#### Forms 990 / 990-EZ Return Summary

For calendar year 2014, or tax year beginning 07/01/1406/30/15 , and ending United Academics University of 46-3995696 Oregon 185,924 Net Asset / Fund Balance at Beginning of Year Revenue Contributions 1,164,221 Program service revenue Investment income Capital gain / loss Fundraising / Gaming: Gross revenue Direct expenses Net income 686 Other income 1,186,123 Total revenue **Expenses** Program services Management and general Fundraising 1,066,375 Total expenses 119,748 Excess / (deficit) Changes 305,672 Net Asset / Fund Balance at End of Year Reconciliation of Revenue Reconciliation of Expenses Total revenue per financial statements 1,186,123 Total expenses per financial statements 1,066,375 Donated services Unrealized gains Donated services Prior year adjustments Recoveries Losses Other Other Plus: Plus: Investment expenses Investment expenses Other Other 1,186,123 1,066,375 Total revenue per return Total expenses per return **Balance Sheet** Beginning **Ending Differences** Assets 185,924 305,672 Liabilities 119,748 305,672 Net assets Miscellaneous Information Amended return 02/15/16 Return / extended due date Failure to file penalty

8879-EC

#### IRS e-file Signature Authorization for an Exempt Organization

Department of the Treasury

7/01..., 2014, and ending.....  $6/30_{20}15$ For calendar year 2014, or fiscal year beginning ......

OMB No. 1545-1878

Internal Revenue Service Name of exempt organization

u Do not send to the IRS. Keep for your records. u Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.

Employer identification number United Academics University of Oregon 46-3995696

Name and title of officer Bill Harbaugh

Treasurer

#### Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a	Form 990 check here Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b _	1,186,123
2a	Form 990-EZ check here ▶	2b _	
За	Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	3b _	
4a	Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b _	
5a	Form 8868 check here b L b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b _	

#### Part II **Declaration and Signature Authorization of Officer**

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2014 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

#### Officer's PIN: check one box only

X lauthorize Jones & Roth, P.C.	to enter my Pin	43211 as my signature
ERO firm name	·	Enter five numbers, but do not enter all zeros
on the organization's tax year 2014 electronically filed return. If I have indicated within this being filed with a state agency(ies) regulating charities as part of the IRS Fed/State progra ERO to enter my PIN on the return's disclosure consent screen.		•

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2014 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature

#### Part III Certification and Authentication

**ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2014 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

ERO Must Retain This Form—See Instructions

Do Not Submit This Form To the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2014)

Form **990** 

Department of the Treasury Internal Revenue Service

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

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

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

u Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047
2014
Open to Public

Open to Public Inspection

<u>A</u>	For the 2014 of	alendar year, or tax year beginning $0^{\circ}//01/14^{\circ}$ , and ending $06/30/1$	5	=	
В	Check if applicable:	c Name of organization United Academics University of		D Employer	identification number
Ц	Address change	Oregon		1 4 6 3	005606
	Name change	Doing business as  Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	46-3	995696
	Initial return	872 E 13th Ave	rtoon, oako		636-4714
П	Final return/	City or town, state or province, country, and ZIP or foreign postal code			
H	terminated	Eugene OR 97401		<b>G</b> Gross reco	eipts \$ 1,186,123
닏	Amended return	F Name and address of principal officer:	11/ > la Alaia a an		ubordinates? Yes X No
	Application pending	Bill Harbaugh	H(a) Is this a gr	oup return for s	
		872 E 13th Ave	H(b) Are all sul	bordinates incl	uded? Yes No
		Eugene OR 97401	If "No,	" attach a list.	(see instructions)
<u> 1</u>	Tax-exempt status:		1		
J	Website: U W	ww.uauoregon.org/	H(c) Group exe	emption numbe	r <b>u</b>
K	Form of organization:	X Corporation Trust Association Other <b>u</b> L Ye	ear of formation: 2	013	M State of legal domicile: OR
F	Part I Su	ımmary			
		escribe the organization's mission or most significant activities:			
9	The	purpose of United Academics of the University of Or			
an	3209	, AFL-CIO is to negotiate for, represent, and suppo	rt the i	nterest	of
Governance	facu	lty in the bargaining unit.			
é	2 Check th	is box ${f u}$ if the organization discontinued its operations or disposed of more than 25°	% of its net as	sets.	
∞	3 Number	of voting members of the governing body (Part VI, line 1a)			11
es	4 Number	of independent voting members of the governing body (Part VI, line 1b)		4	
Activities	5 Total nur	nber of individuals employed in calendar year 2014 (Part V, line 2a)		. 5	3
Act	6 Total nur	nber of volunteers (estimate if necessary)		. 6	75
	7a Total unr	elated business revenue from Part VIII, column (C), line 12		7a	0
	<b>b</b> Net unre	ated business taxable income from Form 990-T, line 34		7b	0
	<b>0</b> O	Construction (Doct VIIII From Alex	Prior Ye		Current Year
e	8 Contribut	ions and grants (Part VIII, line 1h)	/ /	6,822	<u>1,164,221</u> 0
Revenue	9 Program	service revenue (Part VIII, line 2g)		82	
Ŗ	10 Investme	nt income (Part VIII, column (A), lines 3, 4, and 7d)			216
		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		6,629	21,686
		enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	/8	3,533	1,186,123
		nd similar amounts paid (Part IX, column (A), lines 1–3)			0
		paid to or for members (Part IX, column (A), line 4)		0 022	
es	15 Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5–10)	5	8,932	169,954
ens	16a Professio	nal fundraising fees (Part IX, column (A), line 11e)			0
Expenses	b Total fun	draising expenses (Part IX, column (D), line 25) <b>u</b> 0	E 2	0 677	906 121
_	17 Other ex	penses (Part IX, column (A), lines 11a–11d, 11f–24e)		8,677 7,609	896,421 1 066 375
		enses. Add lines 13–17 (must equal Part IX, column (A), line 25)		5,924	<u>1,066,375</u> 119,748
		less expenses. Subtract line 18 from line 12	Beginning of Cu		End of Year
Net Assets or	20 Total ass	ets (Part X, line 16)		5,924	305,672
Ass	21 Total liab	ilities (Part X, line 26)		0	0
Set .	22 Net asse	ts or fund balances. Subtract line 21 from line 20	18	5,924	305,672
		gnature Block			,
$\overline{}$		perjury, I declare that I have examined this return, including accompanying schedules and statemer	nts, and to the be	est of my kn	owledge and belief, it is
tr	rue, correct, and c	omplete. Declaration of preparer (other than officer) is based on all information of which preparer h	as any knowled	ge.	
Sig	gn 🖊 🛚 🕏	signature of officer		Date	
	ere 📗	Bill Harbaugh Treasu	ırer		
		ype or print name and title			
	Print/Type	e preparer's name Preparer's signature	Date	Check	if PTIN
Pai	id <sub>Fritz</sub>	S. Duncan		self-em	ployed P00036435
Pre	eparer Firm's na	Tarrage C Dattle D C		Firm's EIN }	93-0819646
Us	e Only	PO Box 10086	<u> </u>		
	Firm's ad	- D 07440		Phone no.	541-687-2320
Ma		ss this return with the preparer shown above? (see instructions)			X Yes No

Pa	art III Statement of Program Service Accomplishments	X
1	Check if Schedule O contains a response or note to any line in this Part III	<u>A</u>
•	The purpose of United Academics of the University of Oregon	. AAUP-AFT Local
	3209, AFL-CIO is to negotiate for, represent, and support t	
	faculty in the bargaining unit.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	<u>_</u>
	services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4		
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	others,
	the total expenses, and revenue, if any, for each program service reported.	
4-	- /Code / /Timesee ft including wents of ft / /Dece	¢
	a (Code: ) (Expenses \$ including grants of \$ ) (Reven The purpose of United Academics of the University of Oregon	
	3209, AFL-CIO is to negotiate for, represent, and support t	
	faculty in the bargaining unit. We collectively bargain wi	
	University of Oregon which occurs every three years. Barga	
	by a panel of university faculty and University of Oregon in	
	Preparing and engaging in collective bargaining constitutes	
	50% of the union's activity. Enforcement of the collective	
	agreement is an ongoing process which takes up 35% of union	
i	including the elected group of faculty members who serve on	the Executive
	Council and meet monthly at a minimum. (continued on Schedu	
С	Other activities include working to improve education at th	e University of
4b	o (Code: ) (Expenses \$ including grants of \$ ) (Reven	ue \$)
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	······································	
4c	c (Code: ) (Expenses \$ including grants of \$ ) (Reven	uo ¢
		ue op)
	· · · · · · · · · · · · · · · · · · ·	)
		ue \$
4d	Other program services (Describe in Schedule O.)	ue \$
4d	1 Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$	)

			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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
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		X
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	X	
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			3.7
_	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	l _		3.7
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			v
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	<del>"</del>		$\Lambda$
10	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		25
• •	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
-	complete Schodule D. Bort VI	11a		Х
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			3.7
4-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	4-7		v
10	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	40		v
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18		X
פו		19		X
20a		20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
-				

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			l
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			l
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			l
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	1		,,
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V No **1a** Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable ..... 0 b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 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 **b** If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? Χ b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial Χ account)? 4a **b** If "Yes," enter the name of the foreign country: **u** See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Χ Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? **c** If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 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? Χ b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 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 Χ If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was Χ required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? b Section 501(c)(7) organizations. Enter: 10 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 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders а Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year \_\_\_\_\_\_\_\_12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand Χ Did the organization receive any payments for indoor tanning services during the tax year? 14h If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O ......

Form 990 (2014) United Academics University of 46-3995696 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year 11 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. Enter the number of voting members included in line 1a, above, who are independent ..... 11 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? Χ 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? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 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? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? 8b 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 ...... Χ Section 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? 10a Χ 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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Χ 15a Χ Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Χ 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed **u** None Section 6104 requires an organization to make its Forms 1023 (or 1024 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. X Own website X Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records:  ${f u}$ Kristy Hammond 872 E 13th Ave

Form **990** (2014)

OR 97401

Eugene

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Form 990 (2014)	linited.	Academics	llniver	^Q1 FV	$\cap$ t

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4	n	_	٠,	ч	ч	2	n	ч	n	

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

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

8.00

(A) Name and Title	(B) Average hours per week (list any	bo	x, unle	Pos check ess pe	more rson i	than o	an ee)	(D)  Reportable compensation from the	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations	
(1) Michael Dreiling											
President	20.00	X		X				0	0	0	
(2) Cristina Calhoor		^						0	0	0	
(-) 01 12 01110 00111001	8.00										
Executive VP	0.00	Х		Х				0	0	0	
(3) Gretchen Soderly											
	8.00										
Secretary (4)William Harbaugh	0.00	X		X				0	0	0	
(4) WIIIIaiii Harbaugi	8.00										
Treasurer	0.00	X		Х				0	0	0	
(5) Karen McPherson											
	8.00										
Member	0.00	X						0	0	0	
(6) Michael Urbancio											
Member	8.00	X						0	0	0	
(7) Mike Strain	0.00	┢						U	0	0	
(i) Hine Belain	8.00										
Member	0.00	X						0	0	0	
(8) Daniel Hosang											
	8.00								_		
Member	0.00	X						0	0	0	
(9) Heather Quarles	8.00										
Member	0.00	X						0	0	0	
(10) Chris Sinclair	0.00	1									
· ,	8.00										
Member	0.00	Х						0	0	0	
(11) Joe Lowndes											

Member

0

(A) Name and title	(B) Average hours per week (list any	bo	x, unle	ess pe	ition more rson i	than c s both or/trusto	an	(D) Reportable compensation from the compensation	Reportable Reportable Estima compensation compensation from amour from related other						
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-WISC)		organizati and rela organizati	tion ted			
(12) David Cecil  Executive Director	40.00			Х				78,667	0			9,7	710		
(13)															
(14)															
(15)															
(16)															
(17)															
(18)															
(19)															
1b Sub-total							u u	78,667				9,7	710		
d Total (add lines 1b and 1c)  Total number of individuals (in reportable compensation from	cluding but not li	mite	d to				u	78,667 re) who received more than	\$100,000 of			9,7	710		
3 Did the organization list any for employee on line 1a? If "Yes,"	ormer officer, dire	ector	, or		,	,		loyee, or highest compensa			3	Yes	No X		
4 For any individual listed on lin organization and related organ individual	nizations greater	than	\$15 	0,00	0? If	f "Ye	s," (	on and other compensation complete Schedule J for su	from the ch		4		X		
5 Did any person listed on line for services rendered to the or Section B. Independent Contractor	rganization? If "Y								r Individual		5		X		
Complete this table for your fir compensation from the organi.	ve highest comp							dar year ending with or with		ear.		(C)			
Name and	bùsiness address							Descrip	tion of services		Con	npeńsatio	<u>nc</u>		
2. Total number of industrial	contractors (**)	al:	h::1	ne!	line!!	- بام	- حاله	and listed about Visite							
Total number of independent received more than \$100,000								se listed above) wno	0		Form	990	(2014)		

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

Pa	rt V		<b>nent of Reve</b> if Schedule (		tains a	response o	or note to any line	in this Part VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated car	mpaigns	1a						
Program Service Revenue Contributions, Gifts, Grants Program Service Revenue	b	Membership o		1b	1,	162,898				
s, C	С	Fundraising e		1c						
afta	d	Related organ		1d						
s, c	е	Government grants		1e						
ion	f	All other contribution								
智		and similar amounts	not included above	1f		1,323				
a i	g	Noncash contribution	ns included in lines 1a	n-1f:	\$					
<u>ම ව</u>	h	Total. Add line	es 1a–1f			u	1,164,221			
ıne						Busn. Code				
šver	2a									
R	b									
vice	С									
Ser	d									
am	е									
ogra	f		ram service reve							
<u>~</u>	g	Total. Add line	es 2a–2f			u				
	3	Investment ind	come (including	divider	nds, intere	est,				
		and other sim	ilar amounts)			u	216			216
	4		nvestment of tax							
	5	Royalties				u				
			(i) Real		(ii)	Personal				
	6a	Gross rents	21,	,686						
	b	Less: rental exps.								
	С	Rental inc. or (loss)	21	,686						
	d	Net rental inco	ome or (loss)			u	21,686	21,686		
	7a	Gross amount from	(i) Securities			) Other				
		sales of assets other than inventory	,							
	b	Less: cost or other								
		basis & sales exps.								
	С	Gain or (loss)								
	d		oss)			u				
a)	8a		om fundraising eve							
Ĭ		(not including \$								
eve		of contributions i	reported on line 1c							
Α.		See Part IV, line	18	а						
Other Revenue	b		xpenses							
0			r (loss) from fund		events .	u				
	9a	Gross income fr	om gaming activitie	es.						
		See Part IV, line	19	а						
	b		xpenses							
			r (loss) from gan		tivities	u				
	10a	Gross sales of	f inventory, less							
		returns and al	llowances	а						
	b	Less: cost of		p						
			(loss) from sale	es of in	ventory	u				
			cellaneous Revenue			Busn. Code				
	11a									
	b									
	С									
	d		nue							
	е		es 11a–11d			u				
	12		See instruction				1 186 123	21 686	0	216

#### Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (B) Program service (C) Management and (D) Fundraising Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 ..... Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees ..... 94,305 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages ..... 46,228 Pension plan accruals and contributions (include 5,755 section 401(k) and 403(b) employer contributions) Other employee benefits ..... 12,549 9 Payroll taxes 11,117 Fees for services (non-employees): a Management ..... 26,342 **b** Legal ..... 9,150 c Accounting Professional fundraising services. See Part IV, line 17 Investment management fees ..... **g** Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 2,110 12 Advertising and promotion ..... 3,861 19,222 Office expenses ..... 13 Information technology ..... 14 Royalties 15 13,200 16 Occupancy Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 38,671 19 20 Interest Payments to affiliates ..... 21 Depreciation, depletion, and amortization 22 961 23 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.) Representation 776,843 Cleaning 2,725 2,059 Charitable contributions Taxes & licenses 900 d e All other expenses 377 1,066,375 0 0 0 25 Total functional expenses. Add lines 1 through 24e ... 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 **u** | if following SOP 98-2 (ASC 958-720).

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X ...... (A) (B) Beginning of year End of year 23,137 4,412 Cash—non-interest bearing 2 Savings and temporary cash investments ...... 177,783 278,430 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 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 10a b Less: accumulated depreciation 10b 10c Investments—publicly traded securities 11 11 12 Investments—other securities. See Part IV, line 11 12 13 Investments—program-related. See Part IV, line 11 13 14 Intangible assets 14 3,729 15 Other assets. See Part IV, line 11 15 4,105 Total assets. Add lines 1 through 15 (must equal line 34) ..... 185,924 305,672 16 16 Accounts payable and accrued expenses 17 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties ..... 23 24 Unsecured notes and loans payable to unrelated third parties ..... 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 0 0 Total liabilities. Add lines 17 through 25 ... 26 Organizations that follow SFAS 117 (ASC 958), check here  $\mathbf{u}$  X and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 185,924 304,349 27 27 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here u and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 185,924 305,672 Total liabilities and net assets/fund balances ..... 185,924 305,672

Form **990** (2014)

	art XI Reconciliation of Net Assets					gc 12
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,	,18	6,1	123
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	, 06	6,3	375
3	Revenue less expenses. Subtract line 2 from line 1	3		11	9,	748
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		18	35,9	924
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		30	)5,6	<u>672</u>
Pa	art XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>			
			_		Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L <i>i</i>	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		∟	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	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?		🚅	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in					
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in					l
	the Single Audit Act and OMB Circular A-133?		Li	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					1
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		<u></u>	3b		<u> </u>

Form **990** (2014)

#### SCHEDULE C (Form 990 or 990-EZ)

#### Political Campaign and Lobbying Activities

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

 ${f u}$  Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

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

If the organization answered "Yes," to 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

• 5	Section 501(c)(4), (5), or (6) organizations: Complete Part III.				
Name	e of organization United Academics Uni	iversity of		Employer ident	ification number
	Oregon			46-39956	
Pai	t I-A Complete if the organization is exem	pt under section 501(c)	or is a section	on 527 organization	on.
1	Provide a description of the organization's direct and indire	ct political campaign activities	in Part IV.		
2	Political expenditures				
3	Volunteer hours				
_					
-	t I-B Complete if the organization is exem	•			
1	Enter the amount of any excise tax incurred by the organiz	ation under section 4955		u\$	
2	Enter the amount of any excise tax incurred by organization	n managers under section 495	5	u\$	
3	If the organization incurred a section 4955 tax, did it file Fo				
	Was a correction made?  If "Yes," describe in Part IV.				Yes No
	t I-C Complete if the organization is exem	ent under section 501(c	) excent sect	ion 501(c)(3)	
1	Enter the amount directly expended by the filing organization			1011 001(0)(0):	
•	activities	•		11.\$	
2	Enter the amount of the filing organization's funds contribute			<b>a v</b>	
	527 exempt function activities	•		u\$	
3	Total exempt function expenditures. Add lines 1 and 2. Ent				
	line 17b		,	<b>u</b> \$	
4	Did the filing organization file Form 1120-POL for this year	?			Yes No
5	Enter the names, addresses and employer identification nu	mber (EIN) of all section 527	political organization	ons to which the filing	
	organization made payments. For each organization listed,				
	the amount of political contributions received that were pro	mptly and directly delivered to	a separate politic	al organization, such	
	as a separate segregated fund or a political action committee	ee (PAC). If additional space i	s needed, provide	information in Part IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and promptly and directly
				funds. If none, enter -0	delivered to a separate
					political organization. If
					none, enter -0
(1)					
(a)					
(2)					
(2)					
(3)					
(4)					
<del>"</del> )					
(5)					
(-)					
(6)					
. ,					

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

Schedule C (Form 990 or 990-EZ) 2014

	edule C (Form 990 or 990-EZ) 2014 United					5-3995696			Page 2
Pa	art II-A Complete if the organization 501(h)).	ation is exemp	t under section	501(c)(3) an	d filed F	orm 5768 (ele	ection	under	
A	Check u if the filing organization	n belongs to an	affiliated group (a	and list in Pa	rt IV eac	h affiliated gro	up me	mber's	
	name, address, EIN, e	•	<b>O</b> , ,			_			
В	Check <b>u</b> if the filing organization	•			,				
	Limits on Lobi					a) Filing		<b>b)</b> Affiliated	
	(The term "expenditures" m				organiz	ation's totals	(	group totals	
	a Total lobbying expenditures to influence pub								
	<b>b</b> Total lobbying expenditures to influence a le								
	c Total lobbying expenditures (add lines 1a ar	nd 1b)							
	d Other exempt purpose expenditures								
(	e Total exempt purpose expenditures (add line	es 1c and 1d)							
	f Lobbying nontaxable amount. Enter the amo columns.	ount from the follow	ring table in both						
	If the amount on line 1e, column (a) or (b) is:	The lobbying nor	ntaxable amount is:						
	Not over \$500,000	20% of the amoun	nt on line 1e.						
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15%	% of the excess over \$5	00,000.					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 109	% 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 \$1,5	500,000.					
	Over \$17,000,000	\$1,000,000.							
9	g Grassroots nontaxable amount (enter 25% of	of line 1f)							
	h Subtract line 1g from line 1a. If zero or less,								
	i Subtract line 1f from line 1c. If zero or less,	enter -0							
	j If there is an amount other than zero on eith	er line 1h or line 1i	, did the organization	file Form 4720			_	_	_
	reporting section 4911 tax for this year?							Yes	No
		a section 501(h) e the separate i	nstructions for lin	nave to comp es 2a throug	lete all of h 2f.)	f the five colun	nns be	low.	
	Lob	bying Expenditu	ures During 4-Yea	r Averaging	Period				
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2011	<b>(b)</b> 2012	(c) 201	3	<b>(d)</b> 2014		(e) Tota	ıl
	a Lobbying nontaxable amount								
ļ	b Lobbying ceiling amount (150% of line 2a, column(e))								
,	c Total lobbying expenditures								
	d Grassroots nontaxable amount								
•	e Grassroots ceiling amount (150% of line 2d, column (e))								

Schedule C (Form 990 or 990-EZ) 2014

f Grassroots lobbying expenditures

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Forn	n 5768			
- I IIV	• • • • • • • • • • • • • • • • • • • •	(á	(a)		(b)	(b)	
	s," response to lines 1a through 1i below, provide in Part IV a detailed the lobbying activity.	Yes	No		Amo	unt	
1 During th	e year, did the filing organization attempt to influence foreign, national, state or local						
legislatio	n, including any attempt to influence public opinion on a legislative matter or						
referend	m, through the use of:						
a Voluntee							
<b>b</b> Paid stat	f or management (include compensation in expenses reported on lines 1c through 1i)?						
	dvertisements?						
d Mailings	to members, legislators, or the public?			<del></del>			
e Publication	ons, or published or broadcast statements?			<u> </u>			
T Grants to	other organizations for lobbying purposes?  ntact with legislators, their staffs, government officials, or a legislative body?						
b Polling	lemonstrations, seminars, conventions, speeches, lectures, or any similar means?						
i Other ad							
	tivities? d lines 1c through 1i						
2a Did the a	ctivities in line 1 cause the organization to be not described in section 501(c)(3)?						
	enter the amount of any tax incurred under section 4912						
	enter the amount of any tax incurred by organization managers under section 4912						
	g organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Part III-A	Complete if the organization is exempt under section 501(c)(4), section 501(c)		or s	ection			
	501(c)(6).						
						Yes	No
1 Were su	ostantially all (90% or more) dues received nondeductible by members?				1		X
	rganization make only in-house lobbying expenditures of \$2,000 or less?				2	X	
	rganization agree to carry over lobbying and political expenditures from the prior year?				3		X
Part III-B	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if sides (c) BOTH Bort III A lines 4 and 2 are encurred "No."				lina	2 :-	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."	טא (ט	) Pai	ι III-Α,	iiiie .	J, IS	
1 Dues, as	sessments and similar amounts from members		1				
	62(e) nondeductible lobbying and political expenditures (do not include amounts of			1			
political	expenses for which the section 527(f) tax was paid).						
a Current			2a	<u> </u>			
	r from last year		2b				
c Total			2c	<b>—</b>			
	e amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
	were sent and the amount on line 2c exceeds the amount on line 3, what portion of the						
	oes the organization agree to carryover to the reasonable estimate of nondeductible lobbying			1			
•	cal expenditure next year? amount of lobbying and political expenditures (see instructions)		5				
5 Taxable Part IV	Supplemental Information		<u> </u>	<u> </u>			
	scriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part	II-Δ lin	nes 1 s				
	ons); and Part II-B, line 1. Also, complete this part for any additional information.	II-A, III	103 1 6	al IG			
2 (300 1113114011	only, and rait if b, line 1. 7100, complete this part for any additional information.						

Schedule C (For	m 990 or 990-EZ) 2014	United	Academics	University o	of 46-3995696	Page <b>4</b>
Part IV	Supplemental	Information	(continued)	University o		

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Open to Public Inspection

	of the organization		Employer	identification nu	mber	
	nited Academics University of					
	regon			<u>995696</u>		
Pa	rt I Organizations Maintaining Donor Advised Fu Complete if the organization answered "Yes" to F	nds or Other Similar Funds or A	Account	ts.		
	Complete if the organization answered Tes to F	(a) Donor advised funds		h) Funda and othe	r accounta	
4	Total number at and of year	`,	1)	b) Funds and othe	accounts	
1	Total number at end of year Aggregate value of contributions to (during year)					
2						
4	Aggregate value of grants from (during year)  Aggregate value at end of year					
5	Aggregate value at end or year					
Ĭ	funds are the organization's property, subject to the organization's exc			Г	Yes	No
6	Did the organization inform all grantees, donors, and donor advisors in			····· L		
	only for charitable purposes and not for the benefit of the donor or dor				_	
	conferring impermissible private benefit?				Yes	No
Pa	rt II Conservation Easements.					
	Complete if the organization answered "Yes" to F	Form 990, Part IV, line 7.				
1	Purpose(s) of conservation easements held by the organization (check	k all that apply).				
	Preservation of land for public use (e.g., recreation or education)	Preservation of a historically impo	ortant land	d area		
	Protection of natural habitat	Preservation of a certified historic	structure	<b>Э</b>		
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualified conse	ervation contribution in the form of a conse	rvation			
	easement on the last day of the tax year.		_	Held at the En	nd of the	Tax Year
а						
b	Total acreage restricted by conservation easements		2b			
C	Number of conservation easements on a certified historic structure inc		2c			
d	Number of conservation easements included in (c) acquired after 8/17/	706, and not on a	2d			
3	historic structure listed in the National Register	tinguished or terminated by the organizat		the .		
3	tax year ${f u}$	dinguished, or terminated by the organization	ion danng	j uie		
4	Number of states where property subject to conservation easement is	located 11				
5	Does the organization have a written policy regarding the periodic mo					
	violations, and enforcement of the conservation easements it holds?				Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enfor					
	u					
7	Amount of expenses incurred in monitoring, inspecting, and enforcing	conservation easements during the year				
	u\$					
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(h)(4)(B)(i)	)	_	_	
				L	Yes	No
9	In Part XIII, describe how the organization reports conservation easem	•				
	balance sheet, and include, if applicable, the text of the footnote to the	e organization's financial statements that d	escribes t	the		
Do	organization's accounting for conservation easements.  rt III Organizations Maintaining Collections of Art,	Historical Transuras or Other	Similar	Accete		
Га	rt III Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to F		Sillillai	ASSEIS.		
12	If the organization elected, as permitted under SFAS 116 (ASC 958), I		nalance s	hoot		
ıu	works of art, historical treasures, or other similar assets held for public					
	public service, provide, in Part XIII, the text of the footnote to its finance					
b	If the organization elected, as permitted under SFAS 116 (ASC 958), t		nce sheet	t		
	works of art, historical treasures, or other similar assets held for public					
	public service, provide the following amounts relating to these items:	•				
	(i) Revenues included in Form 990, Part VIII, line 1		u	ι \$		
	(ii) Assets in absolute in Esses 000 Deat V		u	ι \$		
2	If the organization received or held works of art, historical treasures, o	r other similar assets for financial gain, pro	vide the			
	following amounts required to be reported under SFAS 116 (ASC 958)					
а	Revenue included in Form 990, Part VIII, line 1		u	ι \$		
b	Assets included in Form 990, Part X		u	ι \$		

2222								
Caba	dule D (Form 990) 2014 United Ac	radomiaa II	oiworait;	, of	16_2001	5606		Dogo <b>2</b>
	irt III Organizations Maintaining						(continue	Page <b>2</b>
3	Using the organization's acquisition, accessic collection items (check all that apply):						(COITHI IGE	<u>u)                                    </u>
а	Public exhibition	d $\square$	Loan or exchang	ne programs				
b	Scholarly research	e H						
C	Preservation for future generations	• 🗆	Ou ici					
4	Provide a description of the organization's co	allections and evolair	how they further	r the organization	's evemnt nurn	ose in Part		
7	XIII.	nicctions and explain	Thow they faithe	i ilic Organization	13 exempt purp	osc iii i ait		
5	During the year, did the organization solicit of	or receive donations	of art, historical t	reasures, or othe	r similar			
-	assets to be sold to raise funds rather than t						Yes	No
Pa	ert IV Escrow and Custodial Are		,					
	Complete if the organization 990, Part X, line 21.	answered "Yes"	' to Form 990	, Part IV, line s	9, or reported	d an amount o	n Form	
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for contribut	ions or other asse	ets not			
	included on Form 990, Part X?		•				Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing table:					
							Amount	
С	Beginning balance					1c		
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
	Did the organization include an amount on F							No.
	If "Yes," explain the arrangement in Part XIII.	Check here if the e	xplanation has b	een provided in P	art XIII			
Pa	ert V Endowment Funds.		. ta	Dant IV/ Ena	40			
	Complete if the organization					N There are the all	(-) [	
4-	Parisain at some halance	(a) Current year	(b) Prior year	(c) Two ye	ears back (c	1) Three years back	(e) Four yea	ars dack
	Contributions  Net investment earnings, gains, and							
٠	1							
Ч	One of the second secon							
	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
q	End of year balance							
2	Provide the estimated percentage of the curr		e (line 1g, colum	n (a)) held as:	•			
а	Board designated or quasi-endowment <b>u</b>	%	, -					
b	Permanent endowment <b>u</b> %							
С	Temporarily restricted endowment $\mathbf{u}$	%						
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%.						
3a	Are there endowment funds not in the posse	ssion of the organization	ation that are hel	d and administere	ed for the		_	
	organization by:						Ye	s No
	(i) unrelated organizations						3a(i)	
	(ii) related organizations						3a(ii)	
b	If "Yes" to 3a(ii), are the related organization	s listed as required of	on Schedule R?				3b	
4	Describe in Part XIII the intended uses of the		owment funds.					
Pa	Land, Buildings, and Equ	-	to Form 000	Dort IV/ line	140 Cos F	000 Dart V	line 40	
	Complete if the organization				1			
	Description of property	(a) Cost or other (investment)	uasis (a)	Cost or other basis (other)	(c) Accum		(d) Book valu	<del>C</del>
12	Land	(		V7	305.000			
ıa	Lund							

**b** Buildings **c** Leasehold improvements

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

**e** Other .....

Part VII	Investments—Other Securities.  Complete if the organization answered "Yes" to	Form 900 Part IV line	11h See Form 990 Part X line 12
	(a) Description of security or category	(b) Book value	(c) Method of valuation:
	(including name of security)	(,,	Cost or end-of-year market value
(1) Financial	derivatives		
(2) Closely-he	eld equity interests		
(2) Other			
(B)			
(C)			
(D)			
(H)			
	n (b) must equal Form 990, Part X, col. (B) line 12.) <b>u</b>		
Part VIII	Investments—Program Related.	Farms 000 Dart IV line	44. Can Farma 000 Bart V line 40
	Complete if the organization answered "Yes" to		
	(a) Description of investment	(b) Book value	(c) Method of valuation:  Cost or end-of-year market value
			Cost of Gha-or-year market value
(1)			
(2)			
(3)			
(5)			
(6)			
(7)			
(8)			
(9)			
	n (b) must equal Form 990, Part X, col. (B) line 13.) <b>u</b>		
Part IX	Other Assets.		
	Complete if the organization answered "Yes" to	Form 990, Part IV, line	11d. See Form 990, Part X, line 15.
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	n (b) must equal Form 990, Part X, col. (B) line 15.)		
Part X	Other Liabilities.		u
I alt A	Complete if the organization answered "Yes" to	Form 990 Part IV line	11e or 11f See Form 990 Part X
	line 25.	Tomi 550, Fait IV, IIIo	The of Thi. God Form 550, Full X,
1.	(a) Description of liability	(b) Book value	
(1) Federal	income taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	n (b) must equal Form 990, Part X, col. (B) line 25.) ${f u}$		
2 Liability for	uncertain tay positions. In Part XIII, provide the text of the fo	octnote to the organization's f	inancial statements that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII .

Sche	edule D (Form 990) 2014 United Academics Univers	-	-3995696	Page 4
Pa	Reconciliation of Revenue per Audited Financial S Complete if the organization answered "Yes" to Form		nue per Return.	
1	Total revenue, gains, and other support per audited financial statements		1	1,186,123
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		·····	1,100,123
a	Net unrealized gains (losses) on investments	2a		
b				
c	Recoveries of prior year grants	2c		
d	- · · · · · · · · · · · · · · · · · · ·			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			1,186,123
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			, ,
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b				
С	Add lines 4a and 4b		4c	
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	2.)	5	1,186,123
Pa	art XII Reconciliation of Expenses per Audited Financial		enses per Return.	
	Complete if the organization answered "Yes" to Form	990, Part IV, line 12a.	1.1	1 066 285
1			1	1,066,375
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities			
b	* * * * * * * * * * * * * * * * * * * *			
C	Other losses			
a	Other (Describe in Part XIII.)		20	
e 2	Add lines 2a through 2d			1,066,375
3 4	Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1:			1,000,373
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
a b				
C	Add Page 4 and 4b		4c	
5	Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line			1,066,375
Pa	art XIII Supplemental Information.	- /		
DA 4			0-1	odulo D (Form 000) 0011
DAA			Sch	edule D (Form 990) 2014

Schedule D (Fo	orm 990) 2014	United	Academics	University	of	46-3995696	Page <b>5</b>
Part XIII	Supplementa	al Informa	tion (continued)				
•							
•							
•							

SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service u Attach to Form 990 or 990-EZ. u Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Name of the organization	United Academics University of	Employer identification number
	Oregon	46-3995696
Form 990,	Part I, Line 6	
Volunteers	s serve on committees that further the organi	zation's vision and
mission.		
Form 990,	Part III, Line 4a - First Accomplishment	
Oregon. V	Various faculty meetings throughout the year	to discuss how
education	can be bettered at the university account fo	or approximately 10%
of the un	ion activity. The remaining activity consist	s of our work to
align with	n other organizations to improve working cond	litions for all
working O	regonians.	
Form 990,	Part VI, Line 7a - Election of Members and T	Their Rights
The member	rs elect the officers of the Organization.	
Form 990,	Part VI, Line 11b - Organization's Process t	o Review Form 990
The Execut	tive Council will review and approve the 990	in their regular
session c	ouncil meetings. The review and approval wil	l be noted in the
council ag	genda and minutes. The 990 will be provided t	to the Executive
Council at	t least one week in advance of the meeting in	ntended for review and
approval.		
Form 990,	Part VI, Line 12c - Enforcement of Conflicts	3 Policy
Executive	Council members will be provided annually th	e Conflict of
Interest i	form and questionnaire, and asked to disclose	any matters that
miaht aive	e rise to conflicts under the policy. In addi	ition. Executive

DAA

Schedule O (Form 990 or 990-EZ) (2014)	Page 2
Name of the organization	Employer identification number
United Academics University of	46-3995696
Council members are under an ongoing obligation to discl	ose new interests
that may give rise to conflicts.	
Form 990, Part VI, Line 15a - Compensation Process for T	op Official
The union's hiring committee evaluated comparable comper	nsation schedules
for executive directors at similar faculty locals by con	ntacting executive
officers.	
Form 990, Part VI, Line 15b - Compensation Process for (	Officara
· · · · · · · · · · · · · · · · · · ·	
The union's hiring committee evaluated comparable comper	nsation schedules
for union staff at similar faculty locals by contacting	executive officers.
Form 990, Part VI, Line 19 - Governing Documents Disclos	sure Explanation
Documents are posted on the Organization's website.	
bocuments are posted on the organization's website.	
	Page 1 of 1

02222 United Academics University of 46-3995696 Federal Statements

FYE: 6/30/2015

# **Taxable Interest on Investments**

	Description	า					
			Amount	Unrelat Business		Acquired after 6/30/75	US Obs (\$ or %)
Bank ir	nterest						
		\$	216		14		
To	otal	\$	216				

02222 United Academics University of

46-3995696 F)/F 0/00/004

# **Federal Statements**

FYE: 6/30/2015

## Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	E:	Total Expenses		Program Service		Management & General		Fund Raising	
Payroll administration Other professional fees	\$	555 1,555	\$		\$	555 1,555	\$		
Total	\$	2,110	\$	0	\$	2,110	\$	0	

## Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses		Program Service		Management &General		Fund Raising	
Bargaining expenses Bank charges	\$	300 77	\$		\$	300 77	\$	
Total	\$	377	\$	0	\$	377	\$	0