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For Paperwork Reduction Act Notice, see the separate instructions.

Form 990;

Department of the Treasury

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

2015

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

Open to Public

1110	nai Reven			<i>190.</i>	mspection		
<u>A</u> _	For the	2015 calendar year, or tax year beginning July 1 , 2015, and end	ing J	une 30	, 20 16		
В	Check if	applicable. C Name of organization United AcademicsAAUP/AFT Local 3203	D Employ	D Employer identification number			
	Address	change Doing business as	03-0372108				
	Name ch	nange Number and street (or P.O box if mail is not delivered to street address) Room/s	E Telepho	ne number			
	Initial ret	urn Box 31, 85 South Prospect Street		· I	808-656-1428		
	Final retur	n/leminated City or town, state or province, country, and ZIP or foreign postal code					
	Amende	d return Burlington, VT		G Gross r	eceipts \$ 686,85		
\Box		on pending F Name and address of principal officer. John Forbes, same as above	H(a) is this	a group return for	subordinates? Yes No		
					es included? Yes No		
$\overline{}$	Tax-exer	npt status			a list (see instructions)		
J	Website			up exemption			
ĸ		organization: ☐ Corporation ☐ Trust ☐ Association ☐ Other ► Labor		<u> </u>	of legal domicile. VT		
	art I	Summary	200				
	1		r Union Ora	anizing Re	presentation of member		
۵	1	in workplace related matters. Increase membership in the organization.	. Ornion Grg	2111211191110	prosonation of menior		
Activities & Governance		III WOLK PIECE TELECT TIBLEES. III CIEBSE THE TIBLE STIP III THE OLGENIZATION.					
Ĕ	2	Check this box ▶☐ if the organization discontinued its operations or disposed	of more th	an 25% of	ite net secete		
ĕ	I	and the second of the second o		1 _	1		
9	ì				 		
ŝ	4	Number of independent voting members of the governing body (Part VI, line 1b),				
Ę		Total number of individuals employed in calendar year 2015 (Part V, line 2a)		. 5	2		
Ę	6	Total number of volunteers (estimate if necessary)		6			
<	I .	Total unrelated business revenue from Part VIII, column (C), line 12		7a			
_	<u>b</u>	Net unrelated business taxable income from Form 990-T, line 34		7b_			
			Prior	Year	Current Year		
Revenue	8	Contributions and grants (Part VIII, line 1h) 350	596615	68507			
	9	Program service revenue (Part VIII, line 2g)					
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2407	177		
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e).					
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u> </u>	599022	68685		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			<u></u>		
	14	Benefits paid to or for members (Part IX, column (A), line 4)					
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		143254	14841		
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)					
ĝ	b	Total fundraising expenses (Part IX, column (D), line 25) ▶	2. 数据	1411. 1 × 11	20 中17 · 强门整新门		
П	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		499182	45120		
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		642436			
	19	Revenue less expenses. Subtract line 18 from line 12		-43414			
ь 8			Beginning of	Current Year			
Assets or Balances	20	Total assets (Part X, line 16)		382009	49923		
& E	21	Total liabilities (Part X, line 26)			10020		
¥.5	22	Net assets or fund balances. Subtract line 21 from line 20		382009			
	art II	Signature Block		- 002000	10020		
		ttes of perjury, I declare that I have examined this return, including accompanying schedules and sta	tomonte and t	a the heet of	my knowledge, and belief it i		
		t, and complete. Declaration of preparer wither than officer to based on all information of which prepa			my knowlodge and beller, it i		
_				Γ			
Sig	ın	Signature of officer		Date			
He		JOSEPH M. KNORIE		SEPT.	9 2016		
•••		Type or print name and title		NOLI	1000		
_			Date	····	- PTIN		
Pa		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-uto	Check	[] If [
	epare			self-em	ployed		
Us	se Onl		<u>F</u>	irm's EIN ▶	- ,,		
-		Firm's address >		hone no			
_		RS discuss this return with the preparer shown above? (see instructions)	<u></u>	<u> </u>	Yes No		
For	Paperv	vork Reduction Act Notice, see the separate instructions. Cat	No 11282Y		Form 990 (2015		

Cat No 11282Y



Form 99	90 (2015)		Page 2
Part		atement of Program Service Accomplishments neck if Schedule O contains a response or note to any line in this Part III	
1		lescribe the organization's mission:	
	To act	s a collective bargaining agente and seek optimum working conditions. To provide members with representation a	and due
	proces	. To act as a liason between teachers, administrators and school committees. To promote professionalism among	members.
	Did th	organization undertake any significant program services during the year which were not listed on the	
2	prior f	rm 990 or 990-EZ?	′es ☑No
3	Did th	describe these new services on Schedule O. organization cease conducting, or make significant changes in how it conducts, any program	′es ☑No
	If "Yes	describe these changes on Schedule O.	
4	Descr	e the organization's program service accomplishments for each of its three largest program services, as ness. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation lexpenses, and revenue, if any, for each program service reported.	
4a	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	(

	******	***************************************	

4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	**********	**************************************	
		***************************************	**************
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	·		
		······································	
	•	**************************************	
		V LAND CO. C.	

4d		ogram services (Describe in Schedule O.)	
	(Exper		
<u>4e</u>	Total r	param service expenses >	

Part	V Checklist of Required Schedules			
. '			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I			
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		/
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	1	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I			√
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>▼</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		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		√
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		<u>·</u>
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.	-10		•
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	-	√
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		√
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	-	<u>·</u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		✓
	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	11e		✓
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .	11f		✓
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		√
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		·
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		<u>▼</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u>*</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>*</u> ✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		<u>, </u>
		1.0		<u> </u>

Part	Checklist of Required Schedules (continued)			,
20 -	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	60	Yes	No
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 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		√
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
	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
d 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		
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 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		✓
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	29 30		√
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		✓
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		√ <u></u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
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			1
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.	37 38	√	
		For	n 99 0	(2015)

Part				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1006. Enter 10 of not applicable.		res	NO
b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and		\	1
Ŭ	reportable gaming (gambling) winnings to prize winners?	1c	Ţ.	-
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	- ''	-	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 22			l '
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	- '	1
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			-
За	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		<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		✓
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			١.
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<u> </u>	✓
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			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		/
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or		}	
_	gifts were not tax deductible?	6b	ļ	
7	Organizations that may receive deductible contributions under section 170(c).			1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	_		
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		1
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	76	 	 *
•	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			 •
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		7
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		1
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		✓
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponșoring organization make any taxable distributions under section 4966?	9a		✓
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		/
10	Section 501(c)(7) organizations. Enter:		i	
а	Initiation fees and capital contributions included on Part VIII, line 12		٠.	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	٠ '		,
11	Section 501(c)(12) organizations. Enter:	'		1
a	Gross income from members or shareholders		ı.	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	- 1		-
10-	· · · · · · · · · · · · · · · · · · ·	40-	ł	
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		ļ
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	,		,.
a	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.	138	 	
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	l	ļ
С	Enter the amount of reserves on hand	1		1
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14b	 	ŀ∸

Part	VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Schedule O contains a response or note to any line in this Part VI	See in	for a	ions.
Sect	ion A	Governing Body and Management	<u> </u>	<u> </u>	<u>بي .</u>
			-	Yes	No
1a		r the number of voting members of the governing body at the end of the tax year.			
		ere are material differences in voting rights among members of the governing body, or			1
		e governing body delegated broad authority to an executive committee or similar mittee, explain in Schedule O.		, ,	ļ.,
b		r the number of voting members included in line 1a, above, who are independent . 1b		1	
2		any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		1
		other officer, director, trustee, or key employee?	2		1
3		the organization delegate control over management duties customanly performed by or under the direct rvision of officers, directors, or trustees, or key employees to a management company or other person?	3		1
4	-	ne organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	-	-
5		he organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6		he organization have members or stockholders?	6	1	
7a		he organization have members, stockholders, or other persons who had the power to elect or appoint			
_		or more members of the governing body?	7a	✓	
b		any governance decisions of the organization reserved to (or subject to approval by) members, cholders, or persons other than the governing body?		,	
8		he organization contemporaneously document the meetings held or written actions undertaken during	7b	/	
•		ear by the following:	•		
а	The	governing body?	8a	1	İ
b		committee with authority to act on behalf of the governing body?	8b	1	
9		ere any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	l _		,
Sooti		rganization's mailing address? If "Yes," provide the names and addresses in Schedule O. Policies (This Section B requests information about policies not required by the Internal Reven	9		<u> </u>
Secu	OII B.	Policies (This Section & requests information about policies not required by the internal never	ue C	Yes	No
10a	Did t	he organization have local chapters, branches, or affiliates?	10a	<u> </u>	1
b	If "Ye	es," did the organization have written policies and procedures governing the activities of such chapters,			<u> </u>
		tes, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a		ne organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		1
b		ribe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a b		the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b		-
C		the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
_		ribe in Schedule O how this was done	12c		
13	Did ti	ne organization have a written whistleblower policy?	13		1
14		ne organization have a written document retention and destruction policy?	14	✓	
15		he process for determining compensation of the following persons include a review and approval by endent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	ļ	ŀ	
_		organization's CEO, Executive Director, or top management official	150	1	
a b		reflicers or key employees of the organization	15a 15b	∀	-
_		is" to line 15a or 15b, describe the process in Schedule O (see instructions).		Ť	
1 6 a		he organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
		a taxable entity during the year?	16a	<u> </u>	1
b		es," did the organization follow a written policy or procedure requiring the organization to evaluate its	1		
	partic	expation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the hization's exempt status with respect to such arrangements?	100		
Secti		Disclosure	16b	i	<u> </u>
17		he states with which a copy of this Form 990 is required to be filled ▶ none			
18		on 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	n 501	c)(3)s	only
		able for public inspection. Indicate how you made these available. Check all that apply.		-	,
		wn website			
19		ribe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	polic	y, and
20		cial statements available to the public during the tax year.			
20		the name, address, and telephone number of the person who possesses the organization's books and re	cords	-	
	JUE K	udrie, same as page 1	_		

Form 990 (201	51

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization no	r any relate	d orga	aniz	atio	n c	ompe	n <u>sa</u>	ted any curren	t officer, director	, or trustee.
(A) Name and Title	(B) Average hours per week (list any	box, office	unles er and	Pos eck s pe	เรอก	than o	าลก		(E) Reportable compensation from	
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) John Forbes, President	10									
Burlington, VT 05405			•	✓		1		6600		
(2) Joe Kudrle, Troasurer	10									
Burlington, VT 05405				✓	_		L	13200		
(3) Alison Pechenick, Secretary	5]					1			
Burlington, VT 05405	.	<u> </u>		✓	<u> </u>		_	6600		
(4)			}							
(5)	1									
(6)										
(7)										
(8)										
(8)		-								
(10)							-			
(11)	<u> </u>									
(12)										
(13)	 						†		-	
(14)					-		 	26400		-

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mplo	yee			lighe	st C	ompensated E	mployees (continue	d) ·		•
	(A) Name and title		box,	unles	Pos neck ss pe	rson	e than one of the state of the	n an	(D) Reportable compensation	(E) Reportation	n from	Esti amo	(F) mated ount of	
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatio (W-2/1099-N	ons	comp fro orga and	ther ensatio m the nization related nization	1
(15)														-
(16)														
(17)										-		·		
(18)														
(19)														
(20)										L			-	
(21)														
(22)														
(23)								-						
(24)				1										
(25)														
1b c	Sub-total	VII. Section	 n A	•	•		•	►	26400					
d	Total (add lines 1b and 1c)							<u> </u>	26400					
2	Total number of individuals (including but reportable compensation from the organi			ose	list	ed a	above	e) w	ho received mo	ore than \$1	00,000	of 		
3	Did the organization list any former of	ficer, direct	tor, o	r tr	uste	ee,	key e	mp	oloyee, or high	est compe	nsated	[Yes	No
4	employee on line 1a? If "Yes," complete 5											3		1
4	For any individual listed on line 1a, is the organization and related organizations												,	
5	individual									ation or inc	 dividual	4		√
Section	for services rendered to the organization? on B. Independent Contractors	r if "Yes," c	ompi	ete .	Sch	eau	ile J f	or s	such person	· · · ·	•	5		_ ✓_
1														
	(A) Name and business addi	ress						 	(B) Description of s	ervices	C	(C) compens	ation	_
2	Total number of independent contracto received more than \$100,000 of compensations.							th	ose listed abo	ove) who				

Total revenue. See instructions.

	90 (201 VIII	<u> </u>	enue					Page
Far	. VIII	Statement of Revo	enue) contains a re	esponse or note to	any line in this	Part VIII . ,		
		Check if Schedule C			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ats str	1a	Federated campaign	s 1	a		· · · · · · · · · · · · · · · · · · ·		
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	1	b 570088				
ß, C	С	Fundraising events .		С				
ia i	d	Related organizations						
ns,	е	Government grants (cor		e				
artio er	f	All other contributions, g		.			:	
ğ Ş		and similar amounts not inc	L				i.	
Po	9	Noncash contributions inclu Total. Add lines 1a-1						
	h	Total. Add lines (a-1	<u> </u>	▶ Business Code	685072			
Program Service Revenue	2a							
Rev	b							
ice	c			1				
ěΖ	d			- I			·	
Ē	е							
gra	f	All other program ser						
<u> </u>	g	Total. Add lines 2a-2	lf					
	3	Investment income						
		and other similar amo	•		1779			
	4	Income from investmen						
	5	Royalties	(3 Dool				· · · · · · · · · · · · · · · · · · ·	
	•		(i) Real	(ii) Personal				ļ
	6a	Gross rents	ļ					
	b	Less. rental expenses Rental income or (loss)						
1	d	Net rental income or	(loss)		I			
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory			-			
İ	b	Less cost or other basis						
		and sales expenses .						
	С	Gain or (loss)			ŀ			
	d	Net gain or (loss) .						
venue	8a	Gross income from fu	undraising					
Other Rev		of contributions reporte	ed on line 1c).		į	1	•	
th	b	Less: direct expenses						
0		Net income or (loss) f						
		Gross income from ga See Part IV, line 19	aming activities					
	b	Less: direct expenses		b	j			
ļ	С	Net income or (loss) f	rom gaming a	ctivities ►				
	10a	Gross sales of in returns and allowance		a				
Į	b	Less. cost of goods s		b	Ì	1		Ì
	С	Net income or (loss) f	rom sales of in	ventory ►				
		Miscellaneous P	Revenue	Business Code				
	11a							
	b			.				
	C	All all a		.			···	
ļ	d	All other revenue .						
	-	LOTAL ACID MORE 110	. 1 1 7			1		i e

Dovt IV Chahamant of Franchismal Franchism				
Part IX Statement of Functional Expenses	Part I)	X Statement	of Functional	Expenses

Section	n 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon	se or note to any lir	ne in this Part IX .		
Do no 8b, 9t	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) 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				1
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16.				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	26400			
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	117158			
9	Other employee benefits				
10	Payroll taxes	4859			
11	Fees for services (non-employees):				
а	Management	1			
b	Legal	3040			
C	Accounting	750			
d	Lobbying		İ		
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 Schedule O.)	1927	· · · · · · · · · · · · · · · · · · ·		
12	Advertising and promotion	1327			
13	Office expenses	5314			
14	Information technology	1058			
15	Royalties	,,,,,,			-
16	Occupancy	· · · · · · · · · · · · · · · · · · ·			
17	Travel				······································
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	352550			
22	Depreciation, depletion, and amortization .				
23	Insurance	350			
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)	ĺ	İ	İ	
а	General Member Services	50663			
ь					
С			- <u>-</u>		·····
d		· - · · · · · · · · · · · · · · · · · ·			
е	All other expenses	5555			
25	All other expenses Total functional expenses. Add lines 1 through 24e	569624			····
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)				

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 1 16918 35075 2 Savings and temporary cash investments 2 362389 458397 3 Pledges and grants receivable, net 3 4 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 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 instructions). Complete Part II of Schedule L 6 7 8 Inventories for sale or use . . . 8 Prepaid expenses and deferred charges 9 2702 9 5764 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 10b 10c 11 Investments—publicly traded securities 11 12 Investments—other securities. See Part IV, line 11 . 12 13 Investments - program-related. See Part IV, line 11. 13 Intangible assets 14 14 15 Other assets. See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . 382009 16 499236 17 17 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 22 Loans and other payables to current and former officers, directors, trustees, 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 24 24 Unsecured notes and loans payable to unrelated third parties . . . Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 26 Total liabilities. Add lines 17 through 25 . 26 ol Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 382009 499236 28 28 Permanently restricted net assets . . . 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 32 Retained earnings, endowment, accumulated income, or other funds. 33 33 382009 499236 Total liabilities and net assets/fund balances . . . 34

499236

382009

Form 9	90 (2015)			Pe	ge 12
Par	t XI Reconciliation of Net Assets			_	-
	Check if Schedule O contains a response or note to any line in this Part XI				. 🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1		_	86851
2	Total expenses (must equal Part IX, column (A), line 25)	2		5	69624
3	Revenue less expenses. Subtract line 2 from line 1	3		1	17227
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3	82009
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8		8			
9	the state of the s	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
		10		4	99236
Part					
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>		·	
				Yes	No
1	Accounting method used to prepare the Form 990: ☑ Cash ☐ Accrual ☐ Other			مساني	· .
	If the organization changed its method of accounting from a prior year or checked "Other," explain	ain in	"	2 •	'
	Schedule O.				ľ`
2a	Were the organization's financial statements complled or reviewed by an independent accountant? .		2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were compile	ed or	٠.		1.
	reviewed on a separate basis, consolidated basis, or both:		. '	ريا يا دور ال	\$. ^{5.7}
	Separate basis Consolidated basis Both consolidated and separate basis		_ * .	اد ا 	1 May 1 1
b	Were the organization's financial statements audited by an independent accountant?		2b		/
	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:		-	;	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 over				
	of the audit, review, or compilation of its financial statements and selection of an independent account.		2c		
	If the organization changed either its oversight process or selection process during the tax year, explision Schedule O.	ain in			
٥-		eth le		!	- '
Зa	As a result of a federal award, was the organization required to undergo an audit or audits as set for the Single Audit Act and OMB Circular A-133?	rın in	_		
	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo		3a		✓
D	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such aud		зь		
	required addit of addits, explain why in obligation of and describe any steps taken to undergo such add	no.		000	
			Form	1 220	(2015)

SCHEDULE C (Form. 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047 20**15**

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

see separate instructions), t	nen			
	anizations: Complete Part III			
of organization		-	Employer ider	ntification number
				03-0372108
				organization.
•		•	_	
		· · · · · · ·		
Volunteer hours				
I-B Complete if the	e organization is exempt und	er section 501(d	c)(3).	
Enter the amount of any	excise tax incurred by the organiza	ation under section	n 4955 ▶ \$	
				Yes No
				🗌 Yes 🔲 No
				(c)(3).
		•		
			· ·	
				nolitical organization, such
	I fund or a political action committe	e (PAC). If additio	nal space is needed, prov	
	fund or a political action committe		T	ide information in Part IV.
(a) Name	fund or a political action committe (b) Address	ee (PAC). If additio	(d) Amount paid from	ide information in Part IV.
	I		T	ide information in Part IV. (e) Amount of political contributions received and promptly and directly
	I		(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate
	I		(d) Amount paid from filing organization's	ide information in Part IV. (e) Amount of political contributions received and promptly and directly
	I		(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If
	I		(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If
	I		(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If
	I		(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If
	I		(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If
	I		(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If
	I		(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If
	Academics—AAUP/AFT Local Provide a description of the Provide a description of the Provide a description of the Provide a description of the Provide a description of the Political expenditures. I-B Complete if the Enter the amount of any If the organization incurred Was a correction made? If "Yes," describe in Part I-C Complete if the Enter the amount direct activities. Enter the amount of the 527 exempt function action Total exempt function action Total exempt function elline 17b. Did the filing organization Enter the names, address organization made payment the amount of political control of the political exempt function and the payment of political exempt function and the payment of political exempt function and the payment of political exempt function and payment the amount of political exempt function and payment amount of political exempt function and payment amount of political exempt function and payment amount of political exempt function and paymen	Academics—AAUP/AFT Local 3203 I-A Complete if the organization is exempt under Political expenditures Volunteer hours I-B Complete if the organization is exempt under the amount of any excise tax incurred by the organization if the organization incurred a section 4955 tax, did it file Forwas a correction made? If "Yes," describe in Part IV. I-C Complete if the organization is exempt under the amount directly expended by the filing organization incurred as exempt under the amount directly expended by the filing organization in the activities Enter the amount of the filing organization's funds contributions. Total exempt function activities. Total exempt function expenditures. Add lines 1 and 2 line 17b Did the filing organization file Form 1120-POL for this year and employer identification nurorganization made payments. For each organization listed, the amount of political contributions received that were pro-	Academics—AAUP/AFT Local 3203 I—A Complete if the organization is exempt under section 501(a) Provide a description of the organization's direct and indirect political campa Political expenditures Volunteer hours I—B Complete if the organization is exempt under section 501(a) Enter the amount of any excise tax incurred by the organization under section Enter the amount of any excise tax incurred by organization managers under if the organization incurred a section 4955 tax, did it file Form 4720 for this yea. If "Yes," describe in Part IV. I—C Complete if the organization is exempt under section 501(a) Enter the amount directly expended by the filing organization for section activities Enter the amount of the filing organization's funds contributed to other org 527 exempt function activities Total exempt function expenditures. Add lines 1 and 2. Enter here and line 17b Did the filing organization file Form 1120-POL for this year? Enter the amount of political contributions received that were promptly and directly and directly expended that were promptly and directly and contributions received that were promptly and directly and a contributions received that were promptly and directly and directly and a contributions received that were promptly and directly and a contributions received that were promptly and directly and a contributions received that were promptly and directly and a contributions received that were promptly and directly and a contributions received that were promptly and directly and contributions received that were promptly and directly and a contributions received that were promptly and directly and contributions received that were promptly and directly and contributions received that were promptly and directly and contributions received that were promptly and directly and contributions received that were promptly and directly and contributions received that were promptly and directly and contributions received that were promptly and directly and contributions received that were pr	Academics—AAUP/AFT Local 3203 I-A Complete if the organization is exempt under section 501(c) or is a section 527 or Provide a description of the organization's direct and indirect political campaign activities in Part IV. Political expenditures Volunteer hours I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? If "Yes," describe in Part IV. I-C Complete if the organization is exempt under section 501(c), except section 501 Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b Did the filling organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organic organization made payments. For each organization listed, enter the amount paid from the filling organication the filling organization the filling organization here the amount paid from the filling organization made payments. For each organization listed, enter the amount paid from the filling organization made payments.

Page	2
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Pa	rt I	-A		Complete if the organiza section 501(h)).	tior	is exempt	under section 5	01(c)(3) and file	d Form 5768 (ele	ection under
A	Che	eck	▶	if the filing organization						oup member's
_	<u> </u>			name, address, EIN, ex	•				•	
<u>B</u>	Che	eck	<u> </u>	if the filing organization				itrol" provisions a	/ ` 	
				Limits on L (The term "expenditures		ying Expendit		13	(a) Filing organization's totals	(b) Affiliated group totals
		Tata						<u> </u>	organization, o totalo	group totals
				bbying expenditures to influe bbying expenditures to influe				• •		
				· · ·		-	• •			
				bbying expenditures (add line xempt purpose expenditures		•				
				empt purpose expenditures					}	
	f		byin	ig nontaxable amount. Ent			•			
		f the	am	ount on line 1e, column (a) or (l) is:	The lobbying	nontaxable amour	nt is:		
	1	Not c	ver	\$500,000		20% of the ar	nount on line 1e		l	
	<u> </u>			0,000 but not over \$1,000,000			s 15% of the excess]	
	-		_	000,000 but not over \$1,500,000			s 10% of the excess			
	_		_	500,000 but not over \$17,000,00)	 	5 5% of the excess of	over \$1.500.000.	,	* * * * * * * * * * * * * * * * * * * *
				,000,000	. 056	\$1,000,000			, , , , , , , , , , , , , , , , , , ,	* '
	_			ots nontaxable amount (ente				• • • • • •		
				t line 1g from line 1a. If zero						
				t line 1f from line 1c. If zero of is an amount other than z			th or line 11 die	the organization	file Form 4720	
				g section 4911 tax for this ye	ar?		<u> </u>	<u> </u>		Yes No
		(So	me	organizations that made a	sec	tion 501(h) el	Period Under sec ection do not hav ructions for lines	e to complete all	of the five column	ns below.
				Lobby	ing	Expenditures	During 4-Year A	veraging Period	1	
		C	alen	dar year (or fiscal year beginning ın)		(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2	a l	obt	byın	g nontaxable amount						_
				g ceiling amount of line 2a, column (e))				,		
	c 1	Γota	lot	obying expenditures						
	d (Gras	sro	ots nontaxable amount					-	
				ots ceiling amount of line 2d, column (e))						
1	f (Gras	sro	ots lobbying expenditures						

Part	II-B *Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Forn	1 5768	1	
For each "Yes," response on lines 1a through 11 below, provide in Part IV a detailed		(;	a))		
	iption of the lobbying activity.	Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			٠, .		,
а	Volunteers?			* \$, . 2	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			-		
С	Media advertisements?			1		
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
į	Other activities?			ļ <u>.</u>		
j	Total. Add lines 1c through 1i	i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	ļ		}		٠.
b	If "Yes," enter the amount of any tax incurred under section 4912					
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 . If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			<u> </u>		
	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	1(5)	or so	ction		
	501(c)(6).	,,, , ,,,	J. 3C	Otion		
					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	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	<u> </u>	✓
	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," (answered "Yes."				line	3, is
1 2	Dues, assessments and similar amounts from members	s of	1			
а	Current year		2a			
b	Carryover from last year		2b			
C	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues a		3_			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb	ying				
_	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5_	[<u>_</u>		
Par Provid 2 (see	Supplemental Information the the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gradinstructions); and Part II-B, line 1. Also, complete this part for any additional information.	oup lis	t); Par	rt II-A, I	ines 1	and

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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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization		Employer Identification number
United AcademicsAAUP/AFT Local 3203		03-0372108
Part VI Section A. Governing Board and Management:		
Line 6: The organization is based on membership dues, therefore, the organization has	s 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 member's requests. IRS Form 990	is available in Pl	OF format to facilitate distribution
Additionally, independent organizations such as GuideStar provides organizational inf	formation for pub	ic view.
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