DLN: 93493135084107

OMB No 1545-0047 2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Return of Organization Exempt From Income Tax

 \blacktriangleright Information about Form 990 and its instructions is at $\underline{\textit{www IRS qov/form990}}$

A F	or the	e 2015 ca	endar year, or tax year beginning 07-01-2015 , and ending 06-30-2016	5	-		
B Che	eck if a	applicable	C Name of organization ALBUQUERQUE TEACHERS FEDERATION		D Emplo	yer i	dentification number
•		change			85-60	0115	19
_		hange	Doing business as				
In Fi	ıtıal re	eturn			E Tolors	one r	umbor
return,		nated	Number and street (or P O box if mail is not delivered to street address) Room/suit 530 JEFFERSON NE	e	E Telepho		
•		d return			(505)	262	-2657
Ap	plicatio	on pending	City or town, state or province, country, and ZIP or foreign postal code ALBUQUERQUE, NM 87108		G Gross	receip	ts \$ 2,201,197
			F Name and address of principal officer	H(a) Is	this a group	retu	rn for
			ELLEN BERNSTEIN 530 JEFFERSON NE		bordinates?		┌ Yes 🗸
			ALBUQUERQUE, NM 87108		lo e all subordi	nato	c
I Ta	x-exei	mpt status	501(c)(3)	inc	cluded?		Yes No
J W	ebsit	e:▶ WW	W ATFUNION ORG		roup exempt		•
V For	n of o	rganization	✓ Corporation Trust Association Other ►		f formation 19		M State of legal domicile
K TOII	11 01 0	iganization	V Corporation Hust Association Other P				NM
Pa	rt I	Sum	mary	L			
Governance	C E	COORDIN	OTE AND PROTECT THE INTEREST OF ITS MEMBERSHIP, IMPROVEN ATED ACTION OF TEACHERS AND COMMUNITY, PROMOTE THE WALL OPPORT THE PROFESSION ORS	ELFARE	OFCHILDR	EN B	Y PROVIDING EQUAL
E E	-						
Š	,-	Chack th	is her N (if the organization discontinued its operations of disposed of	f mara tha	n 3 E 0/- of ite	not	accets
ত *ব	_	Check th	is box ▶ ☐ if the organization discontinued its operations or disposed of	i illore tila	111 25% 01 115	net	assets
Š	3	Number	of voting members of the governing body (Part VI, line 1a)			3	9
È	4	Number	of independent voting members of the governing body (Part VI, line 1b)			4	8
Activities	5	Total nun	nber of individuals employed in calendar year 2015 (Part V, line 2a) .			5	12
•	6	Total num	nber of volunteers (estimate if necessary)			6	300
	7a	Total unr	elated business revenue from Part VIII, column (C), line 12		7a	0	
	ьΝ	Net unrela	ited business taxable income from Form 990-T, line 34			7b	
				P	rior Year		Current Year
	8	Contri	butions and grants (Part VIII, line 1h)				0
ēnuōA	9	_	m service revenue (Part VIII, line 2g)		2,104,	598	2,186,147
ΘΛċ	10	Invest	ment income (Part VIII, column (A), lines 3, 4, and 7d)			215	257
æ	11	Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,203			-5,097
	12	Total r 12)	revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		2,106,	016	2,181,307
	13	Grants	and similar amounts paid (Part IX, column (A), lines 1–3)				0
	14	Benefi	ts paid to or for members (Part IX, column (A), line 4)				0
£	15	Saları 5–10)	es, other compensation, employee benefits (Part IX, column (A), lines		655,	937	616,296
ens	16a	Profes	ssional fundraising fees (Part IX, column (A), line 11e)				0
Expenses	ь	Total fu	ndraising expenses (Part IX, column (D), line 25) ▶0				
ш	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,454,	763	1,549,337
	18	Total	expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		2,110,	700	2,165,633
	19	Reven	ue less expenses Subtract line 18 from line 12		-4,	684	15,674
Net Assets or Fund Balances				Beginnin	g of Current	Year	End of Year
Bak	20	Total	assets (Part X, line 16)		954,	646	877,141
P P	21	Totall	iabilities (Part X, line 26)		485,	888	456,113
	22		sets or fund balances Subtract line 21 from line 20		160	750	121 029
	t II		ature Block				
			perjury, I declare that I have examined this return, if pelief, it is true, correct, and complete. Declaration o				
•		age and r ias any kr					
		· .					
		****	* *				

Sign Here Signature of officer ELLEN BERNSTEIN PRESIDENT Type or print name and title Print/Type preparer's name NICK LOFTIS Preparer's signature NICK LOFTIS

Paid Preparer **Use Only** Firm's name ► LOFTIS GROUP LLC Firm's address ► 4811 HARDWARE RD NE STE E-4

ALBUQUERQUE, NM 871092023

May the IRS discuss this return with the preparer shown above? (see in

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2015)

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	Yes	
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		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
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? If "Yes," complete Schedule D, Part V 🔰	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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	Yes	
	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 2	11 d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		No
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? <i>If</i> "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? If "Yes," complete Schedule G, Part 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	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Pai	tt IV Checklist of Required Schedules (continued)		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	21	
	demostic government on Bart IV, column (A.) line 12 If "Voc " complete Schodula I, Parte I, and II		1

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

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

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

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

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,"

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)?

22

Nο

Nο

23

24a

24b

24c

24d

25a

25b

26

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28a

28b

28c

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35a

35b

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Yes

Form 990 (2015)

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Nο

Νo

Nο

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Νo

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Nο

Νo

Νo

Νo

Νo

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

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

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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," 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000

instructions for applicable filing thresholds, conditions, and exceptions)

as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d

Part V	Statements	Regarding	Other	IRS Filing	s and	Tax	Compliance
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Par	t V	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this				
		The second secon			Yes	No
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 13			
b	Enter	the number of Forms W-2G included in line 1a Enter -0 - if not applicable	1b 0			
с		ne organization comply with backup withholding rules for reportable payments to ng (gambling) winnings to prize winners?		1c	Yes	
2a	Enter Tax S	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 is return	2a 12			
b	If at l	east one is reported on line 2a, did the organization file all required federal emp If the sum of lines 1a and 2a is greater than 250, you may be required to e-file	oloyment tax returns?	2b	Yes	
3a		ne organization have unrelated business gross income of \$1,000 or more during	,	3a		No
		es," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanatio</i>	· ·	3b		
4a	over,	y time during the calendar year, did the organization have an interest in, or a si a financial account in a foreign country (such as a bank account, securities acc unt)?		4a		No
b	If "Ye See ir (FBA F	es," enter the name of the foreign country mstructions for filing requirements for FinCEN Form 114, Report of Foreign Bank R)	and Financial Accounts			
5a	Was t	he organization a party to a prohibited tax shelter transaction at any time durin	ig the tax year?	5a		No
b	Dıd aı	ny taxable party notify the organization that it was or is a party to a prohibited t	ax shelter transaction?	5b		No
c	If"Ye	es," to line 5a or 5b, did the organization file Form 8886-T?				
6a		the organization have annual gross receipts that are normally greater than \$10		5c 6a		No
b	If"Ye	itization solicit any contributions that were not tax deductible as charitable cont es," did the organization include with every solicitation an express statement th not tax deductible?	•	6b		
7		nizations that may receive deductible contributions under section 170(c).				
	Did th	ne organization receive a payment in excess of \$75 made partly as a contribution ces provided to the payor?		7a		
b	If"Ye	es," did the organization notify the donor of the value of the goods or services pi	rovided?	7b		
c		ne organization sell, exchange, or otherwise dispose of tangible personal proper orm 8282?		7 c		
d	If"Ye	es," indicate the number of Forms 8282 filed during the year	7d			
е	Did th	ne organization receive any funds, directly or indirectly, to pay premiums on a p	ersonal benefit contract?	7e		
f	Did th	ne organization, during the year, pay premiums, directly or indirectly, on a perso	onal benefit contract?	7f		
g	If the requir	organization received a contribution of qualified intellectual property, did the ored?	rganızatıon file Form 8899 as • •	7 g		
h		organization received a contribution of cars, boats, airplanes, or other vehicles 1098-C?	s, 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 g the year?	siness holdings at any time	8		
9a	Did th	ne sponsoring organization make any taxable distributions under section 4966	·	9a		
b	Did th	ne sponsoring organization make a distribution to a donor, donor advisor, or rela	nted person?	9 b		
10	Section	on 501(c)(7) organizations. Enter				
а	I nitia	tion fees and capital contributions included on Part VIII, line 12	10a			
b	Gross facılıt	receipts, included on Form 990, Part VIII, line 12, for public use of club [:ies	10b			
11		on 501(c)(12) organizations. Enter				
		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 lieu of Form 1041?	12 a		
b		es," enter the amount of tax-exempt interest received or accrued during the	12b			
13	year Sectio	on 501(c)(29) qualified nonprofit health insurance issuers.				
а		e organization licensed to issue qualified health plans in more than one state? N ional information the organization must report on Schedule O	ote. See the instructions for	13a		
b		the amount of reserves the organization is required to maintain by the states ich the organization is licensed to issue qualified health plans	13b			
c	Enter	the amount of reserves on hand	13c			
		ne organization receive any payments for indoor tanning services during the tax	· ·	14a		No
ь	If"Ye	es," has it filed a Form 720 to report these payments? <i>If "No," provide an explana</i>	tion in Schedule O	14b		

orm	990 (2015)			Page			
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, describe the circumstances, processes, or changes in Schedule O. See instructions.	or 10)b belo	w,			
	Check if Schedule O contains a response or note to any line in this Part VI			<u> [</u>			
Se	ection 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 9						
	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						
b	Enter the number of voting members included in line 1a, above, who are independent 1b 8						
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		No			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No			
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo			
6	Did the organization have members or stockholders?	6		Νo			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
а	a The governing body?						
b	Each committee with authority to act on behalf of the governing body?	8b	Yes				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O						
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Re	eveni	ue Cod	e.)			

Yes 10a **10a** Did the organization have local chapters, branches, or affiliates? Νo **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing 11a Yes **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Νo **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12h c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe **12**c 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? . . . 14 Νo 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? a The organization's CEO, Executive Director, or top management official 15a Yes 15b Yes 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 **16**a Νo **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 16b

Section C. Disclosure 7. Let the States with which a copy of this Form 990 is required to be filed.

L/	List the States	with willtha	copy o	i tilis i oi	111 220 15	required to be med	

- 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. Check all that apply

 Own website. Another's website. Upon request. Other (explain in Schedule O)
- .9 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

 State the name, address, and telephone number of the person who possesses the organization's books and recor
- State the name, address, and telephone number of the person who possesses the organization's books and records ►ALBUQUERQUE TEACHERS FEDERATION 530 JEFFERSON NE ALBUQUERQUE, NM 87108 (505) 262-2657

Part VII

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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

(A) Name and Title	(B) Average hours per week (list any hours	per more than one box, unless list person is both an officer urs and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Highest compensated employee Key employee Officer Institutional Trustee		Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations		
(1) ELLEN BERNSTEIN	40 00									
PRESIDENT		×		×				71,615	0	19,432
(2) SEAN THOMAS EXEC VICE PR	2 00	х		x				0	0	C
(3) PAMELA IRVIN	2 00									
SECRETARY		×		×				0	0	C
(4) KAREN BAEHR TREASURER	2 00	х		х				0	0	C
(5) DWAYNE NORRIS	2 00									
MEM & INV VP		×		×				0	0	C
(6) TANYA KUHNEE VICE PRES HS	2 00	х						0	0	C
(7) JASON KROSINSKY VICE PRES MS	2 00	х						0	0	C
(8) MIRIAM MARTINEZ VICE PRES ES	2 00	x						0	0	C
(9) SONYA ROMERO SMITH VICE PRES ES	2 00	x						0	0	C

Part VII	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours per week (list any hours	(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-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
1b Sub-Total						•				
c Total from continuation sheetd Total (add lines 1b and 1c) .				٠.	٠.			71,615		19,432

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

- 3
 - 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 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

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

/D\

Section B. Independent Contractors

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

Name and business address	Description of services	Compensation

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

Yes

3

4

No

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Form 99	0 (20	15)						Page S
Part V	* • • •	Statement o	f Revenue					
		Check If Schedi	ule O contains a respor	nse 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
v 8	1a	Federated cam	paigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership du	es 1b					
	c	Fundraising eve	ents 1c					
fts.	d	Related organiz	zations 1d	-				
i2 i <u>E</u>	e	Government grants						
tributions, Gifts, Grants Other Similar Amounts		f All other contributions, gifts, grants, and 1f						
uti her	'	similar amounts no						
	g	Noncash contribution 1a-1f \$	ons included in lines					
Contand	h	Total. Add lines	s 1a-1f					
				Business Code				
Program Service Revenue	2a	MEMBERSHIP DUE	S	611710	2,177,507	2,177,507		
₽. ₹	ь	GRANTS AND ASSI	STANCE	611710	8,640	8,640		
3	c							
ξ	d							
E	e							
ogra	f	All other progra	am service revenue					
Ě	g	Total. Add lines	s 2a-2f	>	2,186,147			
	3		ome (including dividen		257			257
	4		ar amounts) stment of tax-exempt bond					
	5	Royalties		· ▶ ↑				
			(ı) Real	(II) Personal				
	6a	Gross rents	14,793					
	ь	Less rental	19,890					
	c	expenses Rental income	-5,097					
	d	or (loss) Net rental inco	me or (loss)		-5,097			-5,097
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory						
	b c	Less cost or other basis and sales expenses Gain or (loss)						
	d		[
Other Revenue	8a	Gross income f events (not inc \$						
ther Re	h	See Part IV, lin	ne 18 a penses b					
ō	c		(loss) from fundraising	events ▶				
	9a		rom gaming activities ne 19					
	ь	Less directex	penses b					
	l		(loss) from gaming activ	vities				
	10a	Gross sales of	inventory less	<u> </u>				
	100	returns and allo						
			а					
	b		oods sold b	n to m				
	c	Miscellaneous	(loss) from sales of inve s Revenue	Business Code				
	11a	seemancou.						
	ь							
	С							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d	🕨				
	12	Total revenue.	See Instructions		3 101 007	2.106.1.7		4.000
	I			•	2,181,307	2,186,147		-4,840

Part IX Statement of Functional Expenses

	All other organizations must complete column (A)

	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) Fundraısıng 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	76,355			
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	353,007			
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	54,999			
9	Other employee benefits	86,628			
10	Payroll taxes	45 207			
11	Fees for services (non-employees)	45,307			
a	Management				
a b	Legal	3,060			
C	Accounting	3,069 12,664			
d	Lobbying	12,004			
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A)				
9	amount, list line 11g expenses on Schedule O)	1,031			
12	Advertising and promotion				
13	Office expenses	41,052			
14	Information technology	15,306			
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	10,626			
21	Payments to affiliates	1,295,945			
22	Depreciation, depletion, and amortization	32,072			
23	Insurance	1,175			
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)				
а	BUILDING EXPENSES	40,522			
b	RECRUITMENT	36,278			
c	TRAVEL AND TRAINING	23,846			
d	CONTRACTUAL	12,920			
е	All other expenses	22,831			
25	Total functional expenses. Add lines 1 through 24e	2,165,633	0	0	0
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)				

1 Cash-non-interest-bearing 59.788 1 2 Savings and temporary cash investments 54.577 2 3 Pladges and grants receivable, net 3 3 4 Accounts receivable, net 55 50.832 4 5 Loans and other receivables from current and former officers, directurs, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 5 Loans and other receivables from other disqualified persons (as defined under section 4958 (c/3) (3)), and contributing employees, and highest compensated employees Complete Part II of Schedule L 6 7 Notes and loans receivable, net 6 8 Inventories for sale or use 8 9 9 Prapard expenses and deferred charges 9 9 100 Loans and other receivables, net 7 7 8 Inventories for sale or use 8 9 101 Loan, buildings, and equipment cost or other basis 10a 738.857 9 102 Loan, buildings, and equipment cost or other basis Complete Part IV of Schedule D 10b 222.454 546.475 10c 11 10 11 11 12 11 12 11 12 11 13 13	Form 990 (2015)			Page 11
1	Part X				
1 Cash-non-interest-bearing 193.786 1 2 Savings and temporary cash investments 54,571 2 3 Pledges and grants receivable, net 159.832 4 4 Accounts receivable, net 159.832 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule 5 6 Loans and other receivables from other disqualified persons (as defined under section 49.88(7(1)), persons described in section 49.88(2)(3)(8), and contributing employees and sponsoring organizations of section 49.88(2)(3)(8), and contributing employees sheeliciary organizations (see instructions) Complete Part II of Schedule 6 7 Notes and loans receivable, net 7 7 7 7 7 7 7 7 7		Check if Schedule O contains a response or note to any line in this Part X			· · · · <u>· · </u>
2 Savings and temporary cash investments 54,571 2 3 Pledges and grants receivable, net 159,832 4 4 Accounts receivable, net 159,832 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 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)) persons described in section 4958((2)3)(8), and contributing employees is beneficiarly organizations of section 4958((3)(8), and contributing employees beneficiarly organizations (see instructions) Complete Part II of Schedule L 7 7 Notes and loans receivable, net 7 7 7 7 7 7 7 7 7					(B) End of year
3 Pledges and grants receivable, net 159,832 4	1	Cash-non-interest-bearing	193,768	1	169,947
4 Accounts receivable, net 159.832 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 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(6), and contributing employees and sponsoring organizations of section 501 (c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net 7, 8 Inventories for sale or use 9 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 9 10b Less accumulated depreciation 10b 222.454 548.475 10c 11c 11c 11c 11c 11c 11c 11c 11c 11c	2	Savings and temporary cash investments	54,571	2	54,627
Secure Market Program-related See Part IV, line 11 11 Investments—publicly traded securities 12 Investments—other securities See Part IV, line 11 13 Investments—other securities See Part IV, line 11 14 Intangible assets 15 Other lasabilities of Character See Part IV, line 11 16 Total assets See Part IV, line 11 17 Accounts payable and accrued expenses 17 Accounts payable and accrued expenses 18 Grants payable 29 Tax-exempt bond liabilities 20 Deferred revenue 20 Tax-exempt bond loans payable to unrelated third parties, and other labilities. Add lines 17 through 25 Complete Part IV of Schedule L 25 Total labilities. Add lines 17 through 25 Complete Part IV of Schedule D 11 Deferred reverse 20 Organizations (Sac instructions) (Complete Part IV) 21 Deferred reverse 22 Deferred reverse 23 Secured mortgages and notes payable to unrelated third parties, and other labilities. Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 Complete Part IV of Schedule D 114,062 125 Organizations that follow SFAS 117 (ASC 958), check here yand complete 10 Organizations that follow SFAS 117 (ASC 958), check here yand complete 20 Organizations that follow SFAS 117 (ASC 958), check here yand complete 20 Organizations that follow SFAS 117 (ASC 958), check here yand complete 21 Organizations that follow SFAS 117 (ASC 958), check here yand complete 22 Organizations that follow SFAS 117 (ASC 958), check here yand complete 25 Organizations that follow SFAS 117 (ASC 958), check here yand complete 26 Organizations that follow SFAS 117 (ASC 958), check here yand complete 27 And the particular of the part IV (ASC 958), check here yand complete 28 Organizations that follow SFAS 117 (ASC 958), check here yand complete 29 Organizations that follow SFAS 117 (ASC 958), check here yand complete 29 Organizations that follow SFAS 117 (ASC 958), check here yand complete 20 Organizations that follow SFAS 117 (ASC 958), check here yand complete 20 Organizations that follow see yand complete 20 Org	3	Pledges and grants receivable, net		3	_
key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 49 58 (f)(1)), persons described in section 49 58 (c)(3) (B), and contributing employees and sponsoring organizations of section 501 (c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 To Notes and loans receivable, net	4	Accounts receivable, net	159,832	4	138,164
Section 4958(f)(1)), persons described in section 4958(c)(3)(8), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions) Complete Part II of Schedule L 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 1 Less accumulated depreciation 10b 222,454 546,475 10c 11 Investments—publicly traded securities 11 Investments—publicly traded securities 12 Investments—publicly traded securities 12 Investments—other securities See Part IV, line 11 13 Investments—program-related See Part IV, line 11 13 Investments—program-related See Part IV, line 11 15 15 Other assets See Part IV, line 11 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 954,646 16 16 17 Accounts payable and accrued expenses 17,670 17 18 Grants payable and accrued expenses 17,670 17 18 Grants payable and accrued expenses 17,670 17 18 Crants payable and accrued expenses 17,670 17 18 Crants payable and accrued expenses 19 Deferred revenue 19 Deferred	5	key employees, and highest compensated employees Complete Part II of		5	
Solution		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		6	
Solution	SS	Notes and loans receivable, net			-
9 Prepaid expenses and deferred charges	-			-	
10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation					
Deferred revenue 19 19 19 19 19 19 19 1	_			9	
11 Investments—publicly traded securities	10a	700 057			
12 Investments—other securities See Part IV, line 11	Ь	Less accumulated depreciation 10b 222,454	546,475	10c	514,403
13	11	Investments—publicly traded securities		11	
14 Intangible assets	12	Investments—other securities See Part IV, line 11		12	
15 Other assets See Part IV, line 11	13	Investments—program-related See Part IV, line 11		13	
15 Other assets See Part IV, line 11	14	Intangible assets		14	
16 Total assets.Add lines 1 through 15 (must equal line 34)	15			15	
17 Accounts payable and accrued expenses	16		954,646	16	877,141
19 Deferred revenue	17		17,670	17	9,015
Tax-exempt bond liabilities	18	Grants payable		18	
21 Escrow or custodial account liability Complete Part IV of Schedule D	19	Deferred revenue		19	
21 Escrow or custodial account liability Complete Part IV of Schedule D	20	Tax-exempt bond liabilities		20	
persons Complete Part II of Schedule L	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
persons Complete Part II of Schedule L	22 High				
24 Unsecured notes and loans payable to unrelated third parties		persons Complete Part II of Schedule L		22	
24 Unsecured notes and loans payable to unrelated third parties	<u></u> 23	Secured mortgages and notes payable to unrelated third parties	354,156	23	330,891
and other liabilities not included on lines 17-24) Complete Part X of Schedule D	_	Unsecured notes and loans payable to unrelated third parties		24	
114,062 25 26 Total liabilities. Add lines 17 through 25	25	and other liabilities not included on lines 17-24)			
Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete		·	114,062	25	116,207
	26	Total liabilities. Add lines 17 through 25	485,888	26	456,113
27 Unrestricted net assets	ces				
28 Temporarily restricted net assets	<u>ਛ</u> 27	Unrestricted net assets	468,758	27	421,028
Permanently restricted net assets	င္ဗ ထိ 28			28	
Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	달 29			29	
30 Capital stock or trust principal, or current funds	or Fu	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and			
31 Paid-in or capital surplus, or land, building or equipment fund	<u>≨</u> 30	•		30	
32 Retained earnings, endowment, accumulated income, or other funds	S 31				.,,,
	ظ ₃₂				
33 Total net assets or fund balances	ج ا ج	Total net assets or fund balances	468,758		421,028

34

Total liabilities and net assets/fund balances

877,141

954,646

2a

2b

2c

3a

3b

Yes

Yes

Νo

Nο

Form 990 (2015)

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

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

Both consolidated and separate basis

Both consolidated and separate basis

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

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

a separate basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

DLN: 93493135084107

Employer identification number

85-6011519

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Name of the organization

ALBUQUERQUE TEÁCHERS FEDERATION

Political expenditures

Volunteer hours

Service

1

2

3

Political Campaign and Lobbying Activities

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

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

<u>www.irs.gov/form990</u>.

2015
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If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

Provide a description of the organization's direct and indirect political campaign activities in Part IV

Complete if the organization is exempt under section 501(c)(3).

Section 527 organizations Complete Part I-A only

• Section 501(c)(4), (5), or (6) organizations Complete Part III

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

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

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

1	Enter the amount of any excise	e tax incurred by the organization und	er section 4955	▶	\$
2	Enter the amount of any excise	\$			
3	If the organization incurred a s	Yes No			
4 a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt under s	section 501(c), except section 50:	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for sec	ction 527 exemp	function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	for section 527 ▶	\$		
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 1120	POL, line 17b ►	\$
4	Did the filing organization file F	orm 1120-POL for this year?			⊤Yes 🗸 No
5	organization made payments f amount of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	e amount paid from rectly delivered t	m the filing organization's f o a separate political orga	unds Also enter the nızatıon, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2					
3					
4					
5					
6					
For F	Paperwork Reduction Act Notice, se	l ee the instructions for Form 990 or 990-	- EZ. Ca	at No 50084S Schedule C (F	Form 990 or 990-EZ) 2015

	art II-	A	Complete if the organization is exempt under section $501(c)(3)$ and file under section $501(h)$.	ed Form 5768	(election
	Check	•	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated groexpenses, and share of excess lobbying expenditures)	up member's name	e, address, EIN
i	Check	•	if the filing organization checked box A and "limited control" provisions apply		
			Limite on Lobbying Evnanditures	(a) Filing	(b) Affiliated

	Limits on Lobb	box A and "limited control" provisions apply bying Expenditures means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a b	Total lobbying expenditures to influence public lobbying) Total lobbying expenditures to influence a legi			
c	Total lobbying expenditures (add lines 1a and	1 b)		
d	Other exempt purpose expenditures			
e	Total exempt purpose expenditures (add lines	1c and 1d)		
f	Lobbying nontaxable amount Enter the amoun	t from the following table in both columns		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of	line 1f)		
h	Subtract line 1g from line 1a If zero or less, en	nter - 0 -		
i	Subtract line 1f from line 1c If zero or less, en			
j	If there is an amount other than zero on either reporting section 4911 tax for this year?	line 1h or line 1i, did the organization file Form 472		
		☐ Y e s	├ No	

columns below. See the separate instructions for lines 2a through 2f.) **Lobbying Expenditures During 4-Year Averaging Period** Calendar year (or fiscal year **(b)**2013 (d)2015 (a)2012 (c)2014 (e) Total beginning in) Lobbying nontaxable amount 2a Lobbying ceiling amount (150% of line 2a, column(e)) c Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures

Return Reference

SCHEDULE C, PART I-A, LINE 1

Sc he	edule C (Form 990 or 990-EZ) 2015				Pä	age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	ТОГ				
or e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)	,	(b)	
ctiv		Yes	No		A moun	it
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	103				
a	Volunteers?			-		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?			-		
۲. C	-			+		
d	Mailings to members, legislators, or the public?			+		
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			+		
h :	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?			+		
i	-			+		
j a-	Total Add lines 1c through 1i					
2a b	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912			-		
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
C C	, , , , , , , , , , , , , , , , , , , ,					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? t III-A Complete if the organization is exempt under section 501(c)(4), section 5	01/6	VEX	0 " 0	octio	
- G	501(c)(6).	,OI(C)(5),	01 5	ectio	11
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1	Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		Νo
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a	<u> </u>			
b	Carryover from last year	2b				
C	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
	art IV Supplemental Information		l			
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou	ın lıc+\	Dart I	Τ_Λ Ι	IDAC 1	
	see instructions), and Part II-B, line 1. Also, complete this part for any additional information	(ופוו קו	, rait 1	<u> ^ , </u>	c5 I	anu

Explanation

INTEREST'S OF EDUCATORS, AND PROVIDE GUIDANCE TO MEMBERS

THE INDIRECT POLITICAL ACTIVITIES INCLUDE ONLY IN-HOUSE EXPENDITURES FOR SALARIES, RELATED EXPENSES AND EXPENSES TO EDUCATE MEMBERSHIP, ADVANCE

SCHEDULE D

(Form 990)

Treasury

Department of the

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

DLN: 93493135084107

Open to Public Inspection

Inter	nal Revenue Service	`		Ziiopeetioii
	me of the organization		Empl	oyer identification number
ALL	ogatingot itaciitina i Ebenarion		85-6	011519
Pā	organizations Maintaining Donor	Advised Funds or Other Similar Funds or Other Similar Funds on Form 990, Part IV, line 6.	ınds o	or Accounts.
	Complete if the organization answere	(a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of year	(a) Bonor davised lands	(6)	r unus and other accounts
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	-	or advis	sed 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 No
Pa	rt III Conservation Easements. Comple	ete if the organization answered "Yes" o	n Form	n 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by th	3 (11 //		
	Preservation of land for public use (e.g., recreeducation)		n histor	ically important land area
	Protection of natural habitat			d historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization easement on the last day of the tax year	held a qualified conservation contribution in t	he form	of a conservation
				Held at the End of the Year
a	Total number of conservation easements		2a	
Ь	Total acreage restricted by conservation easeme		2b	
c d	Number of conservation easements on a certified Number of conservation easements included in (c	, ,	2 c	
u	historic structure listed in the National Register	and the street of the street o	2d	
3	Number of conservation easements modified, trai	nsferred, released, extinguished, or terminate	d by the	e organization during the
	tax year ▶			
4	Number of states where property subject to cons	ervation easement is located >		
5	Does the organization have a written policy regar violations, and enforcement of the conservation e		iling of	☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, year	inspecting, handling of violations, and enforci	ng cons	ervation easements during the
	<u> </u>			
7	A mount of expenses incurred in monitoring, insper ▶ \$	ecting, handling of violations, and enforcing co	onserva	ition easements during the year
8	Does each conservation easement reported on III (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 repor balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financial	•	•
Pai	t III Organizations Maintaining Collect Complete if the organization answers	ctions of Art, Historical Treasures, o ed "Yes" on Form 990, Part IV, line 8.	or Oth	er Similar Assets.
1a	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the footi	assets held for public exhibition, education, o	or resea	arch in furtherance of public
b	If the organization elected, as permitted under SI	FAS 116 (ASC 958), to report in its revenue s	stateme	ent and balance sheet

service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1

Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

▶ \$ __

works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public

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

Par	t III	Organizations Maintaining (continued)	Collections of Art,	Historica	I Trea	sures, o	r Otl	her Similar A	sset	s
3		g the organization's acquisition, acce ction items (check all that apply)	ession, and other record	ls, check an	y of the	following th	at are	e a significant us	e of it	:s
а		Public exhibition		d	Loan or	exchange p	rogra	ıms		
b	Scholarly research e Other									
c		Preservation for future generations								
4	Provi Part :	de a description of the organization's XIII	s collections and explai	n how they f	urther th	ne organizat	ion's	exempt purpose	ın	
5		g the year, did the organization solic s to be sold to raise funds rather tha						sımılar Ye	s [No
Pa	rt IV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		orm 990, Pa	art IV,	line 9, or	repo	rted an amour	nt on	Form 990,
1a		e organization an agent, trustee, cus ded on Form 990, Part X?	todian or other interme	diary for con	tributio	ns or other	asset	ts not Ye	s [No
b	If'	"Yes," explain the arrangement in Pa	art XIII and complete th	ne followina t	able		[Am	ount	
c		ginning balance	are XIII and complete to	ie ionoming (.ubic		1c			
d		ditions during the year					1d			
e		stributions during the year					1e			
f		ding balance					1f			
2 a		ne organization include an amount or	n Form 990, Part X, line	21, for escr	ow or c	ـــ ustodial acc	count	liability? Ye	s [No No
b	If"Ye	es," explain the arrangement in Part	XIII Check here if the	explanation	has bee	en provided	ın Pa	rt XIII		🗆
Pa	rt V	Endowment Funds. Complet	te if the organization	answered	"Yes"	to Form 99	90, P	art IV, line 10		
			(a)Current year	(b) Pnor year	b (c)	Two years ba	ck (c	1)Three years back	(e)F	our years back
1a	_	nning of year balance					_			
b	Cont	ributions								
c	Net i	nvestment earnings, gains, and								
d	Gran	ts or scholarships								
е		r expenditures for facilities programs								
f	A dm	inistrative expenses								
g		of year balance								
2	Provi	de the estimated percentage of the o	current vear end balanc	e (line 1a, ci	olumn (a	a)) held as			l	
а		d designated or quasi-endowment ▶	, ,	- (5, -		.,,				
b		anent endowment >								
c										
·		orarily restricted endowment > percentages on lines 2a, 2b, and 2c s	should equal 100%							
3а		here endowment funds not in the pos nization by	session of the organiza	tion that are	held ar	nd administe	ered f	for the		Yes No
	(i) ur	related organizations				•			a(i)	
	٠,	elated organizations							(ii)	
ь 4		es" on 3a(II), are the related organiza ribe in Part XIII the intended uses o	·				•		3b	
	rt VI	Land, Buildings, and Equip		owinent fund	15					
		Complete if the organization a		m 990, Pa	rt IV, lı	ne 11a.Se	e Fo			
		Description of property		(a) Cost or oth (investr	ner basıs	(b) Cost or othe (other)		Accumulated (c)depreciation	((d) Book value
1a	Land					3	35,095			35,095
b	Buildir	ngs				62	23,979	164,1	55	459,824
c	Leasel	nold improvements								
d	Equipr	nent				7	77,783	58,2	99	19,484

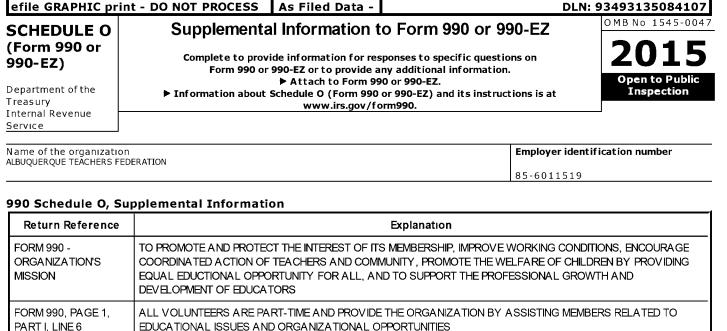
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

514,403

See Form 990, Part X, line 12. (a) Description of security or cate	gory	(b)Book value	(c)Method of valuation
(including name of security) (1)Financial derivatives			Cost or end-of-year market valu
(2)Closely-held equity interests			
(3) O ther			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12			
Part VIII Investments—Program Related Complete if the organization answer	d. ered 'Yes' on Form 990	, Part IV, line 11c.s.	ee Form 990 Part Y line 13
(a) Description of investment		(b) Book value	(c) Method of valuation
			Cost or end-of-year market valu
Total. (Column (b) must equal Form 990. Part X. col (B) line 13) •		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 Part IX Other Assets. Complete if the organi	zation answered 'Yes' on F	form 990, Part IV, line	
Part IX Other Assets. Complete if the organi	/	form 990, Part IV, line	11d See Form 990, Part X, line 15 (b) Book value
Part IX Other Assets. Complete if the organi	zation answered 'Yes' on F	orm 990, Part IV, line	
Part IX Other Assets. Complete if the organi	zation answered 'Yes' on F	orm 990, Part IV, line	
Part IX Other Assets. Complete if the organi	zation answered 'Yes' on F	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organi	zation answered 'Yes' on F	orm 990, Part IV, line	
Part IX Other Assets. Complete if the organi	zation answered 'Yes' on F	form 990, Part IV, line	
Part IX Other Assets. Complete if the organi	zation answered 'Yes' on F	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organi	zation answered 'Yes' on F	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organi	zation answered 'Yes' on F	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organi	zation answered 'Yes' on F	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organi (a) D	zation answered 'Yes' on F		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B). Part X Other Liabilities. Complete if the organical (a) D	zation answered 'Yes' on Foescription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B). Part X Other Liabilities. Complete if the See Form 990, Part X, line 25.	zation answered 'Yes' on Foescription line 15) organization answered		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B). Part X Other Liabilities. Complete if the See Form 990, Part X, line 25.	zation answered 'Yes' on Foescription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B). Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability	zation answered 'Yes' on Foescription line 15) organization answered		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	zation answered 'Yes' on Foescription line 15) organization answered	'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	Zation answered 'Yes' on Forescription Jine 15)	'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	Zation answered 'Yes' on Forescription Jine 15)	'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	Zation answered 'Yes' on Forescription Jine 15)	'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	Zation answered 'Yes' on Forescription Jine 15)	'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	Zation answered 'Yes' on Forescription Jine 15)	'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	Zation answered 'Yes' on Forescription Jine 15)	'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	Zation answered 'Yes' on Forescription Jine 15)	'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the organical part X, line 25.	Zation answered 'Yes' on Forescription Jine 15)	'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	Zation answered 'Yes' on Forescription Jine 15)	'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	Zation answered 'Yes' on Foescription line 15)	'Yes' on Form 990,	(b) Book value

Par		evenue per Audited Financial Stanicial Stanicia Stanicia Stanicia Stanicia Stanicia Stanicia Stanicia Stan			per Reti	urn
1		er support per audited financial statements			1	2,201,197
2	A mounts included on line 1 bi	ut not on Form 990, Part VIII, line 12				· · · · · · · · · · · · · · · · · · ·
а	Net unrealized gains (losses)	on investments	2a			
b	Donated services and use of	facilities	2b			
c	Recoveries of prior year grant		2c			
d	Other (Describe in Part XIII)	. 2d	19,890		
e	Add lines 2a through 2d				2e	19,890
3	Subtract line 2e from line 1 .				3	2,181,307
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1				
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines 4a and 4b				4c	
5	Total revenue Add lines 3 an	d 4c. (This must equal Form 990, Part I, line	12)		5	2,181,307
Par		xpenses per Audited Financial St			s per Re	eturn.
		nization answered 'Yes' on Form 990,		· ·		
1	,	er audited financial statements			1	2,185,523
2		ut not on Form 990, Part IX, line 25	1	ſ		
а		facilities	2a			
b	· •		2b			
С	Otherlosses		2c			
d	Other (Describe in Part XIII))	2 d	19,890		
е	Add lines 2a through 2d				2e	19,890
3			•		3	2,165,633
4	Amounts included on Form 99	00, Part IX, line 25, but not on line 1:	ı	1		
а	,	luded on Form 990, Part VIII, line 7b .	. 4a			
b	Other (Describe in Part XIII))	4b			
c	Add lines 4a and 4b				4c	
5	Total expenses Add lines 3 a	nd 4c. (This must equal Form 990, Part I, li	ne 18)	5	2,165,633
Prov Part	· · · · · · · · · · · · · · · · · · ·	formation Part II, lines 3, 5, and 9, Part III, lines 1a, lines 2d and 4b, and Part XII, lines 2d and			•	any additional
	Return Reference	Explanation				
SCHE	DULE D, PAGE 3, PART X	ATF IS A NONPROFIT ORGANIZATION	AND	QUALIFIES AS A TAX-	EXEMPT (DRGANIZATION
		UNDER SECTION 501 (C)(5) OF THE IN ACTIVITIES AS IT RELATES TO ITS TADETERMINED TO BE OUTSIDE OF ITS LIABILITIES ON THOSE UNRELATED A ACTIVITIES THAT CREATE TAXABLE UPROVISION FOR INCOME TAXES HAS ATF'S INCOME TAX FILINGS ARE SUBJATF'S OPEN AUDIT PERIODS ARE FOR ATF HAS ADOPTED THE PROVISIONS UNCERTAINTY IN INCOME TAXES" ATFINANCIAL STATEMENTS FOR UNCERADOPTION	TERNA XX EXE TAX E CTIVI JNREL BEEN ECT T THE Y OF FA	AL REVENUE CODE AT MPT STATUS IF ATF AXEMPT STATUS THE POST THE SECOND THE POST THE SECOND THE SECO	F REGULA ACTIVITI DTENTIA F ENGAG ME ACC TINANCIA TAXING , 2013 AN DUNTING	ARLY EVALUATES ES ARE L EXISTS FOR TAX ES IN NO ORDINGLY, NO AL STATEMENTS AUTHORITIES ND THEREAFTER FOR GES TO ITS

Schedule D (Form 990) 2015		Page 5
Part XIII Supplemental In	formation <i>(continued)</i>	
Return Reference	Explanation	
SCHEDULE D, PAGE 4, PART XII, LINE 2D	DIRECT RENT EXPENSES 19,890	
	· · · · · · · · · · · · · · · · · · ·	



P90 Schedule O, Supplemental Information

Return Reference Explanation

FORM 990, PAGE 6, PART VI. | A DRAFT OF THE 990 INFORMATION RETURN IS PROVIDED TO SPECIFIED EXECUTIVE COUNCIL MEMBERS

LINE 11B	FOR REVIEW PRIOR TO SUBMISSION
FORM 990, PAGE 6, PART VI,	COMPENSATION OF THE PRESIDENT IS SUBJECT TO REVIEW AND APPROVAL PROCESS AS PART OF
LINE 15A	ANNUAL BUDGETING FOR THE ORGANIZATION

990 Schedule O, Supplemental Information

Return Reference Explanation

AVAILABLE UPON REQUEST

VI. LINE 19

FORM 990, PAGE 6, PART VI, LINE 15B	COMPENSATION OF OFFICERS OR KEY EMPLOYEES, AS APPLICABLE, SUBJECT TO REVIEW AND APPROVAL PROCESS AS PART OF ANNUAL BUDGETING FOR THE ORGANIZATION
FORM 990, PAGE 6, PART	A COPY OF THE GOVERNING DOCUMENTS ARE MAINTAINED AT THE ORGANIZATION'S OFFICE AND ARE

990 Schedule O, Supplemental Information

Return Explanation

FORM 990, PART DIRECT RENT EXPENSES 19,890 DIRECT RENT EXPENSES -19,890 A PRIOR PERIOD ADJUSTMENT WAS NECESSARY TO
XI. LINE 9 PROPERLY ACCOUNT FOR RESTATEMENT OF THE PRIOR YEAR'S REVENUE RELATED TO MEMBERSHIP DUES