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# **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

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury

For Paperwork Reduction Act Notice, see the separate instructions.

		Information about Form 990 and its insudeducis is at www.r		<u>v.                                    </u>	<del>-</del>				
<u>A</u>	For the	2014 calendar year, or tax year beginning July 1 , 2014, and end	ing Ju	ne 30	, 20 15				
В	Check if	applicable: C Name of organization United Academics-AAUP/AFT Local 3203		D Employ	er identification number				
	Address	change Doing business as			03-0372108				
	Name ch	ne change Number and street (or P.O box if mail is not delivered to street address) Room/suite E Telephone number							
	Initial reti	um Box 31, 85 South Prospect Street			802-656-1428				
	Final retur	n/terminated City or town, state or province, country, and ZIP or foreign postal code							
	Amended	t return Burlington, VT 05405		<b>G</b> Gross n	ecelpts \$ 599,022				
	Application	on pending F Name and address of principal officer: Felicia Kornbluh, same as above	Hía) Is this a c	roup return for	subordinates? Yes No				
					s included? Yes No				
<u> </u>	Tax-exen	a list (see Instructions)							
<u>.</u>	I Tax-exempt status: ☐ 501(c)(3) ☐ 501(c) ( 5 ) ◀ (insert no ) ☐ 4947(a)(1) or ☐ 527 If "No," attach a list (see in J Website: ►								
K		rganization ☐ Corporation ☐ Trust ☐ Association ☑ Other ► Labor L Year of form	<del></del>	<del></del>	number ► 0787 of legal domicile VT				
_	art I	Summary	2001	1 0.1	VI VI				
		Briefly describe the organization's mission or most significant activities: Labo	r Union Organ	izina Per	presentation of member				
Ф			onion Organ	iiziiig. Rej	presentation of member				
Activities & Governance	.	in workplace related matters. Increase membership in the organization.							
Ē		Ob all Abi bar & Titaba ang inalian dia antina dia ang atawa and dia ang		050/ -6	ita mat acceta				
8	I .	Check this box ► if the organization discontinued its operations or disposed			1				
Ğ	1			<u> </u>					
9		Number of independent voting members of the governing body (Part VI, line 1)			8				
誓	1				0				
훘		Total number of volunteers (estimate if necessary)		6	0				
ĕ	1	Total unrelated business revenue from Part VIII, column (C), line 12		. 7a	0				
	Ь	Net unrelated business taxable Income from Form 990-T, line 34	<u> </u>	7b	0				
			ear	Current Year					
0	8	Contributions and grants (Partyth,即首人取口		557060	596615				
Revenue	9	Program service revenu <del>e (Part VIII, line 2g)</del>							
Š		Investment income (Farl VIII, column (A), lines 3 (2) and 7d)		2113	2407				
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 86, 9c, 10c, and 11e)							
		Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		559173	599022				
		Grants and similar amount par (Hart X, Column (A), lines 1-3)			33022				
		Benefits paid to or for members (Part IX, column (A), line 4)	1						
		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	-	129294	142254				
Expenses	1	Professional fundraising fees (Part IX, column (A), line 11e)		123284	143254				
ē	1		- C		2 196 Mint 164				
Ä		Total fundraising expenses (Part IX, column (D), line 25)	-1,4 10 70 70 70						
_	1	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		426667	499182				
	1	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	<u> </u>	555961	642436				
	·+···	Revenue less expenses. Subtract line 18 from line 12	ļ <u> </u>	3212					
S or			Beginning of C		End of Year				
Net Assets Fund Balance	20	Total assets (Part X, line 16)		425227	381813				
¥ P	21	Total liabilities (Part X, line 26)		0	0				
		Net assets or fund balances. Subtract line 21 from line 20		425227	381813				
P	art II	Signature Block							
		ties of perjury, I declare that I have examined this return, including accompanying schedules and sta			my knowledge and bellef, it is				
tru	e, correct,	and complete Declaration of preparer (other than officer) is based on all information of which preparer	rer has any know	rledge					
				AUG	· 80 8015				
Sig	yn	Signature of officer		ate	. \				
Here I JUSCH M. KUDZLE (TREASULE					261				
	İ	Type or print name and title		<del></del>					
<b>D</b> -		Print/Type preparer's name Preparer's signature	Date	Check	□ # PTIN				
Pa				self-em					
	eparer	l man a second and a	Fire	m's EIN ▶					
US	e Only			one no	<del></del>				
Ma	v the IR:	Firm's address ► S discuss this return with the preparer shown above? (see instructions)	1 - 11	one no	Yes No				
1	,	- marked non-relativity to the braken a reality and to 1 (000 monable) (1 )							

Form 990 (2014)

Cat. No 11282Y

Form 990 (2014)

Part	Checklist of Required Schedules		V 1	
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	Yes	No ✓
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	2		✓ ✓
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		<del></del>
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	✓	
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		<b>✓</b>
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		<b>✓</b>
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		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<b>√</b>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		<b>✓</b>
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
_	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		✓_
	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		<b>1</b>
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 11f		<b>√</b>
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
	Did the organization maintain an office, employees, or agents outside of the United States? 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	14a 14b	_	1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		<b>✓</b>
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		1
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		1
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		<b>✓</b>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	ļ	1
Ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
		Fon	ո 990	(2014)

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Part	IV Checklist of Required Schedules (continued)		V	- Na
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	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		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		1
đ 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete 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		1
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		1
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  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.	35b		1
37	related organization? If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
20	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		1
38	19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	<b>/</b>	

Form **990** (2014)

Part				
	Check if Schedule O contains a response or note to any line in this Part V	<del></del>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		ł
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		i
	reportable gaming (gambling) winnings to prize winners?	10	1	}
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		· <u>·</u>	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			١.
	account)?	4a		<b>✓</b>
b	If "Yes," enter the name of the foreign country:	1 1		l
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			١,
	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			l
-	gifts were not tax deductible?	6b		<del>                                     </del>
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
4	and services provided to the payor?	7a		l
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<del>                                     </del>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	- <u>-</u> -		╁
	required to file Form 8282?	7c		ł
d	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	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			ļ
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	L	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter.  Initiation fees and capital contributions included on Part VIII, line 12		ļ	]
a b	Initiation fees and capital contributions included on Part VIII, line 12	-		ļ
11	Section 501(c)(12) organizations. Enter:	†	ł	
a	Gross income from members or shareholders			
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.)	1	]	1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	<u> </u>
þ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	_		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u></u>	L	ļ
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	<u> </u>
	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		
_		4	Ì	
0 140	Enter the amount of reserves on hand	10-	<del> </del>	1,
14a h	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<del>                                     </del>	1

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Check if Schedule O contains a response or note to any line in this Part VI								
Sect	on A. Governing Body and Management	<del></del> -	•	. (*)					
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year   1a   8	, ,							
	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.	4	4						
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	, ~ # <u>(</u>	To 1 8 7						
_	any other officer, director, trustee, or key employee?	2		<b>✓</b>					
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? .									
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<b>✓</b>					
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1					
6	Did the organization have members or stockholders?	6	✓						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	<b>√</b>						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,								
8	stockholders, or persons other than the governing body?	7b	<b>✓</b>	ļ					
•	the year by the following:			1					
	The governing body?	9-							
a b		8a 8b	<b>√</b>						
9	ls there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	OD	<b>V</b>						
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1					
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	ue C		l T					
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		<b>✓</b>					
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		1					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		1					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b							
С	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	Did the organization have a written whistleblower policy?	13		1					
14		14		<del>  •</del>					
15	Did the organization have a written document retention and destruction policy?	14	<b>√</b>						
а	The organization's CEO, Executive Director, or top management official	15a	<b>✓</b>	1					
b	Other officers or key employees of the organization	15b	<del>-</del>						
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130	<b>V</b>	<del> </del>					
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?		ļ						
		16a		/					
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		<u> </u>					
	on 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 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(	c)(3)s	only)					
19	☐ Own website ☑ Another's website ☑ Upon request ☐ Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of intefinancial statements available to the public during the tax year.			, and					
20	State the name, address, and telephone number of the person who possesses the organization's books and rec	ords:	<b>•</b>						
	Joe Kudrle, same per page 1								

_				*
μ	а	а	А	•

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 employees."
- 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 orga	aniz			ompe	nsa	ted any curren	t officer, director	, or trustee.
					C)	-				
(A)	(B)	J			ition			(D)	(E)	(F)
Name and Title	Average					than o		Reportable	Reportable	Estimated
	hours per					or/trus		compensation	compensation from	
	week (list any hours for	95	3	Q	ᇫ	る主	יק	from the	related organizations	other compensation
	related	말	Si i	Officer	¥ e	향물	Former	organization	(W-2/1099-MISC)	from the
	organizations	중	ᄛ	-	Key employee	8 Ω Ω	۳	(W-2/1099-MISC)	1	organization
	below dotted line)	ិគ្គ	<u> </u>		§	ફ				and related organizations
	""	Individual trustee or director	Institutional trustee		*	8		ĺ	ĺ	0.94.122010
			8			Highest compensated employee				
(1) Denise Youngblood, Former President	10 week			١.	İ	İ	_ ا			
Burlington, VT 05405			<u> </u>	1	<u> </u>		1	6435		
(2) Felicia Kornbluh, President	10 week	Į		١,		]	1			
Burlington, VT 05405	ļ			1			_	412		
(3) Joe Kudrle, Treasurer	10 week			١,						
Burlington, VT 05405		<u> </u>	_	1	<u> </u>		├-	16170		
(4) Kit Anderson, Secretary	5 week			١,	1					
Burlington, VT 05405	ļ		L	✓			L	0		
(5) John Forbes, VP	5 week		l	١.		l	l			
Burlington, VT 05405		ļ		<b>✓</b>	<u> </u>		ļ	6435		· · · · · · · · · · · · · · · · · · ·
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(7)		<del> </del>		_		<del></del>				
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(13)										
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(14)							<u> </u>			<u> </u>
		1							1	

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(C)													
	(A)	A) (B) Position (do not check more than a				one	(D)	(E)	1		(F)			
	Name and title	Average hours per	box, (	unles	s pe	rson	is both	an	Reportable	Reportabl			mated	
		week (list any			_		or/trust	<del></del>	compensation	compensation related	irom		ount of ther	
		hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	불	Former	the	organizatio		comp	ensatio	n
		related organizations	in de	tri.	ğ	3	loy est	뤛	organization (W-2/1099-MISC)	(W-2/1099-M	ISC)		m the nization	
		below dotted	ğ 2	nal	1	§ S	8 8				]		related	
		line)	uste	trus	1	8	Į ģ	1			-	orgar	uzations	3
			<b>1</b> °	tee	1	[ ,	Highest compensated employee							
74.5\		<b> </b>		-		<u> </u>	<u>a</u>	<del> </del>	<del> </del>					
(15)							İ		ļ					
(46)					-	_	<u> </u>	├	<del> </del>					
(16)			}								}			
(17)			<b></b>			$\vdash$	<del></del> -	├						
322							İ		ł					
(18)					-		<del> </del>	├						
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(19)						-	<del></del>	-						
1							,	1			- 1			
(20)					_	-		┢						
\$7.11	· · · · · · · · · · · · · · · · · · ·		1					)			1			
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*******									ļ					
(22)														
(23)	***************************************													
								<u> </u>	<u> </u>					
(24)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~							}	[		ľ			
<del></del>				_										
(25)				Ì							İ			
45	Sub Astal			i										
1b	Sub-total	 Mil Contin	 	•	•		•		29452					
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)			•	•	• •	•		00450					
2		not limited				<u></u>	<u> </u>	3	29452	ara than C1/	20,000			
2	Total number of individuals (including but reportable compensation from the organization)		เงเก	ose	IIST	ea a	above	e) W	no received m	ore than \$11	JU,UUU C	ΣŤ		
	reportable compensation from the organic	Zation							<del></del>	<del></del>			Yes	No
3	Did the organization list any former off	ficer, direct	tor. o	r tn	uste	96	kev e	mn	lovee, or high	est compe	nsated		163	140
	employee on line 1a? If "Yes," complete S									. ,		3		1
4	For any individual listed on line 1a, is the							n a	nd other comp	ensation fro	om the	<u> </u>		<del></del> -
	organization and related organizations													ĺ
	Individual											4	l	1
5	Did any person listed on line 1a receive o	r accrue co	mper	nsat	ion	fror	n any	un	related organiz	ation or ind	ivıdual	-		_ <del></del>
	for services rendered to the organization?	? If "Yes," c	omple	ete S	Sch	edu	ıle J f	or s	uch person			5		1
Section	n B. Independent Contractors													
1	Complete this table for your five highest of	compensate	ed inc	lepe	ende	ent	contr	acto	ors that receive	d more tha	n \$100,0	000 of		
	compensation from the organization. Rep	ort comper	nsatio	n fo	or th	e c	alend	ar y	ear ending wit	h or within t	he orga	nizatı	on's ta	ЗX
	year.													
	(A)								(B)		_	(C)	-4	
	Name and business address Description of services Compensation													
								<u> </u>						
-								<u> </u>						
		<del></del>							·					
2	Total number of independent contracto	rs (includin	na bu	t no	ot I	imi+	ed to		nse listed abo	ove) who				
-	received more than \$100,000 of compens								ose iisteu abt	100				
				٠ر			-							

Part	VIII	Statement of Reve	enue			5		_
		Check if Schedule C	contains a re	esponse or note to	any line in this	Part VIII		<u>····</u>
	•	Check if Schedule C			Total revenue	Related or	Unrelated	(D) Revenue
						exempt function	business revenue	under sections
10				1		revenue	<del></del>	512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns		<del></del>			ļ	
Gra	b	Membership dues .					ľ	
ts,	C	Fundraising events .		<del></del>	1			
ig g	ď	Related organizations						
ıs, Eğ	e	Government grants (cor		<del>)</del>				
rtio er (	f	All other contributions, g			İ			
현		and similar amounts not inc	L		İ			
o it	g	Noncash contributions inclu						
	h	Total. Add lines 1a-1	<u>†</u>	Business Code	596615		<del> </del>	
	_			Business Code				
eve	2a			•				
ē.	b	*************		-			<del></del>	<del> </del>
Σįς	C			-			<u></u>	
နှ	d			-				
ram	e							
Program Service Revenue	f	All other program ser					<u>.                                    </u>	
	9	Total. Add lines 2a-2					T	
	3	Investment income and other similar amo						
			-		2407			
	4 -	Income from investmen						
	5	Royalties	(i) Real	(ii) Personal				
		O	(1) 1 1001	(ii) Craonar				
	6a	Gross rents						
	b	Less: rental expenses						
	C	Rental income or (loss)  Net rental income or	(1000)		-			
	d   7a	Gross amount from sales of	(i) Securities	(ii) Other				
	/a	assets other than inventory	() 555511155	(1) - 111-11				
	ь	Less: cost or other basis						
		and sales expenses						
		Gain or (loss)	<del>                                     </del>					
	d		L					1
	u	iver gain or (1055) .		· · · · · · · · · · · · · · · · · · ·	<u> </u>		<u> </u>	
e E	8a	Gross income from fu	ındraisınd					
	00	events (not including \$	21.014.011.19		l			
ě		of contributions reporte	ed on line 1c).	İ				
Other Reven		See Part IV, line 18 .		a				
ŧ	ь	Less: direct expenses		b				
0		Net income or (loss) f		_	1		1	
		Gross income from ga					<del>                                     </del>	
			-	a			1	
	b	Less: direct expenses		b				
		Net income or (loss) f						<b>†</b>
		Gross sales of in					<u> </u>	
		returns and allowance						
	ь	Less: cost of goods s		b	1			
	C	Net income or (loss) f			1			
		Miscellaneous F		Business Code			1	
	11a	·			1		İ	]
	b							
	c							
	d	All other revenue .				· · · · · · · · · · · · · · · · · · ·		
	e	Total. Add lines 11a-		. <del> •</del>				
	12	Total revenue. See in			599022			
			<del></del>	<del></del>				Form <b>990</b> (2014)

Part IX	Statement of	of Functional	Expenses	

Section	on 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. Al	ll other organization	ns must complete co	olumn (A).
	Check if Schedule O contains a respon	se or note to any lin	e in this Part IX .		
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundralsing 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				*1
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	29452			
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 8	Other salaries and wages	108032			
9	Other employee benefits				
10	Payroll taxes	5770			
11	Fees for services (non-employees):				
а	Management				
b	Legal	8177			
C	Accounting	4941			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees		<del></del>	<del></del>	<del></del>
g	Other. (If line 11g amount exceeds 10% of line 25, column				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(A) amount, list line 11g expenses on Schedule O.)	2460			
12	Advertising and promotion				
13	Office expenses	19521			
14	Information technology	1515			
15	Royalties				
16	Occupancy				
17	Travel	283			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates	371980			
22	Depreciation, depletion, and amortization	37,333	·····		
23	Insurance	400	······································		
24	Other expenses, Itemize expenses not covered	100			
	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.)				
•	Sahalarahin European	4000			
a	Caperal Mamber Services	4000			
b	General Mamber Services	72525		<b></b>	
C			<del></del>		
đ	All - al.				
е	All other expenses  Total functional expenses. Add lines 1 through 24e	13380			
25		642436			
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)				

Р	art X		1. 1/		<del></del>
	·	Check if Schedule O contains a response or note to any line in this Par		<del></del>	
	•		(A) Beginning of year		(B) End of year
-	1	Cash-non-interest-bearing	5655	1	16918
	2	Savings and temporary cash investments	419370	2	362193
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.		ļ	
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section		l	
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and		ŀ	
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary		ļ	
Ş		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
Ä	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	202	9	2702
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D		40-	
	b	Less: accumulated depreciation		10c	
	11	Investments—publicly traded securities		12	
	12	Investments—other securities. See Part IV, line 11		13	
	13	Investments—program-related. See Part IV, line 11		14	
	14	Intangible assets		15	
	15	Other assets. See Part IV, line 11	425227	16	381813
	16 17	Accounts payable and accrued expenses	423227	17	301013
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	***************************************
(n	22	Loans and other payables to current and former officers, directors,			
ij		trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons. Complete Part II of Schedule L		22	
<u>:</u>	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
es		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
2	27	Unrestricted net assets	425227	27	381813
or Fund Balances	28	Temporarily restricted net assets		28	
d d	29	Permanently restricted net assets		29	
٦		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and			
Ä		complete lines 30 through 34.			
ß	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
¥	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net Assets	33	Total net assets or fund balances	425227	1	381813
_	34	Total liabilities and net assets/fund balances	425227	34	381813
_					Form <b>990</b> (2014)

Page	1	2

roini b	80 (2014)			_ 78	ige 12
Par	t 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)			, <u>5</u>	99022
2	Total expenses (must equal Part IX, column (A), line 25)			6	42436
3	Revenue less expenses. Subtract line 2 from line 1				43414
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4				25227
5	Net unrealized gains (losses) on investments				
6	Donated services and use of facilities				
7	Investment expenses				
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain in Schedule O)				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	)		3	81813
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: ☑ Cash ☐ Accrual ☐ Other	Γ	$\Box$		
	If the organization changed its method of accounting from a prior year or checked "Other," explain	in	1		
	Schedule O.		[		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. [	2a		1
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled	or [			
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	ì	Ì		
Ь	Were the organization's financial statements audited by an independent accountant?	. 12	2b		1
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on	a			
	separate basis, consolidated basis, or both:	Ì	- 1		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		I		
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig	ht	_ ]		]
	of the audit, review, or compilation of its financial statements and selection of an independent accountant	?	2c		Ī
	If the organization changed either its oversight process or selection process during the tax year, explain	in [			
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth	in			
	the Single Audit Act and OMB Circular A-133?		3а		/
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	ne 🗀	1		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	. [:	зь		
			Form	990	(2014)

#### **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 2014

Open to Public Inspection

Department of the Treasury

➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," to 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," to 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.

	organization answered "Yes lee separate instructions), ti	e," to Form 990, Part IV, line 5 (Proxy hen	Tax) (see separate	instructions) or Form 990-	EZ, Part V, line 35¢ (Proxy
	ection 501(c)(4), (5), or (6) orga	nizations: Complete Part III.			
Name	of organization			Employer iden	tification number
	AcademicsAAUP/AFT Lo				03-0372108
		e organization is exempt unde			rganization.
1	•	the organization's direct and indire	•	-	
2	•				•••••
3	Volunteer hours				
Part		e organization is exempt unde			
1		excise tax incurred by the organiza			***********
2		excise tax incurred by organization			
3	If the organization incurre	ed a section 4955 tax, did it file For	m 4720 for this ye	ear?	
4a					Yes No
b	If "Yes," describe in Part				
Part		e organization is exempt unde			(c)(3).
1		ly expended by the filing organiz			
2	527 exempt function acti	filing organization's funds contribution vities		<b></b> \$	
3		expenditures. Add lines 1 and 2.			
4	Did the filing organization	n file Form 1120-POL for this year?	? <i>.</i>		Yes No
5	organization made paymethe amount of political co	ses and employer Identification nurents. For each organization listed, ontributions received that were profound or a political action committed.	enter the amount property	paid from the filing organi delivered to a separate p	zation's funds. Also enter colitical organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount pald 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)					

	_							
chedule	С	(Form	990	or	990	·EZ)	201	4

an	_	2

COLIC	וטופ ט וויטווו ששטיבבן צטויי					rage 4
	t II-A Complete if the organization section 501(h)).				·	•
A	Check ► ☐ if the filing organization be name, address, EiN, expe					up member's
в (	Check ► ☐ if the filing organization ch					
	Limits on Lob				(a) Filing	(b) Affiliated
	(The term "expenditures" m	eans amounts	paid or incurred.	)	organization's totals	group totals
18	Total lobbying expenditures to influence	public opinion	(grass roots lobby	/ing)		
t						
c	Total lobbying expenditures (add lines 1a and 1b)			<del>.</del>		
c						
e	<b>—</b> • • • • • • • • • • • • • • • • • • •					·····
f	Lobbying nontaxable amount. Enter	the amount f	rom the following	g table in both		
	columns.					
	If the amount on line 1e, column (a) or (b) is	: The lobbying	nontaxable amoun	t is:		
	Not over \$500,000	20% of the ar	mount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	s 15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	s 10% of the excess	over \$1,000,000	1	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess o	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000.				
9	Grassroots nontaxable amount (enter 2	5% of line 1f)				
h	Subtract line 1g from line 1a. If zero or l	ess, enter -0-				
i	Subtract line 1f from line 1c. If zero or le					
j	If there is an amount other than zero		1h or line 1i, did	the organization	file Form 4720	
	reporting section 4911 tax for this year		<u> </u>			Yes No
	(Some organizations that made a se	ction 501(h) el	Period Under sec ection do not hav ructions for lines	e to complete all	of the five column	as below.
	Lobbying	; Expenditures	During 4-Year A	veraging Perlod		
	Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) Total
<b>2</b> a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))					
C	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					· ····

Schedule C (Form 990 or 990-EZ) 2014

	(election under section 501(h)).	(2	3)		(b)	
	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed liption of the lobbying activity.	Yes	No	Aı	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?			ĺ		
Ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			ĺ		
C	Media advertisements?	!			. <u>.</u>	
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?			<b> </b>		
9	Direct contact with legislators, their staffs, government officials, or a legislative body?			<b>—</b>		
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?					
j	Total. Add lines 1c through 1i			<b></b>		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
ь	If "Yes," enter the amount of any tax incurred under section 4912			<del></del>		
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<i>(</i> -1)				
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), (	or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	1	
3 Post	Did the organization agree to carry over lobbying and political expenditures from the prior year? .  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)			3		✓
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."				line	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).	of				
а	Current year		2a			
b	Carryover from last year	-	2b	<u> </u>		
C	Total	-	2c	<b></b>		
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of	the	3_		<u></u>	
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Part	V Supplemental Information					
	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grou	ab lis	t); Pai	t II-A, I	ines 1	and
2 (see	instructions); and Part II-B, line 1. Also, complete this part for any additional information.					
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#### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

United Academics--AAUP/AFT Local 3203 03-0372108 Part VI Section A. Governing Board and Management: Line 6: The organization is based on membership dues, therefore, the organization has members. Line 7: The members nominate and elect members of the governing board. Part VI Section B. Policies: Line 11B: Form 990 is prepared by the higher organization, reviewed by the Treasurer and President of the organization. Line 15B: Compensation is reviewed during the annual budget process and approved by the Executive Board. Part VI Section C. Disclosure: Line 19: Specified documents are made available by request to members. IRS Form 990 is available in PDF format to facilitate distribution. Addicionally, independent organizations such as GuideStar provides organizational information for public view.