efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**Return of Organization Exempt From Income Tax**

DLN: 93493319105086

OMB No 1545-0047

Open to Public

Form 990

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

▶ Information about Form 990 and its instructions is at <u>www IRS gov/foim990</u>

Inspection

A F	or the 2	2015 calendar year, or tax year beginning 07-01-2015 , and ending 06-30-201	6			
B Che	ck if app	plicable C Name of organization AMERICAN FEDERATION OF TEACHERS WICHITA		D Emplo	yer id	entification number
_ Ac	dress ch			74-28	30737	'3
∏ Na	me chai	nge Doing business as		, , _	,,,,,	
	tıal retur	rn				
Fi	nal terminat	Number and street (or P O box if mail is not delivered to street address) Room/sui	te	E Teleph	one nur	mber
_	ended re	■ 150 S IDA		(316)	262-	5171
Пар	olication	pending City or town, state or province, country, and ZIP or foreign postal code				
		WICHITA, KS 672111504		G Gross	receipts	\$ 1,085,400
		F Name and address of principal officer	H(a) Is th	- ıs a group	retur	n for
		SCOTT PITTMAN 6414 ABBOTSFORD		rdinates?		┌ Yes 🗸
		WICHITA, KS 67206	No H(b) Are a	all subord	inates	
I Ta	k-exemp	ot status	inclu	ded?		Yes No (see instructions)
J W	ebsite:	► N/A	H(c) Grou			•
K Forr	n of orga	anization Corporation Trust Association Other Other	L Year of fo			1 State of legal domicile KS
		The series of th				
Pa	rt I	Summary				
		efly describe the organization's mission or most significant activities				
.	LA	BOR ORGANIZATION REPRESENTING SCHOOL EDUCATORS				
2						
Ē	_					
Governance	2 CI	heck this box $ ightharpoonup$ if the organization discontinued its operations or disposed o	of more than 2	25% of its	net a	issets
					l _	1
≫ 5 √^		umber of voting members of the governing body (Part VI, line 1a)			3	4
Activities &		umber of independent voting members of the governing body (Part VI, line 1b)			5	0
⋛		otal number of individuals employed in calendar year 2015 (Part V, line 2a)				14
ĕ		otal number of volunteers (estimate if necessary)			6	0
		otal unrelated business revenue from Part VIII, column (C), line 12 t unrelated business taxable income from Form 990-T, line 34			7a 7b	U
	D Ne	t difference business taxable income from 10m 990-1, fine 34		r Year	70	Current Year
	8	Contributions and grants (Part VIII, line 1h)	FIIC	1,226,	825	1,080,995
알	9	Program service revenue (Part VIII, line 2g)		1,220,	-	0
Ravenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		4.	914	4,405
Ę.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		.,,	+	0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	2	1,231,	720	1,085,400
		12)		1,231,	/ 3 9	1,065,400
	13	Grants and similar amounts paid (Part IX, column (A), lines $1-3$)				0
	14	Benefits paid to or for members (Part IX, column (A), line 4)				0
36S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines $5-10$)		416,	859	327,144
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)				0
3	b	Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright^0				
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,143,	774	870,576
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,560,	633	1,197,720
	19	Revenue less expenses Subtract line 18 from line 12		-328,	894	-112,320
Net Assets or Fund Balances			Beginning o	of Current	Year	End of Year
set	20	Total assets (Part X, line 16)		1,571,	890	1,265,887
A B	21	Total liabilities (Part X, line 26)		306,		112,622
۾ ڇ	22	Net assets or fund balances Subtract line 21 from line 20		1,265,	-	1,153,265
				-,,		-,,-00
	t II	Signature Block				
Pa Unde		Signature Block ties of perjury, I declare that I have examined this return, in				
Pai Unde my ki	r penal nowledg	ties of perjury, I declare that I have examined this return, inge and belief, it is true, correct, and complete Declaration o				
Pai Unde my ki	r penal nowledg	ties of perjury, I declare that I have examined this return, in				
Pai Unde my ki	r penal nowledg	ties of perjury, I declare that I have examined this return, inge and belief, it is true, correct, and complete Declaration o				

	**	* * *							
Sign	Signature of officer								
Here	sc	SCOTT PITTMAN TREASURER							
	Ту	pe or print name and title							
Paid		Print/Type preparer's name DENISE R JONES	Preparer's signature DENISE R JONES						
Prepare	r	Firm's name Executive Accounting Services							
1 1 C Pai C		E							

Wichita, KS 67214 May the IRS discuss this return with the preparer shown above? (see in

For Paperwork Reduction Act Notice, see the separate instructions.

Firm's address ► 140 N Hydraulic 100

Use Only

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
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 $98-197$ If "Yes," complete Schedule C, Part III	5		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Pait V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		No
	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		No
	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	11 c		No
	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	11 d		No
е	The diganization report an amount for other habilities in Part X, line 25 / 11 Tes, complete schedule D, Part X	11e		No
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	11 f		No
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
	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	12 b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
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		No
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		No
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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		No
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		No
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		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20 a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part

	•					
: IV	Ch	ecklist	of	Required	Schedules	(continued)

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

	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	No
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? <i>If "Yes," complete Schedule J</i>	23	No
24-	Did the agreement on house they are made and recognition of the state		

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 24a

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior

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?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV,

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . 29 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

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

24b

24c

24d

25a

25b

26

27

28a

28b

28c

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35a

35b

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Yes

Form 990 (2015)

Νo

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Νo

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Nο

Νo

Νo

Nο

Νo

Nο

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

Pai	t V	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this					
		onedkin benedate e contains a response of note to any fine in this	. a. c · · · · · · · · · · · · · · · · · ·		Yes	No	
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 0				
ь	Enter	the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0				
		L ne organization comply with backup withholding rules for reportable payments to	yendors and reportable				
٠		ng (gambling) winnings to prize winners?	· · · · · · · ·	1 c	Yes		
2a		the number of employees reported on Form W-3, Transmittal of Wage and					
		Statements, filed for the calendar year ending with or within the year covered s return	2a 14				
ь	•	east one is reported on line 2a, did the organization file all required federal emp	olovment tax returns?	2b	Yes		
	Note.	If the sum of lines 1a and 2a is greater than 250, you may be required to e-file	(see instructions)	_			
		ne organization have unrelated business gross income of \$1,000 or more during	,	3a		No	
		s," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation		3b			
4a	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)?						
b	If"Ye	es," enter the name of the foreign country					
	Seeır	nstructions for filing requirements for FinCEN Form 114, Report of Foreign Bank	and Financial Accounts				
	(FBAF	R)					
5a	Was t	he organization a party to a prohibited tax shelter transaction at any time durin	ig the tax year?	5a		Νo	
b	Did ai	ny taxable party notify the organization that it was or is a party to a prohibited t	cax shelter transaction?	5b		Νo	
С	c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?						
				5c			
	organ	the organization have annual gross receipts that are normally greater than \$10 ization solicit any contributions that were not tax deductible as charitable cont	ributions?	6a		No	
D		es," did the organization include with every solicitation an express statement th not tax deductible?	eat such contributions or gifts	6b			
7	Organ	nizations that may receive deductible contributions under section 170(c).					
а		ne organization receive a payment in excess of \$75 made partly as a contributions provided to the payor?		7a		No	
b	If"Ye	es," did the organization notify the donor of the value of the goods or services pi	rovided?	7b			
С		ne organization sell, exchange, or otherwise dispose of tangible personal proper orm 8282?		7 c		No	
d		es," indicate the number of Forms 8282 filed during the year	7d				
e	Did th	- ne organization receive any funds, directly or indirectly, to pay premiums on a p	ersonal benefit contract?	7e		No	
f	Did th	ne organization, during the year, pay premiums, directly or indirectly, on a perso	anal henefit contract?	7f		No	
						110	
9	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?						
h		organization received a contribution of cars, boats, airplanes, or other vehicles 1098-C?	, did the organization file a	7h			
8	Did a	soring organizations maintaining donor advised funds. donor advised fund maintained by the sponsoring organization have excess bus q the year?	siness holdings at any time	8			
0-	_	e sponsoring organization make any taxable distributions under section 4966)	9a			
		ne sponsoring organization make any taxable distributions under section 4,500 in sponsoring organization make a distribution to a donor, donor advisor, or rela		9b			
10		on 501(c)(7) organizations. Enter	itea personi i i i i	30			
		tion fees and capital contributions included on Part VIII, line 12	10a				
		s receipts, included on Form 990, Part VIII, line 12, for public use of club	10b				
_	facilit	· · · · · · · · · · · · · · · · · · ·	200				
11	Section	on 501(c)(12) organizations. Enter	,				
а	Gross	s income from members or shareholders	11a				
b		s income from other sources (Do not net amounts due or paid to other sources st amounts due or received from them)	11b				
12a	Section	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	ın lıeu of Form 1041?	12a			
		es," enter the amount of tax-exempt interest received or accrued during the					
	year		12b				
13	Section	on 501(c)(29) qualified nonprofit health insurance issuers.					
	addıtı	e organization licensed to issue qualified health plans in more than one state? N onal information the organization must report on Schedule O	ote. See the instructions for	13 a			
b		the amount of reserves the organization is required to maintain by the states chithe organization is licensed to issue qualified health plans	13b				
r		the amount of reserves on hand					
		L	13c	14-		l No	
		ne organization receive any payments for indoor tanning services during the tax	•	14a		No	
D	ті үе	es," has it filed a Form 720 to report these payments? <i>If "No," provide an explana</i>	uon in Scheaule U	14b			

orm	990 (2	2015)					Page (
Par	t VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No describe the circumstances, processes, or changes in Schedule O. S			or 10)b belo	w,
		Check if Schedule O contains a response or note to any line in this Part VI					🗸
Se	ction	A. Governing Body and Management					
						Yes	No
1a	Enter year	the number of voting members of the governing body at the end of the tax	1a	4			
	body,	re are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committee nilar committee, explain in Schedule O					
b		the number of voting members included in line 1a, above, who are endent	1b	0			
2	! Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?						
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		e organization make any significant changes to its governing documents since			4		No
5	Did th	e organization become aware during the year of a significant diversion of the oi	ganız	ation's assets? .	5		No
6	Did th	e organization have members or stockholders?			6		No
7a		ne organization have members, stockholders, or other persons who had the pow members of the governing body?			7a		No
b		ny governance decisions of the organization reserved to (or subject to approva sons other than the governing body?			7b		No
8		ie organization contemporaneously document the meetings held or written actions the following	ons ui	ndertaken during the			
а	The go	overning body?			8a	Yes	
b	Each	committee with authority to act on behalf of the governing body?			8 b	Yes	
9		re any officer, director, trustee, or key employee listed in Part VII, Section A, ization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>			9		No
Se		B. Policies (This Section B requests information about policies not			eveni	ue Cod	e.)
		·	•	•		Yes	No
10a	Did th	e organization have local chapters, branches, or affiliates?			10a		No
b		s," did the organization have written policies and procedures governing the act tes, and branches to ensure their operations are consistent with the organization			10b		
11a	Has th	he organization provided a complete copy of this Form 990 to all members of it rm?	s gov	erning body before filing	11a	Yes	
b	Descr	ribe in Schedule O the process, if any, used by the organization to review this F	orm 9	990			
12a	Did th	e organization have a written conflict of interest policy? If "No," go to line 13.			12a		No
	Were	officers, directors, or trustees, and key employees required to disclose annuall	y inte		12b		
c	Did th	e organization regularly and consistently monitor and enforce compliance with edule O how this was done	the p	olicy? <i>If "Yes," describe</i>	12c		
13	Did th	e organization have a written whistleblower policy?			13		No
14	Did th	e organization have a written document retention and destruction policy? .			14		No
15		e process for determining compensation of the following persons include a revi endent persons, comparability data, and contemporaneous substantiation of th					
а	The or	rganization's CEO, Executive Director, or top management official			15a		No
b	Other	officers or key employees of the organization			15b		No
	If"Ye	s" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a		ie organization invest in, contribute assets to, or participate in a joint venture of le entity during the year?			16 a		No
b	If "Ye: partici	s," did the organization follow a written policy or procedure requiring the organi ipation in joint venture arrangements under applicable federal tax law, and take ization's exempt status with respect to such arrangements?	zatioi e step	n to evaluate its es to safeguard the	16h		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed▶

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available.

Own website Another's website Upon request Other (explain in Schedule O)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records
►SCOTT PITTMAN 6414 ABBOTSFORD WICHITA, KS 67206 (316) 262-5171

Part VII

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

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0 - in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, or 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 related or	ganıza	tion	com	pens	sated	any	current officer, d	irector, or truste	e
(A) Name and Title	(B) A verage hours per week (list any hours	Pos more pers and	(F) Estimated amount of other compensation							
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) STEVE WENTZ PRESIDENT	40 00	х		x				21,410	59,030	0
(2) KIMBERLY HOWARD VICE PRESIDENT	40 00	x		х				21,939	56,674	0
(3) CHARLOTTE NEUGEBAUER REC SECRETARY	10 00	х		х				0	0	0
(4) SCOTT PITTMAN TREASURER	10 00	×		x				2,600	9,057	0
										Form 990 (2015)

It VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)	rt VII	Section A. Of	fficers, D	irectors,	Trustees,	Key E	mployees,	and Highest	Compensated E	mployees (continued	1)
---	--------	---------------	------------	-----------	-----------	-------	-----------	-------------	---------------	---------------------	----

(A) Name and Title	(B) A verage hours per week (list any hours for related (C) Position (do not check more than one box, unless person is both an officer and a director/trustee)							(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former			related organizations
1b Sub-Total			•	•		>				
 c Total from continuation sheet d Total (add lines 1b and 1c) . 				•	•	. ▶		45,949	124,761	
Total (and lines 15 and 16)					·	<u> </u>			,	

- Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization >
- - Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual .

 - For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the
- organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such
- ındıvıdual .
- Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person . . .

-	140
5	Νo
٠.	

Yes

3

No

Νo

Section B. Independent Contractors

3

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of

<u> </u>		<u> </u>
(A) Name and business address	(B) Description of services	(C) Compensation

compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization >

Form 99								Page 9
Part V	4++1	Statement o						_
		Check IT Schedi	ule O contains a respoi	nse or note to any III	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
10	1a	Federated cam	paigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership du	es 1b	1,069,405				
	c	Fundraising eve	ents 1c	11,590				
fs. r A	d		zations 1d					
ija Ja	e	Government grants						
Sin Sin		_						
utic ier	f	similar amounts no	ons, gifts, grants, and 1f ot included above					
를 할	g	Noncash contribution	ons included in lines					
Cont	h	·	s 1a-1f		1,080,995			
				Business Code				
n e	2a							
£. ₹	ь		-					
Program Service Revenue	c							
Ę.	d							
S =	e							
ogra	f	All other progra	am service revenue					
Ĕ	g	Total. Add lines	s 2a-2f	>				
	3		ome (including dividen		4,405			
	4		ar amounts)	F	1,7133			
	5			▶				
			(ı) Real	(II) Personal				
	6a	Gross rents						
	b	Less rental						
	_ c	expenses Rental income						
	d	or (loss) Net rental inco	me or (loss)					
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory						
	b c	Less cost or other basis and sales expenses Gain or (loss)						
	d	Net gain or (los	s)					
Other Revenue	8a	events (not inc \$11	luding ,590 s reported on line 1c)					
ıer			a					
p o			penses b (loss) from fundraising	ovents •				
	9a		rom gaming activities ne 19	events p				
	b c		apenses b (loss) from gamıng actı	vities				
	10a	Gross sales of returns and allo	owances .	>				
	b c	Net income or (a oods sold b (loss) from sales of inv					
	11a	Miscellaneous	s Revenue	Business Code				
	ь							
	c							
	d	All other reven	ue					
	e		s 11a-11d	•				
	12	Total revenue.	See Instructions .	•	1,085,400	4,405		

Part IX Statement of Functional Expenses

Section 501(c	1/31 and 501(c)(4)	organizations must complete	all columns Al	II other organizations must d	complete column (A.)

		(B)	(C)	(D)	·	
Check if Schedule O contains a response or note to any line in th	ıs Part IX					
cion 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 response or note to any line in this Part IX						

	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	170,710			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	141,597			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
		14,837			
11	Fees for services (non-employees)				
а	Management				
Ь	Legal	2,697			
с	Accounting	8,260			
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g 42	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	35.506			
13	Office expenses	35,596			
14	Information technology				
15	Royalties	24.764			
16 17	Occupancy	31,761			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	219			
19	Conferences, conventions, and meetings	36,291			
20	Interest	30,231			
21	Payments to affiliates	734,299			
 22	Depreciation, depletion, and amortization	731,233			
 23	Insurance	3,094			
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)	5,331			
а	SCHOLARSHIPS	800			
b	REPAIRS AND MAINTENANCE	3,031			
c	GENERAL UNION ACTIVITIES	13,267			
d	ORGANIZING EXP	1,261			
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,197,720			
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)				

orm 9		Balance Sheet			Page 11
		Check if Schedule O contains a response or note to any line in this Part \boldsymbol{X}			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	356,571	1	155,644
	2	Savings and temporary cash investments	1,215,319	2	1,110,243
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
Assets	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			
188				6	
٧	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	b	Less accumulated depreciation		10 c	
	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	
	14	Intangible assets		14	
	15	Other assets See Part IV , line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,571,890	16	1,265,887
	17	Accounts payable and accrued expenses	75,283	17	40,348
	18	Grants payable		18	
	19	Deferred revenue	231,022	19	72,274
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		21	
lities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Liabilit		persons Complete Part II of Schedule L		22	
<u> </u>	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			
				25	
	26	Total liabilities. Add lines 17 through 25	306,305	26	112,622
Assets or Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
lan	27	Unrestricted net assets		27	
<u>ڇ</u>	28	Temporarily restricted net assets		28	
밑	29	Permanently restricted net assets		29	
Ē		Organizations that do not follow SFAS 117 (ASC 958), check here $ ightharpoonup$ and			
ا ة		complete lines 30 through 34.			
its	30	Capital stock or trust principal, or current funds		30	
556	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds	1,265,585	32	1,153,265
~	22	Total net accets or fund halances	1 265 585	33	1 153 265

34

Total liabilities and net assets/fund balances . . .

1,571,890

34

1,265,887

Other changes in net assets or fund balances (explain in Schedule O) .

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,

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

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

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?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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

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

If the organization changed its method of accounting from a prior year or checked "Other," explain in

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Consolidated basis

Both consolidated and separate basis

Both consolidated and separate basis

Investment expenses .

column (B))

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

Prior period adjustments .

Part XIII Financial Statements and Reporting

a separate basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

1 Accounting method used to prepare the Form 990

	1	
	2	
	3	
column (A))	4	
	5	

3	-112,320
4	1,265,585
5	
6	
7	

Yes

Yes

Yes

No

Νo

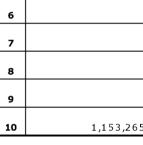
Nο

Form 990 (2015)

Page 12

1,085,400

1,197,720



2a

2b

2c

3a

3b

SCHEDULE D Sur

(Form 990)

Treasury

Department of the

Internal Revenue Service

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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

DLN: 93493319105086

Open to Public Inspection

	me of the organization ERICAN FEDERATION OF TEACHERS WICHITA		Empl	oyer identification number
	ENGLANT ESERVITOR OF TENENERS WICHTIN		74-2	807373
Pā	Organizations Maintaining Donor Complete if the organization answere	Advised Funds or Other Similar F ed "Yes" on Form 990, Part IV, line 6.	unds c	or Accounts.
		(a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor a funds are the organization's property, subject to t	-	nor advis	ed Yes No
6	Did the organization inform all grantees, donors, a used only for charitable purposes and not for the conferring impermissible private benefit?			purpose Yes N o
Рa	rt III Conservation Easements. Comple	te if the organization answered "Yes" o	n Forn	
1	Purpose(s) of conservation easements held by th		<u> </u>	1 330, 1 dre 1 V / III e 7 .
•	Preservation of land for public use (e.g., recre			
	education)		n histor	ically important land area
	Protection of natural habitat	Preservation of a	certifie	d historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization leasement on the last day of the tax year	neld a qualified conservation contribution in t	he form	of a conservation
				Held at the End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easeme		2b	
C	Number of conservation easements on a certified	, ,	2 c	
d	Number of conservation easements included in (c historic structure listed in the National Register) acquired after 8/17/06, and not on a	2d	
3	Number of conservation easements modified, tran	nsferred, released, extinguished, or terminate	ed by the	e organization during the
	tax year ▶			
4	Number of states where property subject to conse	ervation easement is located ►		
5	Does the organization have a written policy regard violations, and enforcement of the conservation e		dling of	┌ Yes
5	Staff and volunteer hours devoted to monitoring, i	nspecting, handling of violations, and enforc	ing cons	ervation easements during the
	>			
7	A mount of expenses incurred in monitoring, inspe	ecting, handling of violations, and enforcing c	onserva	tion easements during the year
	> \$			
В	Does each conservation easement reported on Iir (B)(I) and section $170(h)(4)(B)(II)$?	ne 2(d) above satisfy the requirements of sec	tion 17	0 (h)(4)
9	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financia		
'a i	t III Organizations Maintaining Collect Complete if the organization answere	tions of Art, Historical Treasures, ed "Yes" on Form 990, Part IV, line 8.	or Oth	er Similar Assets.

- 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 exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these 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, education, 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
- 2 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

- **→** \$
- For Paperwork Reduction Act Notice, see the Instructions for Form 990.

▶ \$ _

	edule D (Form 990) 2015					Page 2
Par	Organizations Maintaining (continued)	Collections of A	Art, Historical	Treasures, or (Other Similar A	ssets
3	Using the organization's acquisition, according to the collection items (check all that apply)	ession, and other re	cords, check any o	of the following that	are a significant us	e of its
а	Public exhibition		d Γ Lo	an or exchange pro	grams	
b	Scholarly research		e	her		
c	Preservation for future generations					
4	Provide a description of the organization' Part XIII	's collections and ex	plain how they furt	ther the organizatioi	n's exempt purpose	ın
5	During the year, did the organization soli assets to be sold to raise funds rather th					s No
Pa	rt IV Escrow and Custodial Arra Complete if the organization a Part X, line 21.		n Form 990, Par	t IV, line 9, or re	ported an amoun	t on Form 990,
1a	Is the organization an agent, trustee, cus included on Form 990, Part X?	stodian or other inte	rmediary for contri	butions or other as:	sets not	s No
ь	If "Yes," explain the arrangement in P	art XIII and comple	te the following tab	ole	Am	ount
c	Beginning balance	•	,	10	:	
d	Additions during the year			1d	ı	
е	Distributions during the year			1e		
f	Ending balance			1f		
2 a	Did the organization include an amount o	n Form 990, Part X,	line 21, for escrov	w or custodial accou	int liability? Yes	s
b	If "Yes," explain the arrangement in Part	XIII Check here if	the explanation ha	as been provided in	Part XIII	
Pa	rt V Endowment Funds. Comple			1		
	D	(a)Current year	(b)Pnor year	b (c) Two years back	(d)Three years back	(e)Four years back
1a b	Beginning of year balance Contributions					
b	· · · · · · · ·					
C	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 end bal	ance (line 1g, coli	ımn (a)) held as		
а	Board designated or quasi-endowment >					
b	Permanent endowment ►					
c	Temporarily restricted endowment ► The percentages on lines 2a, 2b, and 2c	should equal 100%				
За	Are there endowment funds not in the pos organization by	•		eld and administere	ed for the	Yes No
	(i) unrelated organizations				За	(i)
b	(ii) related organizations If "Yes" on 3a(ii), are the related organiz					(ii) b
4	Describe in Part XIII the intended uses of		endowment funds			
Pa	rt VI Land, Buildings, and Equip Complete if the organization a		Form 990 Part	IV line 11a See	Form 990 Part Y	line 10
	Description of property	answered res to	Cost or otl	her basis (b) ment) Cost or other l	Accumulated	d (d)Book value
1 -	Land		+	(other)	-	
	Buildings		`. ' <u>.</u>			
	Leasehold improvements					
	Equipment					
e	Other					
	Add lines to through to (Column (d) mus	- t 000 D-		- 10(-)		

See Form 99 Part VI Total (Control to Manufacture PRI See Form 99		Investments—Other Securities. Con	mplete if the org	janization answered 'Ye	s' on Fo	rm 990, Part IV, line 11b.
(2) Discretion of squary interests (3) Other Total, (follow file and equations 92, for X, or (if) to 12) Part VIII Investments—Program Related. (b) Book value (c) Descript or of investment (b) Book value (c) Descript or of investment (c) Descript or of investment (c) Descript or of investment (c) and control of the				(b)Book value	Cost	
Total, (Cohere (g) must equal from 1989, Part 3, cost (g) /res 25) Part VIII Investments—Program Related. Complete if the organization answered vies on Form 1999, Part 3V, line 110 See Form 1990, Part 3V, line 13. (a) Descriptor of Investment (g) must equal from 1989, Part 3V, line 13. (b) Book value (c) Descriptor of Investment (line 2) Part IX Other Assets. Complete of the operation answered view or Form 1990, Part 3V, line 11d See Form 1990, Part X, line 15. (b) Descriptor of Investment (line 2) Part X Other Liabilities. Complete of the organization answered view or Form 1990, Part X, line 11d. See Form 1990, Part X, line 15. (c) Descriptor of liabilities. Complete of the organization answered view on Form 1990, Part X, line 11d or 11f. See Form 1990, Part X, line 11d or 11f. See Form 1990, Part X, line 11d or 11f. See Form 1990, Part X line 11d or	(1)Financia				003	or end or year market variate
Total, (Counce (b) must equal form 990, Part X, cor (6) Nor 15) Total, (Counce (b) must equal form 990, Part X, cor (6) Nor 15) Total, (Counce (b) must equal form 990, Part X, cor (6) Nor 15) Total, (Counce (b) must equal form 990, Part X, cor (6) Nor 15) Total, (Counce (b) must equal form 990, Part X, cor (6) Nor 15) Total, (Counce (b) must equal form 990, Part X, cor (6) Nor 15) Total, (Counce (b) must equal form 990, Part X, cor (6) Nor 15) Total, (Counce (b) must equal form 990, Part X, cor (6) Nor 15) Total, (Counce (b) must equal form 990, Part X, cor (6) Nor 15) Total, (Counce (b) must equal form 990, Part X, cor (6) Nor 15) Total, (Counce (b) must equal form 990, Part X, cor (6) Nor 15) Total, (Counce (b) must equal form 990, Part X, cor (6) Nor 15) Total, (Counce (b) must equal form 990, Part X, cor (6) Nor 15) Total, (Counce (b) must equal form 990, Part X, cor (6) Nor 15) Total, (Counce (b) must equal form 990, Part X, cor (6) Nor 15) Total, (Counce (b) must equal form 990, Part X, cor (6) Nor 15) Total, (Counce (b) must equal form 990, Part X, cor (6) Nor 15) Total, (Counce (b) must equal form 990, Part X, cor (6) Nor 15)		held equity interests				
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	2. Liability 1	for uncertain tax positions In Part XIII, provid				

Schedule D (Form 990) 2015

	Total revenue, gains, and other	zation answered 'Yes' on				1	
	A mounts included on line 1 but						
		· ·	•	1 - 1			
1	Net unrealized gains (losses) o			2a			
1	Donated services and use of fa			2b			
	Recoveries of prior year grants			2c			
	Other (Describe in Part XIII)			2d			
	Add lines 2a through 2d					2e	
	Subtract line 2e from line 1 .				•	3	
	Amounts included on Form 990			1 . 1			
	Investment expenses not inclu	•	•	4a			
ı	Other (Describe in Part XIII)			4b			
	Add lines 4a and 4b				•	4c	
	Total revenue Add lines 3 and					5	
П	Complete if the organi	penses per Audited Fi zation answered 'Yes' on	n Form 990, F	Part IV, line 12	a. ·	s per	Keturn.
	Total expenses and losses per					1	
	Amounts included on line 1 but	not on Form 990, Part IX, li	ine 25				
	Donated services and use of fa	cilities		2a			
	Prior year adjustments			2b			
	Other losses			2c			
	Other (Describe in Part XIII)			2d			
	Add lines 2a through 2d					2e	
	Subtract line 2e from line 1 .					3	
	Amounts included on Form 990	, Part IX, line 25, but not on	ı lıne 1:				
	Investment expenses not inclu	,	•	. 4a			
)	Other (Describe in Part XIII)			4b			
	Add lines 4a and 4b					4c	
	Total expenses Add lines 3 an	d 4c. (This must equal Form	990, Part I, lir	ne 18)		5	
	<u>'</u>						
rov	Supplemental Info ide the descriptions required for F V, line 4, Part X, line 2, Part XI,	Part II, lines 3, 5, and 9, Par					de any additional
rov Part	Supplemental Info	Part II, lines 3, 5, and 9, Par					de any additional

Schedule D (Form 990) 2015	Page 5	
Part XIII Supplemental Information		
Return Reference	Explanation	

