Firm's name

Firm's address ▶

May the IRS discuss this return with the preparer shown above? (se For Paperwork Reduction Act Notice, see the separate instructions.

Use Only



2949303307308 **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

2017

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

Open to Public

		ittne Treasury nue Service	► Go to www.irs.gov/Form990 for instructions and the late	est information	1. [DUK	Inspection	
A	For the	2017 cale	endar year, or tax year beginning July 1 , 2017, and er	ر iding	une 30	, 20 18	
В	Check if	applicable	C Name of organization Northside American Federation of Teachers		D Employer Identification number		
	Address	change	Doing business as	··	7	46-3810059	
✓	Name ch	hange	Number and street (or P O box if mail is not delivered to street address) Room	n/suite	E Telepho	ne number	
	Initial ret	tum	6800 Park Ten Blvd.	123N		210-227-8083	
	Final retu	rn/terminated	City or town, state or province, country, and ZIP or foreign postal code		<u> </u>		
	Amende	d return	G Gross re	eceipts \$ 795,460			
	Applicati	tion pending	F Name and address of principal officer. Wanda Longoria, same as above	H(a) Is this	a group return for	subordinates? Yes No	
						s included? 🗹 Yes 🔲 No	
!	Tax-exe	mpt status	☐ 501(c)(3)	(OS) If	"No," attach a	a list (see instructions)	
<u>J</u>	Website	e: >		H(c) Gro	up exemption	number ▶ 0787	
		organization:		mation: 201	5 M State	of legal domicile TX	
Р	art I	Summ	~				
	1	Briefly de	escribe the organization's mission or most significant activities: Lab	or union orga	nizing, repi	resentation of members	
<u>S</u>		in workpl	ace related matters. Increase membership in the organization				
Governance							
Ver	2		is box $ ightharpoonup \square$ if the organization discontinued its operations or dispose	ed of more th	an 25% of	its net assets.	
Ĝ	3		of voting members of the governing body (Part VI, line 1a)		. 3	13	
Activities &	4		of independent voting members of the governing body (Part VI, "		. 4	13	
itie	5		nber of individuals employed in calendar year 2017 (Part V, line		. 5	1	
훒	6		nber of volunteers (estimate if necessary)	. 6	<u> </u>		
Ā	7a		elated business revenue from Part VIII, column (C), line 12 .	. <u>7a</u>	<u> </u>		
	b	Net unrel	ated business taxable income from Form 990-T, line 34		. 7b	0	
	_			Prior		Current Year	
ne	8		tions and grants (Part VIII, line 1h)		943614	795292	
Revenue	9	_	service revenue (Part VIII, line 2g)				
Re	10		nt income (Part VIII, column (A), lines 3, 4, and 7d)				
	11		renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	125 168			
	12		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		943739	795460	
			nd similar amounts paid (Part IX, column (A), lines 1–3)				
		-	paid to or for members (Part IX, column (A), line 4)				
Expenses			other compensation, employee benefits (Part IX, column (A), lines 5-10) and fundraising fees (Part IX, column (A), line 11e)		25037	33271	
ē			draising expenses (Part IX, column (D), line 25), PECE/VED	1-1			
Ä			penses (Part IX, column (A), lines 11a-11d, 11t-24e)				
	18	Total ava	enses. Add lines 13–17 (must equal Part IX column (A), the 25018.	080	638899	533518	
	19	Revenue	less expenses. Subtract line 18 from line 1211		663936		
- S		HOVORIGO	icas expenses, educing interior nontrinie	တ် Beginning of	279803 Current Year	228671 End of Year	
ance ance	20	Total ass	ets (Part X, line 16)	•		1129271	
Ass	21		ilities (Part X, line 26)	- 	900600	11292/1	
Net Assets or Fund Balances	22		as or fund balances. Subtract line 21 from line 20		900600	1129271	
	art II		rure Block	_ 	900000	11292/1	
			ry, I declare that I have examined this return, including accompanying schedules and st	tatements and to	the heet of r	my knowledge and belief it is	
true	e, correct	t, and comple	ete Peclaration of preparer (other than officer) is based on all information of which prep	arer has any kno	wledge	ny knowledge and beller, it is	
		1	Panda & Sanoria	· · · · · · · · · · · · · · · · · · ·	4/24	110	
Sig	ın	Signa	ature of officer				
He		الألأ	anda R. Longoria Pres				
		Type	or print name and title				
D-		17,	pe preparer's name Preparer's signature				
Pa		_ [
	epare	T					

Form 99	0 (2017	<u>, , , , , , , , , , , , , , , , , , , </u>	; Page 2
Part		Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	
1		ly describe the organization's mission.	<u>ليا ٠٠٠ ليا</u>
•		et as a collective bargaining agent and seek optimum working conditions. To provide members representation and o	tuo prácoca:
		et as a liason between teachers, administrators, and school committees. To promote professionalism among memb	
		seas a nason between teachers, administrators, and school committees. To promote professionalism alliong memb	er 5.
2	Dıd t	he organization undertake any significant program services during the year which were not listed on the	
	prior	Form 990 or 990-EZ?	Yes 🗹 No
3	Did 1	es," describe these new services on Schedule O. the organization cease conducting, or make significant changes in how it conducts, any program ces?	Yes ☑ No
	If "Ye	es," describe these changes on Schedule O.	
4	Desc expe	cribe the organization's program service accomplishments for each of its three largest program services, as inses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation of expenses, and revenue, if any, for each program service reported.	measured by ons to others,
4a	(Code	e:) (Expenses \$including grants of \$) (Revenue \$)

	+		
	/0 1		
4b	(Code	e:) (Expenses \$including grants of \$) (Revenue \$)

	*****		·····
		101	
4c	(Code	e:) (Expenses \$ * including grants of \$) (Revenue \$	
70	,	e:) (Expenses \$including grants of \$) (Revenue \$)
		,	
		-	
Ad	Othor	r program convices (Describe in Schedule O.)	
4d	(Expe	r program services (Describe in Schedule O.) enses \$ including grants of \$) (Revenue \$)	
40	Total	program service expenses ▶	

TOTTI	50 (2011)			raye c
Rart	Checklist of Required Schedules			1 41-
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
	complete Schedule A	1_		/
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		✓
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	3		/
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? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	√	
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	- -	1
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		1
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		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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			•
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, 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	*	1
С	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		1
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		/
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	<u> </u>	7
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		7
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
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		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, Patts III aRITECEIVED	16		▼
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part (See Instructions) 2011	17		▼
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18	-	▼
19	Did the organization report more than \$15,000 of gross income from gaming action to be being the part of "Yes," complete Schedule G, Part III	19		\

	DV Charlist of Dominal Calculator (and the control of the control	_ ,	<u>, </u>	age 4
Part	Checklist of Required Schedules (continued)		Yes	· No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	168,	1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	,	
21	Did the organization-report-more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II]	
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	21		√
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		<u> </u>
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		√
c b	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	:	√
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		√
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		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		· · · ·
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		<u>√</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		√
32	Part I	31		✓
33	complete Schedule N, Part II	32		✓
34	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		✓
35a	or IV, and Part V, line 1	34 35a		<u>√</u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	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		✓
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,			

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.

Form **990** (2017)

Rart				
-	Check if Schedule O contains a response or note to any line in this Part V	• •	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a		103	140
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	7	
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 1			
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		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b	-	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		/
b	If "Yes," enter the name of the foreign country ▶	48		
-	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		
C	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			
L	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	CL		
7	gifts were not tax deductible?	6b		-
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		7
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		1
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓
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		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		√
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		1
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711		-
	sponsoring organization have excess business holdings at any time during the year?	8		7
9	Sponsoring organizations maintaining donor advised funds.	-		Ť
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		1
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
a b	Gross income from members or shareholders	}		
-	against amounts due or received from them.)			
12a		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accorded the light the year . 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	44		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		/
n	ni ites, has il med a comi 770 no redon mese davidents (Il "Mo", orovide an explanation in Schedule Ci		1	

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes	s ih Schedule O. S	ee ins	structi					
Secti	Check if Schedule O contains a response or note to any line in this Part VI on A. Governing Body and Management		· ·	en enin					
7.7		-		Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 13							
;	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.	,	,		ſ				
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 any other officer, director, trustee, or key employee?	1b 13 elationship with	2						
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 99	0 was filed?	4		√				
5	Did the organization become aware during the year of a significant diversion of the organization	on's assets?.	5		1				
6 7a	Did the organization have members or stockholders?								
b	Are any governance decisions of the organization reserved to (or subject to approval stockholders, or persons other than the governing body?		7b	<i>'</i>	<u></u>				
8	Did the organization contemporaneously document the meetings held or written actions un the year by the following:	dertaken during							
а	The governing body?		8a	✓					
b	Each committee with authority to act on behalf of the governing body?		8b	\					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses in Schedule C) .	9		✓				
Secti	on B. Policies (This Section B requests information about policies not required by the	e Internal Reven	ue C	ode.) Yes	N-				
10a	Did the organization have local chapters, branches, or affiliates?		10a	res	No				
b	If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exemple.		10a		,				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	e filing the form?	11a		1				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	e rise to conflicts?	12a 12b		✓				
С	Did the organization regularly and consistently monitor and enforce compliance with the particle in Schedule O how this was done	oolicy? If "Yes,"	12c						
13	Did the organization have a written whistleblower policy?		13		✓				
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review a independent persons, comparability data, and contemporaneous substantiation of the deliberation		14	✓					
а	The organization's CEO, Executive Director, or top management official		15a	7	لــــا				
b	Other officers or key employees of the organization		15b	1					
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or simi	lar arrangement							
b	with a taxable entity during the year?		16a		√				
J	participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?	o safeguard the	16b						
Secti	on C. Disclosure				<u> </u>				
17 18	List the states with which a copy of this Form 990 is required to be filed ▶ none . Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a available for public inspection. Indicate how you made these available. Check all that apply.	nd 990-T (Section	501(c)(3)s	only)				
19	Own website Another's website Upon request Other (explain in Sci Describe in Schedule O whether (and if so, how) the organization made its governing docume	nedule O) nts, conflict of int	erest	policy	, and				
20	financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization	n's books and re	corde	: ▶					
	Kerri Schlenker same as nage 1	o ooong and le							

Form	000	(004	71
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Page 7

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

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

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

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

List persons in the following order: individu compensated employees; and former such pers		s or	dire	ecto	ors;	ınstit	tutic	onal trustees;	officers; key e	employees; highes	t
☐ Check this box if neither the organization no	r any relate	d orga	aniz	atio	n c	ompe	nsa	ted any curren	t officer, director	r, or trustee.	
(A) Name and Title	(B) Average hours per week (list any, hours for related organizations below dotted line)	dox, ce individua	ot ch	Posi neck is pe	c) Ition more	n n oth than both this Highest compensated employee	one i an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	_
(1) Wanda Longoria, President	40			√				0	o		<u>o</u>
(2) Terry Gonzalez, Treasurer	10			✓				0	0		0
(3) Rose Stone, Secretary	10			✓				0	0		0
(4)											_
(5)											-
(6)											-
(7)											_
(8)										,	
(9)											-
(10)											-
(11)											-
(12)						·					
(13)											_
(14)											_

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
		(C) Position (D) (F)								,	•	,		
	(A)	1 1 (00					than c	one	(D)	(E)		(F) _,		
	Name and title	Average hours per					ıs both or/trust		Reportable compensation	Reportable compensation t			nated unt of	
		week (list any						, —	from	related		other		
		hours for related	Individual trustee or director	ıstıtı	ffice	Key employee Officer	Highest compensated employee	Former	the organization	organization (W-2/1099-MI		compe	ensation n the	on
		organizations	dual	tion	g 1				(W-2/1099-MISC)	(- ,	organ	izatıo	
		below dotted line)	ີ ສູ	al tr		оуеє	отр					and i organ	elated zation	
			tee	Institutional trustee		ľ	ensa					J		
				e			ted							
(15)														
(16)														
(17)						_					+			
(18)											-		_	

(19)										!				
(20)														
(21)														 -
(22)														
			<u> </u>											
(23)														
(24)													***	
(25)							-							
	Sub-total				<u> </u>	L		L						
C	Total from continuation sheets to Part	VII. Sectio	 n Δ	•	•		•	-	0		_			
d							•	•	0		\neg		-	
2	Total number of individuals (including but reportable compensation from the organi	not limited					above	e) w	ho received m	ore than \$10	0,000	of		
	reportable compensation from the organi	Zalion								···			Yes	No
3	Did the organization list any former of	ficer, direc	tor, o	r tr	uste	ee,	key e	emp	oloyee, or high	est compen	sated		169	110
	employee on line 1a? If "Yes," complete											3		/
4	For any individual listed on line 1a, is the													
	organization and related organizations									edule J for	such	1 1		İ .
_	individual										امراسا	4		
5	for services rendered to the organization											5		1
	on B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	rocc				·			(B)	004000		(C)	ation	
	Name and ousiness add							 	Description of s	ei vices		Compens	αυΟΠ	
								_						
2	Total number of independent contractor received more than \$100,000 of compens							th	ose listed abo	ove) who				

Form **990** (2017)

	990 (201				······································		Page 9
Par	t VIII			anu lina in thia	Doub V/III		_
	•	Check if Schedule O contains a res	ponse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants Tand Other Similar Amounts	1a b	Federated campaigns 1a Membership dues 1b	794301		revenue		512-514
S, G	С	Fundraising events 1c					
Contributions, Gifts, and Other Similar Ar	d	Related organizations 1d					
ons, Sim	e	Government grants (contributions) 1e]
let ic	'	All other contributions, gifts, grants, and similar amounts not included above	001				
를	g	Noncash contributions included in lines 1a-1f \$	991				
Cor	h	Total. Add lines 1a-1f	•	795292			<u> </u>
			Business Code				
Program Service Revenue	2a	**************************************					
e Re	b						
Zi	C			-			
J Se	d						
gran	e	All other program service revenue .					
Pro	g	Total. Add lines 2a–2f			,	<u> </u>	
	3	Investment income (including divid	ends, interest,				<u> </u>
		and other similar amounts)			·		
	4	Income from investment of tax-exempt be					
	5	Royalties	(ii) Personal				
	6a	Gross rents	(ii) Cisonai				
	ь	Less: rental expenses					
	С	Rental income or (loss)					. !
	d	Net rental income or (loss)				-	
	7a	Gross amount from sales of (i) Securities	(II) Other			•	1
	b	assets other than inventory Less: cost or other basis					
	b	and sales expenses					
	С	Gain or (loss)					
		Alakara da a	•		·	- 	
a)							
ng.	8a	Gross income from fundraising			1		
eve		events (not including \$					
Ä		of contributions reported on line 1c). See Part IV, line 18 . a					
Other Revenue	b	Less: direct expenses . b					
0	c	Net income or (loss) from fundraising	events . ►	·			
		Gross income from gaming activities.					1
		See Part IV, line 19 a		RE	CEIVED	-	
	b	Less: direct expenses . b					
	10a	Net income or (loss) from gaming acti Gross sales of inventory, less	vities ▶	3000 DE	67 1040	8	
	IVa	returns and allowances a		w prd	27 7018	있	
	ь	Less: cost of goods sold b		00		IRS	
	C	Net income or (loss) from sales of inventor			DEN, UT	-	
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	G .	All other revenue	000000	400			
	d e	Total. Add lines 11a-11d	900099	168 \ 168			
	12	Total revenue. See instructions		705 100			

Part IX Statement of Functional Expenses								
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).								
	Check if Schedule O contains a respon	se or note to any li	ne in this Part IX		🔲			
Do_no 8b, 9b	t include amounts reported on lines 6b, 7b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) —Managementard— general expenses	Fundraising expenses			
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				_,			
2	Grants and other assistance to domestic individuals. See Part IV, line 22							
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16							
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees]			
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 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	30841	_					
9	Other employee benefits	***************************************	-					
10	Payroll taxes	2430						
11	Fees for services (non-employees)							
а	Management							
b	Legal							
С	Accounting	1451						
d	Lobbying							
е	Professional fundraising services See Part IV, line 17							
f	Investment management fees							
9	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)							
12	Advertising and promotion							
13	Office expenses	12608						
14	Information technology							
15	Royalties							
16	Occupancy	18803						
17	Travel	1982						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials							
19	Conferences, conventions, and meetings	20636						
20	Interest							
21	Payments to affiliates	435472						
22	Depreciation, depletion, and amortization .	4050						
23	Insurance				<u> </u>			
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)	i						
а	General Member Services	20546						
b		38516						
C								
ď		· · · · · · · · · · · · · · · · · · ·						
e	All other expenses							
25	Total functional expenses. Add lines 1 through 24e	566789	-					
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs	300763						
	from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)							

P	art X	Balance Sheet ,		*****		****	
	-,	Check if Schedule O contains a response or	note to any line in t	his Parl	tX		🗆
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			885053	1	1117774
	2	Savings and temporary cash investments		. [2	- 7,
	3	Plêdges and grants receivable, net		. [,	3	
	4	Accounts receivable, net		. [-	4	
	5	Loans and other receivables from current and		tors,			1
		trustees, key employees, and highest co	ompensated employ	ees.			, •
S:		Complete Part II of Schedule L		. [5	
	6	Loans and other receivables from other disqualified pers 4958(f)(1)), persons described in section 4958(c)(3)(B), ar sponsoring organizations of section 501(c)(9) volunorganizations (see instructions). Complete Part II of Sche	s and		6		
Assets	7	Notes and loans receivable, net		.		7	
As	8	Inventories for sale or use		·		8	
	9	Prepaid expenses and deferred charges .		·		9	
	10a	Land, buildings, and equipment: cost or	1 1	·	Į.	•	
		other basis. Complete Part VI of Schedule D	10a	20250			
	ь	Less: accumulated depreciation	10b	8753	15547	10c	11497
	11	Investments—publicly traded securities .			10047	11	11437
	12	Investments—other securities See Part IV, line		·		12	
	13	Investments—program-related. See Part IV, line		; -		13	
	14	Intangible assets		·		14	
	15	Other assets. See Part IV, line 11		· -		15	
	16	Total assets. Add lines 1 through 15 (must equa	al line 34)	: -	900600		1129271
	17	Accounts payable and accrued expenses .			, 300000		1123271
	18	Grants payable				18	
	19	Deferred revenue		:		19	
	20	Tax-exempt bond liabilities		· -		20	
	21	Escrow or custodial account liability. Complete I		· -		21	
ý	22	Loans and other payables to current and for	<u> </u>			1	
ij		trustees, key employees, highest compen					
Liabilities		disqualified persons. Complete Part II of Schedu		1~		22	
Ë	23	Secured mortgages and notes payable to unrela	ted third parties .	.		23	
	24	Unsecured notes and loans payable to unrelated		 	24		
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on lines of Schedule D		25			
	26	Total liabilities. Add lines 17 through 25			0		
es —		Organizations that follow SFAS 117 (ASC 958) complete lines 27 through 29, and lines 33 and	, check here ▶ 🔲	and			
anc	27	Unrestricted net assets		. ^	900600	27	1129271
3alį	28	Temporarily restricted net assets		.	000000	28	1120271
P	29	Permanently restricted net assets			<u>, , , , , , , , , , , , , , , , , , , </u>	29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 95 complete lines 30 through 34.			······································		
ts	30	Capital stock or trust principal, or current funds		.		30	
Se	31	Paid-in or capital surplus, or land, building, or ed				31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds.				32	
Žei	33	Total net assets or fund balances			900600	33	1129271
_	34	Total liabilities and net assets/fund balances .	<u> </u>		900600	34	1129271
				D	CEIVED		Form 990 (2017)
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				O(SDEN, UT]	

Form 9	90 (2017)		٠,	' Pa	ge 12
Par	XI Reconciliation of Net Assets	ı		• •	,
	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		79	95460
_2	Total expenses (must equal Part IX, column (A), line 25)	2		5	66789
3	Revenue less expenses. Subtract line 2 from line 1	3-		2.	<u> 28671</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)),	4		9	00600
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		11:	<u> 29271</u>
Part	XII Financial Statements and Reporting				
	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				
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplaın ın			
	Schedule O.				_
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		✓_
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled or			ĺ
	reviewed on a separate basis, consolidated basis, or both:			İ	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b			2b		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ted on a			
	separate basis, consolidated basis, or both:				ĺ
	Separate basis Consolidated basis Both consolidated and separate basis				ĺ

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Schedule O.

If the organization changed either its oversight process or selection process during the tax year, explain in

2c

3a

Form **990** (2017)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

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

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

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

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

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

,	see separate manucuons), ti					
	ection 501(c)(4), (5), or (6) orga	anizations: Complete Part III				
Name	of organization				Employer ider	ntification number
North	side American Federation of					46-3810059
Part		e organization is exempt un		_		
1	•	f the organization's direct and	indirect politica	ıl ca	mpaign activities in Part	IV. (see instructions fo
	definition of "political car					
2		y expenditures (see instructions)				
3		cal campaign activities (see instr				
Part		e organization is exempt un				
1	-	excise tax incurred by the organi				
2	-	excise tax incurred by organizati	_)
3	•	ed a section 4955 tax, did it file F		•		= =
4a						Yes No
b	If "Yes," describe in Part		dou	04/-	N avecant applian FOI	(a)(0)
		e organization is exempt un	····	_		(C)(3).
1		ly expended by the filing organ		tion	527 exempt function	
_					Ψ 	*****
2		filing organization's funds control vities		_		
^		expenditures. Add lines 1 and				
3						
4		n file Form 1120-POL for this yea				. Yes No
5		ses and employer identification n		all co	ection 527 political organi	
,	organization made payme	ents. For each organization listed	L enter the amo	unt i	paid from the filing organ	ization's funds. Also ente
	the amount of political co	ontributions received that were pro-	romptly and dire	ectly	dolivorod to a separate p	political organization, such
		fund or a political action commit				
	(a) Name	(b) Address	(c) EIN		(d) Amount paid from	(e) Amount of political
	(a) Namo	(6), 145, 555	(0, 2		filing organization's	contributions received and
					funds If none, enter -0-	promptly and directly delivered to a separate
						political organization
			1			If none, enter -0-
(1)						
\''/						
(2)						
\ - /					DECENTED -	
(3)					RECEIVED	
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			_	, [
(4)				ğ	DEC 2 7 2018	
			9	٦ -	(2)	
(5)	,		_	<u> </u>	DGDEN, UT	
			ļ		PODEIN, UI	
(6)						1

Cat. No 50084S

						rayer
	rt II-A Complete if the organization section 501(h)).	- -	<u>+</u>		,	ction under
A	Check ► ☐ if the filing organization belong address, EIN, expenses, and second				iliated group membe	er's name,
В	Check ▶ ☐ if the filing organization check					
	Limits on Lobb			······································	(a) Filing	(b) Affiliated
	(The term "expenditures" me	ans amounts	paid or incurred.)	organization's totals	group totals
1	a Total lobbying expenditures to influence	public opinion	(grass roots lobby	ring)		
	b Total lobbying expenditures to influence					-
	c Total lobbying expenditures (add lines 1a	_		·		
	d Other exempt purpose expenditures .	. ,				
	e Total exempt purpose expenditures (add	lines 1c and 1	d)			
	f Lobbying nontaxable amount. Enter t		,	n table in both		
	columns.	no amount i		y table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t ie:		
	Not over \$500,000		mount on line 1e	(13.		
	Over \$500,000 but not over \$1,000,000		s 15% of the excess	avar \$500,000		
	Over \$1,000,000 but not over \$1,500,000	1	s 10% of the excess			
	Over \$1,500,000 but not over \$17,000,000	 	s 5% of the excess of			
	Over \$17,000,000	\$1,000,000	s 3% Of the excess o			
		•	.		 	
	-					
	i Subtract line 1f from line 1c. If zero or les					
		riess, enter -0				
	reporting section 4911 tax for this year?			•	_	Yes No
—			¹	•		
	(Some organizations that made a sec	tion 501(h) el	Period Under sec ection do not hav ructions for lines	e to complete all	l of the five column	s below.
	Lobbying	Expenditures	During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2	2a 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) 2017

Part II	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	5768	,
or ea	ch "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	d (a)) (b)	
	otion of the lobbying activity.	Yes	No	A	mount
- 1	During-the year, did the filing organization attempt to influence foreign, national, state or local egislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.		•		-
	/olunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?			•	
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?	<u> </u>			
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				-
	Other activities?				
jΊ	otal Add lines 1c through 1ı				
2a [Old the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	f "Yes," enter the amount of any tax incurred under section 4912				
	"Yes," enter the amount of any tax incurred by organization managers under section 4912				
	the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III	 Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).)(5), c	or se	ction	
					Yes N
	Vere substantially all (90% or more) dues received nondeductible by members?			1	1
2 [old the organization make only in-house lobbying expenditures of \$2,000 or less?			2	1
	id the organization agree to carry over lobbying and political campaign activity expenditures from the			3	,
Part III	Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes.")(5), c R (b)	or sec Part	ction III-A,	line 3,
1 C	Dues, assessments and similar amounts from members		1		
	ection 162(e) nondeductible lobbying and political expenditures (do not include amounts olitical expenses for which the section 527(f) tax was paid).	of			- "
	Surrent year		2a		
b C	Carryover from last year		2b		
	otal	.	2c		
	ggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
e	notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of xcess does the organization agree to carryover to the reasonable estimate of nondeductible lobby				
	nd political expenditure next year?	·	4		***
	axable amount of lobbying and political expenditures (see instructions)		5		
Part IV		up list		t II-A, I	nes 1 ar
					,
	RECEIVED				
		73			
	(g)	ြပ္တု			

OGDEN, UT

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Northside American Federation of Teachers 46-3810059 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) . 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total number of conservation easements . 2a 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IRECTIVED If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue-statement and balance sheet works of art, historical treasures, or other similar assets held for public service, provide, in Part XIII, the text of the footnote to its financial statements that describes trees items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition equipment or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Par	Organizations Maintaining							
`3	Using the organization's acquisition, collection items (check all that apply):		her reco	rds, check	any of th	e follov	wing that are a s	significant use of its
а	☐ Public exhibition			☐ Loan o				•
b	☐ Scholarly research		е	☐ Other	**********			
C	☐ Preservation for future generation							
4	Provide a description of the organiza XIII.	tion's collections a	and expl	ain how th	ey further	the org	ganization's exe	mpt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather	r than to be mainta						
Par	Escrow and Custodial Arra Complete if the organization 990, Part X, line 21.		" on For	m 990, P	art IV, line	e 9, or	reported an ar	nount on Form
1a	Is the organization an agent, trustee included on Form 990, Part X?							
Ь	If "Yes," explain the arrangement in P	art XIII and comple	ete the fo	ollowing ta	ble:		A	mount
С	Beginning balance					10	;	
d	Additions during the year					10		
е	Distributions during the year					16		
f	Ending balance							
2a	Did the organization include an amou							
b	If "Yes," explain the arrangement in P	art XIII. Check here	e if the e	xplanation	has been	provid	ed on Part XIII .	<u>U</u>
Par	Endowment Funds.	anguared "Vee"	" on Eor		ort IV lin	o 10		
	Complete if the organization	(a) Current year		or year	(c) Two yea		(d) Three years bac	k (e) Four years back
1a	Beginning of year balance	(a) Carrent year	(5)	or your	(6) 1 110 you		(a) //iioo youlo buo	(c) rodr years back
b	Contributions		 					
_	Net investment earnings, gains, and losses							
d	Grants or scholarships				 			
е	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of	the current year en	d baland	ce (line 1g,	column (a	ı)) held	as:	
а	Board designated or quasi-endowme	nt 🕨	%					
b	Permanent endowment	%						
С	Temporarily restricted endowment							
٥-	The percentages on lines 2a, 2b, and						luniudakana di Kan Al	
Ja	Are there endowment funds not in the organization by:	e possession of th	ie organi	zation tha	t are neid	and ad	iministered for ti	
	•							Yes No
	(i) unrelated organizations (ii) related organizations					• •		3a(i) 3a(ii)
b	If "Yes" on line 3a(ii), are the related of							3b
4	Describe in Part XIII the intended uses							00
Pari							· · · · · · · · · · · · · · · · · · ·	
مسجي	Complete if the organization		" on For	m 990. P	art IV. line	e 11a.	See Form 990	Part X, line 10.
	Description of property	(a) Cost or ot (investment)	her basis	(b) Cost or	other basis	(c)	Accumulated epreciation	(d) Book value
1a	Land					* 7-		
b	Buildings			-		·		·
c	Leasehold improvements				····			
d	Equipment				20250		8753	11497
е	Other							
Total	Add lines 1a through 1e (Column (d) r	nust equal Form 0	On Part	Y column	IPI line 11	201		11/07

	Investments—Other Securities.				,
<u> </u>	Complete if the organization answered (a) Description of security or category	"Yes" on Form	990, Part IV, line		990, Part X, line 1:
<u>. </u>	(including name of security)		(b) Book value		of-year market value —
) Financial	derivatives				······································
) Closely-t	neld equity interests		*7		
Other					
(A)	***************************************				
(B)	*****				
(C) (D)				<u> </u>	
(E)					
(F)					
(G)	**************************************				
(H)				_	
al. (Column (l	o) must equal Form 990, Part X, col. (B) line 12.) ▶				
art VIII	Investments—Program Related.				
	Complete if the organization answered	"Yes" on Form	990, Part IV, line	11c. See Form	990, Part X, line 13
	(a) Description of investment		(b) Book value	• •	nod of valuation
				Cost or end-	of-year market value
<u> </u>					
)					
<u> </u>		-			······
)					
))					· · · · · · · · · · · · · · · · · · ·
,)					
	n) must equal Form 990, Part X, col. (B) line 13) ▶				
Part IX	Other Assets.		l -	· · · · · · · · · · · · · · · · · · ·	
	Complete if the organization answered	"Yes" on Form	990, Part IV, line	11d. See Form	990, Part X, line 19
	415	ntion		T	(b) Book value
	(a) Descrip	p			(b) Book value
)	(a) Descri				(b) Book value
)	(a) Descri				(b) Book value
)	(a) Descri				(b) Book value
	(a) Descri				(b) Book value
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	nn (b) must equal Form 990, Part X, col. (B) li				(b) Book value
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tal. (Colui	mn (b) must equal Form 990, Part X, col. (B) In Other Liabilities. Complete if the organization answered line 25. (a) Description of liability	ine 15.)			
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Par	· ·	••	Retu	n. į
1	Complete if the organization answered "Yes" on Form 990, Total revenue, gains, and other support per audited financial statements		1	· · · · · · · · · · · · · · · · · · ·
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.			
_	Net unrealized gains (losses) on investments	2a		
a b	Donated services and use of facilities	2b	1	ٺ
_	Recoveries of prior year grants	2c	1	
c d	Other (Describe in Part XIII.)	2d	1	
e			2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	1	
c			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5	
Part				turn.
	Complete if the organization answered "Yes" on Form 990,			
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
-	Donated services and use of facilities	2a		
b	Prior year adjustments	2b	1	
C	Other losses	2c	1	
d	Other (Describe in Part XIII.)	2d	1	
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	ļ	
b	Other (Describe in Part XIII)	4b	1	
С			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 18.)	5	
	XIII Supplemental Information.			
	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a an XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part			
	•			
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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

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

► Attach to Form 990 or 990-EZ.

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

2017 Open to Public

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Northside American Federation of Teachers 46-3810059 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 member's requests. IRS Form 990 is available in PDF format to facilitate distribution Additionally, independent organizations such as GuideStar provides organizational information for public view.