efile GRAPHIC print Submission Date - 2023-11-30 DLN: 93493338009523 OMB No. 1545-0047 Return of Organization Exempt From Income Tax 990 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 Inspection Treasury Servicer the 2022 calendar year, or tax year beginning 07-01-2022 Name of organization NORTHSIDE AMERICAN FEDERATION OF TEACHERS D Employer identification number **B** Check if applicable: ☐ Address change O Name change Doing business as O Initial return Final return/terminated Number and street (or P.O. box if mail is not delivered to street address) E Telephone number O Amended return 6502 Bandera Rd STE 202 Application pending City or town, state or province, country, and ZIP or foreign postal code San Antonio, TX 78238 G Gross receipts \$835,242 Name and address of principal officer: H(a) Is this a group return for ☐Yes ✓ No subordinates? Are all subordinates H(b) ☐ Yes ☐No included? Tax-exempt status: 501(c)(3) 4947(a)(1) or If "No," attach a list. See instructions. **H(c)** Group exemption number ▶ Website: L Year of formation: 2015 **K** Form of organization:  $\Box$  Corporation  $\Box$  Trust lacksquare Association  $\Box$  Other lacksquareM State of legal domicile: TX Summary 1 Briefly describe the organization's mission or most significant activities: To act as a collective bargaining agent and seek optimum working conditions. To provide member representation and due process. To act as a liason between teachers, administrators, and school committees. To promote professionalism among members Activities & Governance Check this box 🕨 🗌 if the organization discontinued its operations or disposed of more than 25% of its net asset: Number of voting members of the governing body (Part VI, line 1a) . 3 4 10 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 6 Total number of volunteers (estimate if necessary) . Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, Part I, line 11 0 **Prior Year Current Year** 809.998 8 Contributions and grants (Part VIII, line 1h) . Program service revenue (Part VIII, line 2g) . Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 25.244 10 O Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 835.242 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 304,384 **16a** Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 602,692 907,076 Total expenses, Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 . -71.834 Assets or d Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . 1,092,081 1.031.396 21 Total liabilities (Part X, line 26) . 1,165 Net assets or fund balances. Subtract line 21 from line 20 1,090,916 1,031,396 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2023-11-27 Signature of officer Date Sign Here Wanda Longoria President Type or print name and title Date 2023-11-30 rint/Type preparer's name Preparer's signature Check 🔽 if P00430559 self-employed Firm's name Freedom Tax and Business Services Firm's EIN > 82-1426202 Preparer Use Only Firm's address > 2208 Primrose Ave Ste I B-C Phone no. (956) 668-1040 McAllen, TX 785044155 🗌 Yes 🔽 No May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2022) Cat. No. 11282Y

Form 990 (2022) Page 3 Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Nο 1 2 No Is the organization required to complete Schedule B, Schedule of Contributors? See instructions. Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates No 3 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 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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III . . . No 5 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 No 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, No the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . . . 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 No 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? No 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Nο permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V . . . . . . . . . . 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. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Yes 11a **b** Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Yes 11b c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total No assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII . . . . . . . . . 11c 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 No **11d** e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e No Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f Nο 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a No Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Nο If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Nο 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 14b No Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Nο foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . . 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to No or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, No 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions. Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 No Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 No 20a 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 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic Nο 21 government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . .

Par	The 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 Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No					
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "Yes," complete Schedule J	23		No					
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No					
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b							
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							
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d							
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "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 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II								
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L,Part III	27		No					
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):								
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV								
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28a		No					
	A 250/ controlled antity of one or many individuals and/or approximations described in line 200 or 20h2 (6)) Years according								
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No					
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No					
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		No					
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I								
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		No					
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		No					
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		No					
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No					
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		l					
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36							
37	is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI								
38	All Form 990 filers are required to complete Schedule O								
Pai	Part V Statements Regarding Other IRS Filings and Tax Compliance								
	Check if Schedule O contains a response or note to any line in this Part V								
1.	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable   1a   0		Yes	No					
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0  Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable . 1b 0								
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes						

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Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
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			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	.00	No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	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		No
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?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
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		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
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		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
_				
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		No
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
Б	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	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?  Note. See the instructions for additional information the organization must report on Schedule O.	13a		
	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	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		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No
17	<b>Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17		

Part VI Governance. Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines

	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			<b>✓</b>
Se	ection A. Governing Body and Management			
			Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year 12			
	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 10			
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? .	3		No
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		No
6	Did the organization have members or stockholders?	6	Yes	
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	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
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	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	<b>10</b> a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe on 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		No
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to			
c	conflicts?	12b		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12b 12c		
13	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on			No
	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe on Schedule O how this was done</i>	12c	Yes	No
13 14 15	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done  Did the organization have a written whistleblower policy?	12c	Yes	No
14 15	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	Yes	No No
14 15 a	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c 13 14	Yes	
14 15 a	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c 13 14	Yes	No
14 15 a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c 13 14	Yes	No

## Section C. Disclosure

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List the states with which a copy of this Form 990 is required to be filed

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

Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. 18 Own website Another's website Upon request Other (explain in Schedule O)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest 19

State the name, address, and telephone number of the person who possesses the organization's books and records: ►Wanda Longoria 6502 Bandera Rd Ste 202 San Antonio, TX 78238 (210) 728-6569

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

- 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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

• List all of the organization's <b>former directors or trustees</b> 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.										
See the instructions for the order in which to list the persons above.										
Check this box if neither the organization not  (A)  Name and title	(B) Average hours per week (list	Position than o	n (do ne bo oth ar	(C) not ox, u n off	che nles	eck mess pers	ore son	( <b>D</b> ) Reportable compensation from the	(E) Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	any hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer		Highest compensated employee	Former	organization (W- 2/1099- MISC/1099-NEC)	organizations (W-2/1099- MISC/1099-NEC)	from the organization and related organizations
(1) Bill Thomas	6.00									
Executive VP at Large	0.00			Х				0	0	0
(2) Natasha Thurmon	6.00									
Executive VP for Elementary S	0.00			Х				0	0	0
(3) Ledda Arcelus	6.00			х				0	0	
Executive VP for Elementary S	0.00			, x					0	0
(4) John Thornton	6.00			Х				0	0	0
Executive VP at Large	0.00			^				0	0	0
(5) Anthony Grennes	6.00			х				0	0	0
Executive VP at Large	0.00			,						
(6) Patricia Delgado	6.00			Х				0	0	0
Executive VP at Large	0.00							_	-	
(7) Kathryn Medendorp Executive Secretary	6.00			х				0	0	0
(8) Tracy Jordan Executive VP	6.00			х				0	0	0
(9) Wanda Longoria	60.00							_		
President	0.00			Х				0	0	0
(10) Kate Curtis	6.00			х					0	
Executive VP for Middle Schoo	0.00			X				0	0	0
(11) Anthony Rogers	6.00			Х				0	0	0
Executive VP for HS	0.00			^					0	
(12) Aceneth Medina	6.00			х				0	0	0
Executive Treasurer	0.00			,				Ü		
(13) Zoe C Moshenberg	40.00				Х			0	0	0
Organizer 4	0.00							_	-	
(14) Mindy M Musch	20.00				Х			0	0	0
Organizer	0.00									
(15) Lizette Goodloe	20.00				Х			0	0	0
Organizer	0.00 40.00									
(16) Melina A Espiritu-Azocar					х			0	0	0
Lead Organizer	0.00 40.00									
(17) Carol A Villarreal					х			0	0	0
Professional Development Dire	0.00									Form <b>990</b> (2022)
										101111 330 (2022)

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<b>(A)</b> Name and title	(B) Average hours per week (list any hours for		ne bo	ox, u n off	t che inle: fice:	ss pers	son	(D) Reportable compensation from the organization (W-		tion ted ons	Estin amount compe from	nated of other nsation of the
	related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099- MISC/1099-NEC)	(W-2/109 MISC/1099-		rela	ation and ated zations
(18) Kerri Schlenker	30.00				Х				0	0		0
Office Manager (19) Mary C Uribe	0.00 40.00											
Organizer 3	0.00				X				0	0		0
1b Sub-Total			 		* * *		<u> </u>	0		0		0
Total number of individuals (including but r reportable compensation from the organization)	not limited to th		ed ab	ove)	) wh	o rece	eived	I more than \$100,	000 of	•		
3 Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual								3	Yes	No No		
4 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 J for such individual								4		No		
5 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		No	
Section B. Independent Contractors												
Complete this table for your five highest compensation. Report compensation for										mpens		
	usiness address							Descri	otion of services			c) nsation

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

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

	m 990 (2022)				Page <b>10</b>
P	Statement of Functional Expenses	endete all calumana	All ablace area winabiae		(A)
	Section 501(c)(3) and 501(c)(4) organizations must cor				
_	Check if Schedule O contains a response or note to any		(B)	(C)	U
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21			3 ,	
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	231,104	231,104		
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	4,500	4,500		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	37,318		37,318	
10	Payroll taxes	31,462	31,462		
11	Fees for services (non-employees):				
	a Management				
-	b Legal	280	280		
	c Accounting	3,078		3,078	
	d Lobbying				
•	e Professional fundraising services. See Part IV, line 17				
1	f Investment management fees	5,313		5,313	
•	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,914		1,914	
12	Advertising and promotion	43	43		
	Office expenses	11,230		11,230	
	Information technology				
	Royalties	33,163		22.162	
	Occupancy	33,103		33,163	
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
10	Conferences, conventions, and meetings	35,609	35,609		
	Interest	33,003	33,003		
	Payments to affiliates	507,641		507,641	
	Depreciation, depletion, and amortization	1,353		1,353	
	Insurance	1,238		1,238	
	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.)				
	a BANK SERVICE FEE	4		4	
	<b>b</b> MOVING EXPENSES	1,826		1,826	
	С				_
	d				
	e All other expenses				
25	<b>Total functional expenses.</b> Add lines 1 through 24e	907,076	302,998	604,078	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).				

Form 990 (2022) Page **11** Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part IX  $\,$  .

 23 24
1

Assets	1 1 1 1 1 2 2 2
Liabilities	1 1 2 2 2 2 2 2 2
Fund Balances	2
ets or	3

33

Total liabilities and net assets/fund balances . . .

				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing		1,092,081	1	258,895
	2	Savings and temporary cash investments	[		2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any current or trustee, key employee, creator or founder, subst controlled entity or family member of any of the	tantial contributor, or 35% se persons		5	
	6	Loans and other receivables from other disqualit section 4958(f)(1)), and persons described in se			6	
S	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
¥S8	9	Prepaid expenses and deferred charges			9	
_	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 27,014			
	b	Less: accumulated depreciation	<b>10b</b> 21,603		10c	5,411
	11	Investments—publicly traded securities .			11	
	12	Investments—other securities. See Part IV, line	11		12	767,090
	13	Investments—program-related. See Part IV, line		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11			15	
	16	<b>Total assets.</b> Add lines 1 through 15 (must equ	ial line 33)	1,092,081	16	1,031,396
	17	Accounts payable and accrued expenses		1,165	17	
	18	Grants payable			18	
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20		
S	21	Escrow or custodial account liability. Complete P	art IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or form employee, creator or founder, substantial contri or family member of any of these persons		22		
ï	23	Secured mortgages and notes payable to unrela		23		
	24	Unsecured notes and loans payable to unrelated		24		
	25	Other liabilities (including federal income tax, pa and other liabilities not included on lines 17 - 24 Complete Part X of Schedule D	ayables to related third parties,		25	
	26	<b>Total liabilities.</b> Add lines 17 through 25 .		1,165	26	0
nces		Organizations that follow FASB ASC 958, ch complete lines 27, 28, 32, and 33.	neck here 🕨 🗹 and			
la	27	Net assets without donor restrictions		1,090,916	27	1,031,396
d Ba	28	Net assets with donor restrictions			28	
Assets or Fund Baland		Organizations that do not follow FASB ASC complete lines 29 through 33.				
0	29	Capital stock or trust principal, or current funds			29	<u> </u>
ets	30	Paid-in or capital surplus, or land, building or equ		30		
155	31	Retained earnings, endowment, accumulated in	come, or other funds		31	
t.	32	Total net assets or fund balances		1,090,916	32	1,031,396

1,092,081

33

1,031,396 Form **990** (2022) efile GRAPHIC print

Submission Date - 2023-11-30

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

DLN: 93493338009523

# OMB No. 1545-0047

Open to Public

## **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

**Supplemental Financial Statements** 

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. 
► Attach to Form 990. ► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

Inspection

	me of the organization THSIDE AMERICAN FEDERATION OF TEACHERS		Employer identification number
1101	THIS DE AMERICAN FEBRUARION OF TEACHERS		46-3810059
Pā	rt I Organizations Maintaining Donor Adv		or Accounts.
	Complete if the organization answered "Y	es" on Form 990, Part IV, line 6.  (a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) Donor advised funds	(b) Fullus 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 advis organization's property, subject to the organization's e		
6	Did the organization inform all grantees, donors, and c charitable purposes and not for the benefit of the dono private benefit?	or or donor advisor, or for any other purpose co	pe used only for
Pa	rt II Conservation Easements.  Complete if the organization answered "Y	es" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the orga	anization (check all that apply).	
	Preservation of land for public use (e.g., recreation	on or education) $igcap$ Preservation of an	historically important land area
	Protection of natural habitat	Preservation of a c	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	a qualified conservation contribution in the for	m of a conservation  Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements .		2b
c	Number of conservation easements on a certified histo	oric structure included in (a)	2c
d	Number of conservation easements included in (c) acq historic structure listed in the National Register	uired after July 25, 2006, and not on a	2d
3	Number of conservation easements modified, transfer tax year	red, released, extinguished, or terminated by t	he organization during the
4	Number of states where property subject to conservati	ion easement is located 🕨	
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		
_	Staff and volunteer hours devoted to monitoring, inspe		U Yes U No
5		ecting, handling of violations, and emorcing co	nservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting \$	g, handling of violations, and enforcing conserv	ration easements during the year
В	Does each conservation easement reported on line 2(c and section 170(h)(4)(B)(ii)?	· ·	
9	In Part XIII, describe how the organization reports cons	servation easements in its revenue and expens	
D-	balance sheet, and include, if applicable, the text of the organization's accounting for conservation easemed	ents.	
Гa	Complete if the organization answered "Y	es" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB A historical treasures, or other similar assets held for pul Part XIII, the text of the footnote to its financial statem	blic exhibition, education, or research in furthe	
b	If the organization elected, as permitted under FASB A historical treasures, or other similar assets held for pul following amounts relating to these items:	blic exhibition, education, or research in furthe	erance of public service, provide the
(	i) Revenue included on Form 990, Part VIII, line 1		. <b>&gt;</b> \$
(i	i) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, histor following amounts required to be reported under FASB	rical treasures, or other similar assets for finan ASC 958 relating to these items:	cial gain, provide the
а	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

Cat. No. 52283D

Schedule D (Form 990) 2022

Par		Organizations M	iaintaining Coil	ections	of Art, H	IISTOI	rıcaı	ıreas	iures, or	Otnei	Similar	Assets	(continued)
3		the organization's acq (check all that apply):		and other	r records, c	heck a	any of	the fo	llowing tha	it are a	significant ા	use of its	collection
а		Public exhibition				d		Loan	or exchan	ge prog	rams		
b		Scholarly research				e		Othe	r		***************************************		<b></b>
c		Preservation for future	generations										
4	Provid Part X	de a description of the (	organization's collec	ctions and	d explain ho	ow the	y furth	ner the	e organizat	ion's ex	empt purpo	ose in	
5		g the year, did the orga s to be sold to raise fur										□ Ye	es 🗌 No
Par	t IV	Escrow and Cust Complete if the org line 21.			" on Form	990,	Part I	V, lin	e 9, or re <sub>l</sub>	ported	an amour	nt on Fo	rm 990, Part X,
1a		organization an agent, led on Form 990, Part X										☐ <b>Y</b> €	es 🗆 No
b	If "Yes	s," explain the arrange	ment in Part XIII and	d complet	e the follow	ving ta	able:				-	Amount	
c	Begin	ning balance								1c			
d	Additi	ions during the year .							. 🗀	1d			
е	Distril	butions during the year	r						:	1e			
f	Endin	g balance								1f			
2a	Did th	ne organization include	an amount on Form	n 990, Par	t X, line 21	, for e	scrow	or cus	todial acco	ount liab	oility?	☐ Ye	es 🗆 No
b		s," explain the arranger										_	
	rt V	Endowment Fund											
		Complete if the org	ganization answe										
1.	Pogina	ing of year balance .	_	(a) Currer	nt year	<b>(b)</b> Pi	rior yea	r	(c) Two year	rs back	(d) Three ye	ears back	(e) Four years back
	-	outions											
		restment earnings, gair	os and lossos					$\dashv$					
			_										
		or scholarships	<u> </u>										
	and pro	expenditures for facilities ograms	L										
		strative expenses .	_										
g		year balance	<u>L</u>										
2		de the estimated perce	•	year end	d balance (l	line 1g	ı, coluı	mn (a)	) held as:				
а		I designated or quasi-e	ndowment <b>&gt;</b>										
b		anent endowment 🕨											
c		endowment 🕨											
2-		ercentages on lines 2a				n that	ara ba	مد اماد	d administr	orad far	the		
3а		nere endowment funds lization by:	not in the possessit	on or the o	organizatio	II tilat	are ne	eiu and	a administe	erea ioi	trie		Yes No
	(i) Un	related organizations										3	a(i)
	(ii) Re	elated organizations .										3	a(ii)
b	If "Yes	s" on 3a(ii), are the rela	ited organizations li	sted as re	equired on S	Sched	ule R?						3b
4	Descr	ribe in Part XIII the inter			n's endowm	ent fu	nds.						
Par	t VI	<b>Land, Buildings,</b> Complete if the ord			" on Form	990.	Part I	V, lin	e 11a. Se	e Form	n 990, Part	X, line	10.
	Descri	ption of property	(a) Cost or other (investment	basis	(b) Cost or			_			epreciation	-	(d) Book value
1a	Land												
	Buildin				<u> </u>								
		old improvements			<u> </u>				1				
		nent						27,014			21,603		5,411

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

5,411

Part VII	Investments - Other Securities.	rm 000 Part IV lie	no 11h Coo Form	o 000 Part V line 1	2
	Complete if the organization answered "Yes" on Fo  (a) Description of security or category	(b) Book value		(c) Method of valuat	ion:
(1) Financia	(including name of security)		Cos	st or end-of-year mark	et value
(2) Closely-l	held equity interests				
	INVESTMENTS	767,09	0	F	
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	n (b) must equal Form 990, Part X, col. (B) line 12.)	767,09	0		
Part VIII	Investments - Program Related.  Complete if the organization answered 'Yes' on Fo	rm 990, Part IV, lir	ne 11c. See Forr	n 990, Part X, line i	13.
	(a) Description of investment		(b) Book value	(c) Method of Cost or end-of-year	of valuation:
(1)				cost of cha of ye	di market value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	The second form one of the second sec				
Part IX	n (b) must equal Form 990, Part X, col.(B) line 13.)  Other Assets.	•			
	Complete if the organization answered 'Yes' on For  (a) Description	m 990, Part IV, lin	e 11d. See Forn		.5. (b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
1	mn (b) must equal Form 990, Part X, col.(B) line 15.)			▶	
Part X	Other Liabilities.			•	U 25
1.	Complete if the organization answered 'Yes' on For (a) Description		e 11e or 111.5e	e Form 990, Part X,	(b) Book value
(1) Federal	income taxes				
-					
-					
Total. (Colum	n (b) must equal Form 990, Part X, col.(B) line 25.)			<b>▶</b>	
2. Liability f	or uncertain tax positions. In Part XIII, provide the text of th			ial statements that re	
organization	s's liability for uncertain tax positions under FIN 48 (ASC 740	0). Check here if the	text of the footno	te has been provided	in Part XIII 🔲

3

1

2

3

а

b

Part XII

Page 4

	Return.											
	Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.											
1	Total revenue, gains, and other support per audited financial statements											
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:											

Net unrealized gains (losses) on investments . . . . 2a 2b

Recoveries of prior year grants . . . . .

Add lines 2a through 2d . . . . . Subtract line **2e** from line **1** . . . . . .

Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b. 

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . . . . Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Amounts included on line 1 but not on Form 990, Part IX, line 25:

2a 2b 2c 2d

4a

4b

2c 2d

4h

2e 3

4c

1

2e 3

4c

1

Schedule D (Form 990) 2022

2:	Part	XI.	line

•	iotai exp	enses. Add lines 3 and 4	C. (This must equal Form 990, Part I, line 18.)							
Part XIII Supplemental Information										
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b. Also complete this part to provide any additional information.										
Return Reference			Explanation							

### Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII

Prior year adjustments . . .

Add lines 2a through 2d . .

Other losses . . . Other (Describe in Part XIII.) .

**Supplemental Information** 

Subtract line **2e** from line **1** . . . . .

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

efile GRAPHI	C print	nt Submission Date - 2023-11-30									DL	LN: 93493338009523									
SCHEDULI (Form 990) Department of the Treasury Internal Revenue Name of the organ Mort History	ne anization	n								ns on	O-E2	Z		2 o Pub ection	<b>2</b>						
NONTISIDE AMENICA	AN I LDLI	VALIO	N OI ILA	JILING											4	16-3810	059				
Return Reference									E	Expla	anat	ion									
Members or stockholder classes and rights Part VI line 6	The or	rgan	izstion	is com	pose	d of r	nemb	oers a	and a	a gov	erni/	ng bo	oard	of di	recto	ors.					
Member election for additional members Part VI line 7a	Membe	ers (	elect th	e boar	d of	direct	ors.														
Governing body decisions Part VI line 7b	Decisio	ons	for the	organi	izatio	n is n	nade	throu	ıgh tl	he bo	oard	of di	recto	ors th	hat a	re ele	cted by	y the	memb	oers.	
Form 990 governing body review Part VI line 11	The fo	orm 9	990 is	orovide	ed to	the p	reside	ent ar	nd bo	oard	of d	irecto	ors fo	or re	view	and a	approv	al bef	ore it	is file	∍d.
Governing documents etc available to public Part VI line 19	Gover	ning	g docun	nents a	are m	ade a	availa	ble to	o pub	olic a	ind ir	nteres	sted	parti	ies tl	hrough	n writte	en red	quest.		
Explanation of other changes in net assets or fund balances Part XI line 9												mula		depre	eciat	ion an			cash O (For		