF

	orm 990 (2018) TEACHERS 36-62				_{je} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	231	.,6	<u>49.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	227	7,5	<u>65.</u>
3	Revenue less expenses Subtract line 2 from line 1	3	4	1,0	<u>84.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3.5	0,0	<u>71.</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	3.9	1,1	<u>55.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedul	 O		J	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	te basıs,		- 1	
	consolidated basis, or both			1	
	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 t	ne audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sci	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	ingle Audit			
-	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 req	ured audit			
_	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

832012 12-31-18

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

➤ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Inspection

Name of the organization

► Go to www.irs.gov/Form990 for the latest information. 123 DISTRICT 29 AMERICAN FEDERATION OF TEACHERS

Employer identification number 36-6205524

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FORM 990, PART VI, SECTION B, LINE 11B:
THE FORM 990 IS PRESENTED BY THE TREASURER TO THE OFFICERS PRIOR TO ITS
SIGNING AND ISSUANCE.
FORM 990, PART VI, SECTION C, LINE 19:
THE GOVERNING DOCUMENTS AND FINANCIAL REPORTS ARE NOT MADE AVAILABLE TO THE
PUBLIC.
FORM 990, PART XII, LINE 2C:
THE BOARD OF DIRECTORS ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE
FINANCIAL REVIEW. THERE WERE NO CHANGES IN ITS OVERSIGHT PROCESS OR
SELECTION PROCESS DURING THE YEAR.
(