Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Treasury Internal Revenue Service

1111011		Go to www.irs.gov/Form990 for instructions and the	e latest	information. • (O C	inspection
A F	or th	e 2018 calendar year, or tax year beginning SEP 1, 2018 and end	ding A	UG 31, 2019	-
В	Check If	C Name of organization	D Employer identific	cation number	
а	pplicab	123 DISTRICT 29 AMERICAN FEDERATION OF	ł		
	Addre	SS MDAGUED C	1		
늗	_Jchano ∏Name			26 6	205524
-	_ chang ∏Initial			-	205524
<u> </u>	return		om/suite	E Telephone number	
\vdash	Final return	2145 W. 110TH PLACE		<u>773-</u>	<u>238-3074</u>
	termir ated	City or town, state or province, country, and ZIP or foreign postal code	Į	G Gross receipts \$	231,649.
	Amen return	ded CHICAGO, IL 60643	i	H(a) is this a group re	turn
	Appli	F Name and address of principal officer ELAINE BERNAL		for subordinates	
	pend	SAME AS C ABOVE		-H(b) Are all subordinates in	
	-av-av	empt status.	527	1	list (see instructions)
		te: > WWW.IFT-AFT.ORG	U" 	•	`
			1. 1/		number > 0787
			L Year o	it formation: 1946 N	State of legal domicile: IL
PE	rt I	Summary			
ģ	1	Briefly describe the organization's mission or most significant activities: <u>IMPROV</u>			
Ĕ		EDUCATIONAL WORKERS AND OTHER WORKERS IN THE	HE D	ISTRICT'S A	REA.
Activities & Governance	2	Check this box If the organization discontinued its operations or disposed	of more	than 25% of its net as	sets
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	5
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	0
ବ୍ଦ ଓ	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)		5	0
Ę	٦				0
:≅	b	Total number of volunteers (estimate if necessary)		6	
Å		Total unrelated business revenue from Part VIII, column (C), line 12		7a	
	b	Net unrelated business taxable income from Form 990-T, line 38		7b	0.
				Prior Year	Current Year
Ð	8	Contributions and grants (Part VIII, line 1h)		0.	0.
n n	9	Program service revenue (Part VIII, line 2g)		216,523.	231,592.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		41.	57.
œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		216,564.	231,649.
				0.	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>		
		Benefits paid to or for members (Part IX, column (A), line 4)	ļ	0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,917.	3,917.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ğ	b	Total fundraising expenses (Part IX, column (D), line 25)	<u>.</u>		
ú	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		209,024.	223,648.
Ì		Total expenses Add lines 13-17 (must equal Part IX, golumn (A), line 25) V - 1	7	212,941.	227,565.
			्।	3,623.	4,084.
드유				inning of Current Year	End of Year
Net Assets or Fund Balances	-00	Total assets (Part X line 16)) Beg		39,155.
Ball				35,071.	
g c		Total liabilities (Part X, line 26)	-¦	0.	0.
				35,071.	39,155.
	rt II	Signature Block			
		lties of perjury, I declare that I have examined this return, including accompanying schedules and		•	knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which p	preparer l	has any knowledge.	
		Kerhi Misella		12/11/19	1
Sigr	1	Signature of officer		Date	
Here		REBBIE KINSELA, TREASURER			
	•	Type or print name and title			
			I Da	ate Check	PTIN
.		Print/Type preparer's name Preparer's suggestions Pr	ا حرر،		一
Paid -		ROBERT J. HANNIGAN	1 1	2/03/19 self-employe	
Prep	arer	Firm's name ► BANSLEY AND KIENER, LLP		Firm's EIN	<u> 36-2152389</u>
Use	Only	Firm's address 8745 W HIGGINS RD STE 200			
		CHICAGO, IL 60631-2704 /		Phone no. 31	2-263-2700
May	the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

123 DISTRICT 29 AMERICAN FEDERATION OF

Form	1990 (2018) TEACHERS	<u> 36-620:</u>	5524	Page 2
Pa	rt III Statement of Program Service Accomplishments			
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission. IMPROVE THE STATUS OF TEACHERS, EDUCATIONAL WORKERS AND	OTHER I	WORKER	 RS
	IN THE LOCAL AREAS.			
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?		Yes	X No
3	If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services?		Yes	X No
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other			nd
	revenue, if any, for each program service reported			
4a	(Code) (Expenses \$		IONAL	'
			_	
4b	(Code) (Expenses \$ including grants of \$) (Revenue	ue \$		
			-	
				
4c	(Code) (Expenses \$ including grants of \$) (Revenue			
<u> </u>	Other program services (Describe in Schedule O)			
4d	(Expenses \$ including grants of \$) (Revenue \$)	
<u>4e</u>	Total program service expenses		Form 99	10 (2018)

	123 DISTRICT 29 AMERICAN FEDERATION OF			_
	1 990 (2018) TEACHERS 36-620	<u>5524</u>	<u> P</u>	<u>age 3</u>
Ра	rt 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_1_	+	X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	+	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		ł	
	public office? If "Yes," complete Schedule C, Part I	3	├	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effection of the section 501(c) organizations.			
_	during the tax year? If "Yes," complete Schedule C, Part II	4	-	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or		İ	٠,
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	+	Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			٦,
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	 	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		ļ	
_	Schedule D, Part III	8	├	X
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?		ŀ	٠,
	If "Yes," complete Schedule D, Part IV	9	├	X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	i i		37
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	 -	Х
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	1		İ
а				.
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	1	[
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	├	Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	١		3 F
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	-	Х
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			3.5
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	 	X
e		11e	├	X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1		.,
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	 	Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	+	X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			- T
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	-	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
D	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	1	ļ	v
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b	 	Х
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	1 4-		v
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	1	ł	v
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	-	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			- v
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	+	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
	1c and 8a? If "Yes," complete Schedule G, Part II	18	┼	<u> X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
	complete Schedule G, Part III	19	+	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	 	X
g	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	1	ı

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Form **990** (2018) 832003 12-31-18

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

	rt IV Checklist of Required Schedules (continued)	<u> 524</u>	P	age 4
Ра	Triv Checklist of Required Schedules (continued)		Yes	No
22	. Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		162	140
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			}
	Schedule J	23		X
24 a	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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		ļ
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
_	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25 a	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	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	230	-	
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	1		
	complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)		ļ	l
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	-	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	l		v
~~	If "Yes," complete Schedule N, Part I	31	 	_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	ĺ	x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
~	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		<u> </u>	
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			l
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
Pa	Note. All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	38	X	<u> </u>
ra	Check if Schedule O contains a response or note to any line in this Part V			
	Check it contains a response of note to any line in this rail v		Tv	<u> </u>
4 -	Enter the number reported in Box 3 of Form 1006. Enter 0 of not englished		Yes	No
_		1		
b	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	ŕ		1
U	(gambling) winnings to prize winners?	10		1

832004 12-31-18

	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)	<u> </u>		age S
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			
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)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	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_		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as chantable contributions?	_6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a_		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f_		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b_		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders	Ì		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
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			
þ	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			
С	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u>.</u>	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		_X_
	If "Yes," complete Form 4720, Schedule O			

123 DISTRICT 29 AMERICAN FEDERATION OF

Page 6

Form 990 (2018) TEACHERS 36-6205524 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response or note to any line in this Part VI			X
<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 5			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	İ		
ь	Enter the number of voting members included in line 1a, above, who are independent 1b 0	!	1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
_	officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
Ū	of officers, directors, or trustees, or key employees to a management company or other person?	3		_x_
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or	└		
7a		7a		х
	more members of the governing body?	- 1 a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	76		x
_	,	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		X	
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	_8b	Λ	_
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			.
<u></u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
	Did the consequence have been been been been been as office to 0	40-	Yes	No X
10a	Did the organization have local chapters, branches, or affiliates?	10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	401		
44-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	40-		х
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	١		
	ın Schedule O how this was done	12c		77
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE		_	
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)	s only)	availa	able
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cıal	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	REBBIE KINSELLA - 773-238-3074			
	21/5 W 1100H DIACE CHICAGO II. 606/3			

832006 12-31-18

TEACHERS Form 990 (2018)

	3	6-	-62	20	55	24	Page 7
--	---	----	-----	----	----	----	--------

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

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

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

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

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

(A) Name and Title	(B) Average		(C) Position (do not check more than one box, unless person is both an			1		(D) Reportable	(E) Reportable compensation	(F)
Name and Title	hours per					than		compensation		Estimated amount of
	week	offic	cer an	d a d	recto	or/trus	tee)	from	from related	other
	(list any	ctor						the	organizations	compensation
	hours for	rdire	۵,			teg teg		organization	(W·2/1099-MISC)	from the
	related	stee (ruste			Sus		(W-2/1099-MISC)		organization
	organizations	al tru	onall		ploye	E 29				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) CHRIS PASKI	5.00	=	=	P	_	X 50	<u> </u>			
VICE PRESIDENT				X				0.	600.	0.
(2) COLLEEN KOCH	5.00									
SECRETARY		1		X				0.	600.	0.
(3) REBBIE KINSELLA	5.00									
TREASURER	-	1		X				0.	800.	0.
(4) ELAINE BERNAL	8.00									
CO-PRESIDENT				X				0.	0.	0.
(5) ANDREW WEBER	8.00									
CO-PRESIDENT				X		L		0.	0.	0 .
									1	
			L			L				
			1			l	Ì			
										·-···
		ļ								
		ļ								
<u></u>		ļ	<u> </u>			ļ	_			
		ļ								
		_				_				
						1		}	}	
						_				
	<u> </u>									
						_				
	ļ 									
		<u> </u>				\vdash				
	<u> </u>									
<u> </u>	-									
	-									
	 					\vdash		 		_
						1	1	l	1	

Form 990 (2018)

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

\$100,000 of compensation from the organization

36-6205524 Page 9

	rt VI	Check if Schedule O cont		or note to any lin	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
S, (c	Fundraising events	1c					
필	d	Related organizations	1d			1		
ž.	e	e Government grants (contribut	tions) 1e					
i ti	f	All other contributions, gifts, gran	its, and			•		
혈美		sımılar amounts not included abo	ve 1f					
d d	g	Noncash contributions included in lines	1a-1f \$					
<u>ភ </u>	h	Total. Add lines 1a-1f						
Program Service Revenue	1	DUES AND FEES		Business Code 611710	231,592.	231,592.		
Ser	b			-				
m.	C							
gra	d							<u> </u>
Pro	e	All other program service reve			_			
		Total. Add lines 2a-2f	inde		231,592.			
	3	Investment income (including	dıvıdends, inter	est, and	231,332			
		other similar amounts)		•	57.			57.
	4	Income from investment of ta	x-exempt bond	proceeds				
	5	Royalties		•	-			
		•	(ı) Real	(II) Personal				
	6 a	Gross rents		T '				
	b	Less rental expenses						
	С	: Rental income or (loss)						
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(II) Other	İ			
		assets other than inventory						
	b	Less cost or other basis		1				
		and sales expenses		 				
		: Gain or (loss)		1				
		Net gain or (loss)		_				
Other Revenue	8 a	Gross income from fundraising including \$	of					
Be		contributions reported on line	1c) See					
ē		Part IV, line 18	a					
₹		Less. direct expenses	b	`				
		Net income or (loss) from fund				_		-
	9 a	Gross income from gaming ac Part IV, line 19				i		
	.	Less direct expenses	a b					
		Net income or (loss) from gam		` <u> </u>				
Í		Gross sales of inventory, less	=					
		and allowances	а					
	b	Less cost of goods sold	b					
Ì		Net income or (loss) from sale		•	-			•
Ì		Miscellaneous Revenu		Business Code				
Ì	11 a							
ļ	b							
	c							
	d	All other revenue						
	е	Total. Add lines 11a-11d		>				
ĺ	12	Total revenue. See instructions		▶ [231,649.	231,592.	0.	57.

36-6205524 Page 10

Form 990 (2018) TEACHERS

Part IX | Statement of Functional Expenses

	It IX Statement of Functional Expense		<u>-</u>		<u> </u>
Sect	tion 501(c)(3) and 501(c)(4) organizations must comp	lete all columns All oth	er organizations must c	omplete column (A)	
	Check if Schedule O contains a respons			· · · · · · · · · · · · · · · · · · ·	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16	·· <u>· · · · · · · · · · · · · · · · · ·</u>			
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	3,600.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				 -
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	217			· ··
10	Payroll taxes	317.			
11	Fees for services (non-employees)	·			
a	· · · · · · · · · · · · · · · · · · ·			-	· · · · · · · · · · · · · · · · · · ·
b					
c d					
u	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
9	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion			1.	
13	Office expenses	9.		1	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	5,742.			
20	Interest				
21	Payments to affiliates	216,807.	<u></u>		
22	Depreciation, depletion, and amortization				· · · · · · · · · · · · · · · · · · ·
23	Insurance		·		
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	DONATIONS	800.	· 		
b	RETIREMENT	200.			
¢	RAFFLE PRIZES	90.			
d					
е	All other expenses				
25	Total functional expenses Add lines 1 through 24e	227,565.			
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.			j	
	Check here I if following SOP 98-2 (ASC 958-720)			1	

Form 990 (2018)

TEACHERS

36-6205524 Page 11

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

123 DISTRICT 29 AMERICAN FEDERATION OF

Form	990 (2018) TEACHERS	36-	6205524	Pa	ae 12
	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
-			<u> </u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	231	L,6	49.
2	Total expenses (must equal Part IX, column (A), line 25)	2	227	7,5	65.
3	Revenue less expenses Subtract line 2 from line 1	3			84.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	35	5,0	71.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	39	, 1	<u>55.</u>
Par	rt XIII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				
			, - -	Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	e O	li		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	te basis,			}
	consolidated basis, or both		1 1		
	Separate basis Consolidated basis Both consolidated and separate basis				1
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
_	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ingle Aud			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits.	uired aud	t		

832012 12-31-18

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

➤ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Inspection

Name of the organization

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

Employer identification number 36-6205524

12110112110
FORM 990, PART VI, SECTION B, LINE 11B:
THE FORM 990 IS PRESENTED BY THE TREASURER TO THE OFFICERS PRIOR TO ITS
SIGNING AND ISSUANCE.
FORM 990, PART VI, SECTION C, LINE 19:
THE GOVERNING DOCUMENTS AND FINANCIAL REPORTS ARE NOT MADE AVAILABLE TO THE
PUBLIC.
FORM 990, PART XII, LINE 2C:
THE BOARD OF DIRECTORS ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE
FINANCIAL REVIEW. THERE WERE NO CHANGES IN ITS OVERSIGHT PROCESS OR
SELECTION PROCESS DURING THE YEAR.