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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 black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047 2008 Open to Public Inspection

<u>A</u>	For the 200)8 calendit	ar, or tax year beginning , and ending		
В	Check if applica		C Name of organization FEDERATION OF PUB EMPLOYEES, A DIV.	D Emple	oyer identification number
	Address chang	use IRS label or	OF NAT'L FED OF PUB & PRIV, AFL-CIO		
$\bar{\sqcap}$	Name change	print-or	Doing Business As	65-	-0489137
\equiv	_	type.	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Teleph	hone number
\exists	Initial return	See	1700 NW 66TH AVENUE ST-100		
	Termination	Specific Instruc-	City or town, state or country, and ZIP + 4	G Gross reco	eipts \$ 3,628,113
X,	Amended retur		PLANTATION FL 33313		
$\bar{\Box}$	Application per	ndina F Nam	e and address of principal officer	H(a) Is this	a group retum for
ш.				affiliat	
				H(b) Are al includ	
		_		If "No	" attach a list (see instructions)
1	Tax-exempt	t status X	501(c) (5) ◄ (insert no) 4947(a)(1) or 527		
<u>J</u>	Website	N/A		H(c) Group	exemption number
<u>K</u>	Type of organi	ızatıon X Co	poration Trust Association Other L Year of formation		M State of legal domicite
<u>. P</u>	art I	Summa	<u>"y </u>		
	1 Brie	fly describe t	ne organization's mission or most significant activities		
Ф	0	RGANIZE	AND REPRESENT WORKERS IN THE PUBLIC SECTOR		
3UC					
Ĭ					
Š	2 Che	ck this box	If the organization discontinued its operations or disposed of more than 25% of its assets		i
დ •ಶ	3 Nun	nber of voting	members of the governing body (Part VI, line 1a)	3	2
Se	4 Nun	nber of indep	endent voting members of the governing body (Part VI, line 1b)	4	2
Activities & Governance	5 Tota	al number of	employees (Part V, line 2a)	5	20
Act	L.		volunteers (estimate if necessary)	6	
	7a Tota	al gross unre	ated business revenue from Part VIII, line 12, column (C)	7a	
	b Net	unrelated bu	siness taxable income from Form 990-T, line 34	7b	0
			Prior Year		Current Year
91	1		d grants (Part VIII, line 1h) revenue (Part VIII, line 2q) 3,322	923	3,346,716
Revenue		=		, 923	42,027
Re	1			,883	239,370
	1	-	0.500		3,628,113
_	, , , , , , , , , , , , , , , , , , , 		add lines-8-through-11 (must equal Part VIII, column (A), line 12) 3,593	,,,,,,,,	3,020,113
	1 1		or for members (Paul IX, column (A), line 4)		
2			propensation) employee benefits (Part IX, column (A), lines 5–10)	.836	1,075,239
Jens 100	162 Pm	Besional fun	traising fees (Part/W column (A) line 11e)	7000	2/0.0/200
, a	h Tar	al fundraiging	traising fees (Part IX, column (A), line 11e) expenses (Part IX, column (D), line 25) Part IX, column (A), lines 11a-11d, 11f-24f) 2,053	1	Market Mark
Ø	17 Oth		(Part IX, column (A), lines 11a-11d, 11f-24f) 2,053		2,311,334
			Add lines 13-17 (must equal Part IX, column (A), line 25)		3,386,573
3	19 Rev	•		,546	241,540
D S	3	CHILD ICCO CA	Beginning of		End of Year
ANGREEF AUG	20 Tota	al assets (Pa	t X, line 16) 2,095	,517	2,388,488
\$	21 Tota	al liabilities (F		3,404	119,835
26	22 Net	assets or fur	d balances Subtract line 21 from line 20 2,027	,113	2,268,653
	art II	Signatu	re Block		
U	17		ties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to		
		and belief, i	is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer	arei nas an	iy knowledge
Sig	gn		V M II		
He	re	Signati	re of officer D D Do	Date	8/3/2010
		—	Daniel D. Reynolds, President		0/3/2010
		Type o	print name and title		I Demonstrate and a set a set
D~	id	Preparer's	Date Check if self-	r	Preparer's identifying number (see instructions)
Pa	_	signature	6/30/10 employe	<u>a ▶ L</u>	P00295123
	eparer's	Firm's name	Bellows Associates, P.A.	EIN	<u> </u>
US	e Only	if self-emplo	yed) 130 S University Dr Ste D	Phone	
		address, an	Plantation, FL 33324	no 🕨	954-838-7000
Ma	y the IRS d	liscuss this re	turn with the preparer shown above? (see instructions)		Yes No

Pa	rt III	State	ment of Proc	ıram Se	rvice Accom	plishments (s	see instru	ctions)			, ago .
1			ne organization's		,	100					
					WORKERS	IN THE P	JBLIC :	SECTOR			
	•	•									
		•		••							
2	Did the	organizat	ion undertake an	y significar	nt program servi	ces during the year	which were	not listed on		_	
	the pnor	Form 99	0 or 990-EZ?							Yes	X No
	If "Yes,"	descnbe	these new service	ces on Sch	nedule O						
3	Did the	organizat	ion cease conduc	cting, or ma	ake significant c	hanges in how it co	nducts, any	program			_
	services	?								Yes	X No
	If "Yes,"	describe	these changes of	n Schedul	le O.						
4	Describe	the exe	mpt purpose achi	ievements	for each of the	organization's three	largest prog	ram services by	expenses		
						947(a)(1) trusts are			nt of grants and		
	allocatio	ns to oth	ers, the total expe	enses, and	I revenue, if any	, for each program	service repo	rted.			
			<u>-</u>								
4a	(Code)(Expenses \$			including grants	of \$) (Revenue \$)
									•		
					•						
	•			•	•						
		•									
								•			
	· · ·		\/F								
4D	(Code.	-)(Expenses \$			including grants	or \$) (Revenue \$.		,
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						•					
							•		• •		
									••••	•	
4c	(Code.)(Expenses \$		_	including grants	of \$) (Revenue \$,
	(, (g granie	v	•	, (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,
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		••	••				•				••
4d	Other pr	ogram se	ervices. (Describe	ın Schedi	ule O.)				· · · · · · · · · · · · · · · · · · ·		
	(Expens				ncluding grants	of \$) (Revenue	\$)	
4e			ervice expenses				qual Part IX,	Line 25, column			

Form **990** (2008)

substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

	990 (2008) FEDERATION OF PUB EMPLOYEES, A DIV. 65-0489137		F	Page 3
<u> Pa</u>	art IV Checklist of Required Schedules			
1	Is the properties described in control FO4/oV2) or 4047/oV41 (other than a private foundation)? If "Vec "		Yes	No
•	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?	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? If "Yes," complete	-		
	Schedule C, Part II	4		1
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	Ī	X
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			Ì
	Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			į.
	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 hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	ļ	X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VIII, VIII, IX, or X as applicable	_11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return			<u></u>
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13_	<u> </u>	X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			.
4.5	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	45		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	15		^
10	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 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 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? 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 questions			
	24b–24d and complete Schedule K. If "No," go to question 25.	24a		X
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	Section 501(c)(3) and 501(c)(4) 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	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified		j	
00	person from a prior year? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			₩.
27	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or	1		

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

P	art IV Checklist of Required Schedules (continued)		<u>'</u>	aye 4
	•		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? 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		\mathbf{x}
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	_30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31	L	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 301.7701-37 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, IV, and V, line 1	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
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		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			

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<u> Pa</u>	irt V Statements Regarding Other IRS Filings and Tax Compliance					
	•		,		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of					1
	U.S. Information Returns. Enter -0- if not applicable	1a	20			1
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b			1	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and report	table				
	gaming (gambling) winnings to prize winners?	1 1	1	1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		00			
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	20			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns'	?		2b	X	├──
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see					
20	Instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	У				X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			_3a 3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other aut	horshi		SU		\vdash
- •a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	-				1
	account)?	Jai		4a		x
b	If "Yes," enter the name of the foreign country				; t'	
-	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bai	nk			12.	
	and Financial Accounts			,		1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	~ `	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	n?		5b		X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	•				
	Regarding Prohibited Tax Shelter Transaction?			5c		1
6a	Did the organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	or				
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).		Ì	***	مرجوب دور عراق	.; ·
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more that	in		¥41°		- L
	\$75?			7a		X
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		_X_
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		•	F :	
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal content of the organization of the property of the organization of the org	onal			ــــــــــــــــــــــــــــــــــــــ	أحسا
	benefit contract?			7e		<u>X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract	?		7f		<u>x</u>
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g_		<u>X</u>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	3				
	required?			7h		_X_
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sect			٠.`	v-!	1
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsor	nng			<u></u>	-
_	organization, have excess business holdings at any time during the year?			8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			- 4	ا ـ عدُ ـ	'
а	Did the organization make any taxable distributions under section 4966?		}	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:	ا ـهـ ا		*		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		İ	-	
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
	Section 501(c)(12) organizations. Enter Gross income from members or shareholders	11a				
a b	Gross income from other sources (Do not net amounts due or paid to other sources against	114			ł	
U	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 10			12a	Ì	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		, La	 	
<u> </u>		1 2 2				

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Pa	art VI Governance, Management, and Disclosure (Sections A, B, and C request information	about policies	not	
	required by the Internal Revenue Code.)			
Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, describe the			
	circumstances, processes, or changes in Schedule O See instructions			
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
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	+	X
3	Did the organization delegate control over management duties customanly performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	. 3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	∔—	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	+	X
6	Does the organization have members or stockholders?	6_	X	↓ —-
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	X	<u> </u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X	 -
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	-	12,	
	the year by the following.			- '
а	The governing body?	. <u>8a</u>	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	. <u>8b</u>	X	<u> </u>
9a	Does the organization have local chapters, branches, or affiliates?	<u>9a</u>	_	LX.
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		<u> </u>
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10		X
11	Is there any officer, director or 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	11		X
<u>Sec</u>	tion B. Policies			
		_	Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	nse to conflicts?	12b	X	<u>↓</u>
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			İ
	describe in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by	٠.	- L	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		3 4	
а	The organization's CEO, Executive Director, or top management official?	15a	X	<u> </u>
b	Other officers or key employees of the organization?	15b	J	X
	Describe the process in Schedule O (see instructions)		, ,	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		3	
	with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	•	٠,	
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard		1	
	the organization's exempt status with respect to such arrangements?	16b		1
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)	•		
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
-	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ► NATL FED OF PUB AND PRIV EMPLOYEES 1700 NW 66TH AVENUE, SU	ITE 100		
P	LANTATION FL 33313	954-79	97-7	575

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors; institutional trustees; officers, key employees; highest compensated employees, and former such persons

Check this box if the or			(0	;)		_	(D)	(E)	(F)	
Name and Title	Average hours per week			Officer	all ti	a Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization
		or director	1 trustee		/ee	mpensated		(and related organizations
DANIEL REYNO PRESIDENT	LDS			x				15,444	138,592	C
MARILYN SWAN SECR/TREAS				х				69,557	0	(
PATRICK LAMB SECR/TREAS	ERT			<u></u>			x	19,125	0	
								-		
·									, <u>-</u>	
-										· · · ·
-	<u> </u>	1			_					

DAA

Form **990** (2008)

_Pa	rt VII Section A	. Officers, Directors, Trus	tees	, Ke	y En	ıplo	yees	, an	d Highest Compensated E	mployees (continued)	
	(A)	(B)	 -		(0				(D)	(E)	(F)
	Name and title` `	1 /"c.age]	individual trustee or director	nstitutional trustee	Officer	Key employee	a Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
_											
											
_						ļ L					
1b	Total							<u> </u>	104,126		
2	Total number of indivorganization ▶ 1	viduals (including those in 1a	a) wh	о ге	ceivi	ed m	ore t	han	\$100,000 in reportable com	pensation from the	
3 4 5	employee on line 1a ² For any individual list the organization and individual Did any person listed	list any former officer, direct officer, direct officer, complete Schedul ted on line 1a, is the sum of related organizations greated on line 1a receive or accruit	le J f repo er tha e coa	for su ortab an \$1 mpe	uch i le co 150,6 nsati	ndivionpe 0007 ion f	idual ensat P If "Y	ion a 'es," any t	and other compensation froi complete Schedule J for su unrelated organization for		Yes No 3 X 4 X
Sec	services rendered to tion B. Independent	the organization? If "Yes," o	comp	olete	Sch-	edul	e J to	or su	ch person		5 X
1	Complete this table for compensation from the	or your five highest compen- he organization	sate	d ind	lepe	nder	it cor	itrac	tors that received more that	n \$100,000 of	
		(A) Name and business address							Descrip	(B) tion of services	(C) Compensation
									 		
_								_	·		
									 		
2	Total number of inde	pendent contractors (including	ng th	nose	ın 1) wh	o rec	eive	d more than \$100,000 in		

Pa	rt V	III Staten	nent of Rev	enue						
		,	_				(A) Total revenue	(B) Related or exempt function	(C) Unrelated business	(D) Revenue excluded from tax under sections
								revenue	revenue	512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated cam	paigns	1a						
gra	b	Membership du	Jes	1b						
aï,	С	Fundraising ev		1c						
قِعَ	d	Related organiz	zations	1d						
Sim's	е	Government grants (contributions)	1e	_					
흕	f	All other contributions								
들음		and similar amounts	not included above	1f						
ag	g	Noncash contribution	is included in lines 1	a-1f \$						
	h	Total. Add line	s 1a–1f			<u> </u>				
Jue .						Busn. Code				
Ş.	2a	INCOME-D	UES MEMBER				3,346,716	3,346,716		
2	b									
ξ	С									
Sei	d						<u> </u>			
ш	е									
Program Service Revenue	f	All other progra		enue						
<u> </u>	g	Total. Add line					3,346,716			
	3	Investment inco		divider	ids, interes	t, and				
		other similar an	•			•	42,027	42,027		
	4	Income from in	vestment of tax	x-exem	pt bond pro	ceeds 🕨				
	5	Royalties				•			. <u> </u>	
			(ı) Real		(II) P	ersonal				
	6a	Gross Rents			- 					l I
	b	Less rental exps			 					
	С	Rental inc or (loss)			1		-			ال ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ
	d 7a	Net rental incor Gross amount from [1	•		-	_	
		sales of assets	(i) Securiti	es	(II)	Other				
		other than inventory			ļ					
	ь	Less cost or other								1
		basis & sales exps			-					
	C	Gain or (loss)			.1		-			
	d	Net gain or (los	· ·		<u> </u>	•				
_	8a	Gross income fro	m fundraising ev	ents						
nu.		(not including \$,						,
9.0		of contributions re	~	•				İ		1
Ä		See Part IV, line		a						1
Other Revenue		Less: direct exp		b			-			ل
O		,		_	events	•				
	уа	Gross income from	- •]			İ		
	L	See Part IV, line		a b						
		Less, direct exp Net income or (_		•	-			
		Gross sales of			uviue2					
	ıva	returns and allo	=	a	.[
	h	Less cost of go		b						,
		Net income or (_			-	-	-	,
			ellaneous Revenu		<u>,</u>	Busn. Code				
	11a	IN-KIND RI	EVENUE				237,083	237,083		
	b	MISCELLANI					2,287	2,287		
	C	•			•			-,		
	d	All other revenu	Je							
	е	Total. Add lines	s 11a-11d				239,370			
	12	Total Revenue	. Add lines 1h,	2g, 3,	4, 5, 6d, 7d	l, 8c,				
		9c, 10c, and 11				▶	3,628,113	3,628,113	0	0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B) (C) and

	. All other organizations must		*		<u> </u>
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and			30 30001000	CAPELISES
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in		-		
_	the U.S See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
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 salanes and wages	614,138	614,138		
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	141,294	141,294		
9	Other employee benefits	270,544	270,544		
10	Payroll taxes	49,263	49,263		
11	Fees for services (non-employees)				
а	Management	435 430	425 422		
b	Legal	435,439	435,439		
С.	Accounting	7,398	7,398		
d	Lobbying Professional fundaments assume Con Red IV. Inc. 47.				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees Other				
9 12	Advertising and promotion	4,725	4,725		
13	Office expenses	129,002	129,002	· · · <u>-</u> -	<u> </u>
14	Information technology	22,685	22,685		
15	Royalties				
16	Occupancy	132,777	132,777		
17	Travel	2,982	2,982		
18	Payments of travel or entertainment expenses		,		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	94,419	94,419		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	6,022	6,022		
23	Insurance	8,345	8,345		
_					
24	Other expenses. Itemize expenses not				
	covered above. (Expenses grouped together				· ·
	and labeled miscellaneous may not exceed				
_	5% of total expenses shown on line 25 below) PER CAPITA - NATIONAL	778,923	778,923		
a b	IN KIND SALARIES	237,083	237,083		
C	AUTOMOBILE EXPENSE	102,104	102,104		
d	HOLIDAY	86,847	86,847	·	
e	PER CAPITA - OTHERS	69,230	69,230		
_	All other expenses	193,353	193,353		
25	Total functional expenses. Add lines 1 through 24f	3,386,573	3,386,573		
26	Joint Costs. Check here ▶ If following	, , , , , , ,	, , , , , , , , ,		
	SOP 98-2. Complete this line only if the				<u> </u>
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation				1

<u>_P</u>	<u>aπ /</u>	Balance Sheet				
				(A)		(B)
				Beginning of year	_	End of year
	1	Cash—non-interest bearing	}-	1,173,450		1,387,13
	2	Savings and temporary cash investments	-		2	
	3	Pledges and grants receivable, net	}-	000 460	3	000 071
	4	Accounts receivable, net		902,468	4	980,275
	5	Receivables from current and former officers, directors, trustees, key				
	1	employees, or other related parties Complete Part II of Schedule L	<u> </u>		5	
	6	Receivables from other disqualified persons (as defined under section				
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete		-		±
	İ	Part II of Schedule L			6	
ts	7	Notes and loans receivable, net	. L		7	
Assets	8	Inventories for sale or use	Ĺ	_	8	
Ř	9	Prepaid expenses and deferred charges	<u>L</u>	5,101	9	7,271
	10a	Land, buildings, and equipment cost basis 10a	75 <u>,</u> 438			
	b	Less accumulated depreciation. Complete				
		Part VI of Schedule D	61,633	14,498	10c	13,805
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		2,095,517	16	2,388,488
	17	Accounts payable and accrued expenses		62,051	17	119,835
	18	Grants payable			18	
	19	Deferred revenue		-	19	
	20	Tax-exempt bond liabilities	.		20	
Š	21	Escrow account liability. Complete Part IV of Schedule D	-		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key	-		21	
Ē	22					
<u>.e</u>		employees, highest compensated employees, and disqualified				
_	,,	persons Complete Part II of Schedule L	-	6,013	22	
	23	Secured mortgages and notes payable to unrelated third parties	-	0,013	23	
	24	Unsecured notes and loans payable	-	240	24	
	25	Other liabilities Complete Part X of Schedule D		340	25	110 021
	26	Total liabilities. Add lines 17 through 25		68,404	26	119,835
ces		Organizations that follow SFAS 117, check here 🕨 🗓 and	į			
Ĕ		complete lines 27 through 29, and lines 33 and 34.		0 000 110		0.000 0.00
Balan	27	Unrestricted net assets		2,027,113	_27	2,268,653
Ω	28	Temporarily restricted net assets			28	
Fund	29	Permanently restricted net assets	<u> </u>	- · · · · · · · · · · · · · · · · · · ·	29	
교		Organizations that do not follow SFAS 117, check here ▶				
ō		and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
se	31	Paid-ın or capıtal surplus, or land, building, or equipment fund		<u> </u>	_31	
As	32	Retained earnings, endowment, accumulated income, or other funds			32	
Net Assets	33	Total net assets or fund balances	L	2,027,113	33	2,268,653
Z	34	Total liabilities and net assets/fund balances		2,095,517	34	2,388,488
P	art)	(I Financial Statements and Reporting				
						Yes No
1	Ac	counting method used to prepare the Form 990 🔲 Cash 🕱 Accru	ual 🗍 Oth	er		
2a		ere the organization's financial statements compiled or reviewed by an indeper				2a X
t		ere the organization's financial statements audited by an independent accounta				2b X
		Yes" to lines 2a or 2b, does the organization have a committee that assumes i		oversight of		
		e audit, review, or compilation of its financial statements and selection of an in-		•		2c X
3:		a result of a federal award, was the organization required to undergo an audit	•			
-		Single Audit Act and OMB Circular A-133?	GGGRO GG GC()			3a X
ŀ		Yes," did the organization undergo the required audit or audits?				3b 2
	<u>, "</u>	100, and the organization undergo the required addit of addits?				

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047
2008
Open to Public

Inspection Name of the organization Employer identification number FEDERATION OF PUB EMPLOYEES, A DIV. OF NAT'L FED OF PUB & PRIV, AFL-CIO 65-0489137 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _ _ _ _ _ _ Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

_		N OF PUB EMPI				89137	Page 2
_Pa	rt III Organizations Maintaining	Collections of Art, I	Historical T	reasures	s, or Other S	<u>imilar Assets</u>	(continued)
3	Using the organization's accession and other items (check all that apply)	records, check any of the f	ollowing that ai	e a signific	ant use of its coll	lection	
а	Public exhibition	d Loan	or exchange p	rograms			
b	Scholarly research	e 📙 Other	·		_		
С	Preservation for future generations						
4	Provide a description of the organization's coll Part XIV	ections and explain how th	ey further the o	organizatioi	n's exempt purpo	se in	
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to	be maintained as part of th	e organization	s collection	1?		Yes No
Pa	rt IV Trust, Escrow and Custodi Part IV, line 9, or reported a				tion answere	d "Yes" to Fo	orm 990,
1a	Is the organization an agent, trustee, custodia	n or other intermediary for	contributions o	r other ass	ets not		
	included on Form 990, Part X?						∐ Yes ☐ No
b	If "Yes," explain the arrangement in Part XIV a	and complete the following	table				
							Amount
	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 For	rm 990, Part X, line 21?					∐ Yes ☐ No
	If "Yes," explain the arrangement in Part XIV.	lata if assaulantian a		" t- F-	000 D	LIV 1: 40	
_Pa	rt V Endowment Funds. Comp				- · · · ·	, 	
4.	Para a serie famos la tamas	(a) Current year	(b) Pnor ye	ear (c) Two years back	(d) Three years b	ack (e) Four years back
1a	Beginning of year balance						
D	Contributions						
C	Investment earnings or losses						
a	Grants or scholarships						
е	Other expenditures for facilities						
	and programs						
	Administrative expenses End of year balance		-				
g	Provide the estimated percentage of the year	and halance hold as	L			L	
2	Board designated or quasi-endowment	end balance neid as					
a h	Permanent endowment	"					
c	Term endowment						
	Are there endowment funds not in the possess	sion of the organization tha	t are held and	administer	ed for the		
-	organization by	sion or the organization tha	t are note and	odinii iiotor			Yes No
	(i) unrelated organizations						3a(i)
	(ii) related organizations	•					3a(ii)
b	If "Yes" to 3a(ıı), are the related organizations	listed as required on Schei	dule R?		•		3b
4	Describe in Part XIV the intended uses of the	•					<u> </u>
Pa	ırt VI Investments—Land, Buildi			n 990, P	art X, line 10		
	Description of investment	(a) Cost or other basis (investment)	(b) Co	st or other s (other)		preciation	(d) Book value
1a	Land						
b	Buildings						
	Leasehold improvements						
d	Equipment						
е	Other			75,4	38	61,633	13,805
Tota	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, column (B), line 10(c))			>	13,805

Schedule D (Fo	orm 990) 2008	FEDERATION OF PUB	EMPL	OYEES,	A DIV.	65-0489137	Page 3
Part VII	Investments	-Other Securities. See For					
		otion of security or category		(b) Boo	k value	(c) Method	of valuation
	(ınclu	ding name of security)				Cost or end-of-ye	ear market value
Financial derivation	atives and other fi	nancial products	L				
Closely-held ed	quity interests						
Other							<u> </u>
			1			·	
			F				
– – –							·
			- -				
			 			······································	
Total (Column	(h) should oqual	Form 990, Part X, col (B) line 12.)					
Part VIII		S—Program Related. See For	m 990	Part Y lir	no 13		
1 art viii		nption of investment type	1111 990,	(b) Boo		(c) Method	of valuation:
	(4, 2000	The state of the s		(5) 500	1000	Cost or end-of-ye	
							
 	· · ·						
		Form 990, Part X, col (B) line 13)	.				
Part IX	Other Asset	s. See Form 990, Part X, line					
		(a) Descrip	tion				(b) Book value
						-	
							· · · · · · · · · · · · · · · · · · ·
							
							
				 .			
					-		
Total. (Column	(b) should equal	Form 990, Part X, col (B) line 15)				•	
Part X		ities. See Form 990, Part X, I	ine 25.				<u> </u>
		Description of liability		(b) An	nount		
Federal income	taxes						
					-		
	<u></u>						
		Form 990, Part X, col (B) line 25)	>				
	ovide the text of th ositions under FIN	e footnote to the organization's financial	aı stateme	ents that repo	rts the organiz	zation's liability for	

Sche	dule D (Form 990) 2008 FEDERATION OF PUB EMPLOYEES, A	DIV. 65-048913	7	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Fi	nancial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total, expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	•	3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities	•	5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)	•	8	
9	Total adjustments (net) Add lines 4-8		9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10	
	rt XII Reconciliation of Revenue per Audited Financial Statements	s With Revenue per Ret		
1	Total revenue, gains, and other support per audited financial statements	s with Nevenue per Net	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	•		
	Net unrealized gains on investments	2a		
a	Donated services and use of facilities	2b		
b				
C	Recoveries of prior year grants	2c		
ď	Other (Describe in Part XIV)	2d		
_	Add lines 2a through 2d		2е	
3	Subtract line 2e from line 1	ſ	3	
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		4b		
C	Add lines 4a and 4b		4c	
	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)		_5_	
	rt XIII Reconciliation of Expenses per Audited Financial Statemen	ts With Expenses per R	eturr	<u> </u>
1	Total expenses and losses per audited financial statements		_1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1		
а	-	2a		
þ	Pnor year adjustments	2b		
С	Losses reported on Form 990, Part IX, line 25	2c	-	
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	,	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1	
b	Other (Describe in Part XIV)	4b	[
C	Add lines 4a and 4b		4c	
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)		5	
	rt XIV Supplemental Information			
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a			
and 2	b, Part V, line 4, Part X; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4	b		
_				
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				-
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		= = - -		

Sche	dule	D (Fo	orm	990)	2008	3	FE.	DE.	KA'	TI	UN	O.	Ľ.	PU.	В.	ĽM.	PL	OX1	LL.	S,	A	D.	ŤΛ	•	65	5-C	4 6	391	13	/						Page 5	5
Sche Pa	rt X	i۷	S	upp	lem	enta	al In	ıfor	ma	tion	1 (a	ontir	nued)																					-		•
														-											•												-
_	_	<u> </u>	-				_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	-	_		-
_	_		_				_	_	_	_	_	_	_	_	_		_	_	_	_	_	_	_			_	_	_	_	_	_	_	_	_	_		_
_	_		_				_	_		_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_		-
_	_	– ·	_			- –	_	_	_	_	_	_	_	_		_	_	_	_	_	_	_	_	_	_		_	_	_	_		_	_	_			-
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SCHEDULE J (Form 990)

Part I

Department of the Treasury Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

Open To Public Inspection

FEDERATION OF PUB EMPLOYEES, A DIV. Name of the organization

Questions Regarding Compensation

OF NAT'L FED OF PUB & PRIV, AFL-CIO

Employer identification number 65-0489137

			Yes	No
	Observations of the first file of the file			
та	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			İ
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or			
	provision of all of the expenses described above? If "No," complete Part III to explain	1b	-	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			:
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a			
а	Receive a severance payment or change of control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5–8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of.			٠
а	The organization?	5a		
b	Any related organization?	5b		
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of	 -	-	
а	The organization?	6a_		
b	Any related organization?	6b		
	If "Yes" to line 6a or 6b, describe in Part III.			-
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed		- 1	
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was			
	subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe		ļ	
	in Part III	8	i	

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

Schedule J (Form 990) 2008

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Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed Schedule J (Form 990) 2008 FEDERATION OF PUB EMPLOYEES, A DIV. 65-0489137 Part II

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

Note. The sum of columns (B)(i)—(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a. instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

	(B) Brea	akdown of	W-2 and/or 1099-MISC	compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	(I) Base compensatio	ii.	(i) Base (ii) Bonus & incentive (iii) Othe compensation compensation compensation	(iii) Other reportable compensation	compensation	benefits		reported in prior Form 990 or Form 990-EZ
DANIEL REYNOLDS	() 15,	15,444	0	0	0	0	15,444	
	(ii) 138,	138,592	0	0	0			
PATRICK LAMBERT	() 19,	19,125	0	0	0	0	19,12	0
)		0	0	0	0		0	0
7	€ €			<u>,</u>				
		-				•		-
)	ii)		•					
7	(1)			,				
	£ (
3	(n)			•				-
	(I) (i)				•			
	(E)							
	(1)				•			
	(3)				•			
	(u) (u)							
	(II)		<u>-</u>					
	(H) (I)				•			
	(u) (i)							
	(n) (0)			•				
							Schedul	Schedule J (Form 990) 2008

65-0489137

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Part III Supplemental Information
Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information. Schedule J (Form 990) 2008

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

FEDERATION OF PUB EMPLOYEES, A DIV. OF NAT'L FED OF PUB & PRIV, AFL-CIO

Employer identification number 65-0489137

Amended Return Explanation

AMENDED AS RESULT OF FINAL AUDIT

Form 990, Part III, Line 4d - All Other Achievements

THE FEDERATION OF PUBLIC EMPLOYEES IS AN ORGANIZATION MADE

UP OF APPROXIMATELY 6,400 MEMBERS FROM THE PUBLIC SECTOR.

IT WAS FORMED FOR THE PURPOSE OF ORGANIZING AND

REPRESENTING IT'S MEMBERS AND FOR SECURING BETTER WORKING

CONDITIONS FOR THEM.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders THE ORGANIZATION HAS MEMBERS.

Form 990, Part VI, Line 7a - Election of Members and Their Rights
THE ORGANIZATION HAS ALL MEMEMBERS VOTE.

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members

THE ORGANIZATION HAS ALL DECESIONS SUBJECT TO APPROVAL OF MEMBERS AT THEIR

BI-MONTHLY MEMBERSHIP MEETINGS

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

THE ORGANIZATION HANDS OUT FORMS ANNUALLY ATH THE FIRST QUARTERLY BOARD

MEETING OF THE YEAR AS WELL AS THE POLICY. IT IS REQUESTED THAT IF DURING.

THE YEAR A CONFLICT ARISES THAT IT MUST BE DISCLOSED.

Name of the organization

FEDERATION OF PUB EMPLOYEES, A DIV.

Employer identification number 65-0489137

Form 990, Part VI, Line 15a - Compensation Process for Top Official
THE ORGANIZATION HAS THE NATIONAL PRESIDENT COMPENSATION APPROVED AT THE
BIENNIAL CONVENTION.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

OMB No 1545-0047 2008

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ▶ See separate instructions. FEDERATION OF PUB EMPLOYEES, A DIV.

Open to Public Inspection Employer identification number

Ĺ 65-0489137 Θ É 9 ê OF NAT'L FED OF PUB & PRIV, AFL-CIO Identification of Disregarded Entities Ø Name of the organization Part I

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Durect controlling entity
Part II Identification of Related Tax-Exempt Organizations					
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
NATIONAL FEDERATION OF PUB/PRIVATE 1700 NW 66TH AVE STE ST 100 PLANTATION FL 33313			501C5		
FEDERATION OF PRIVATE 1700 NW 66TH AVE STE ST 100 65-0489178 PLANTATION FL 33313			50105		
For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	n 990.			Sche	Schedule R (Form 990) 2008

Page 2

65-0489137 FEDERATION OF PUB EMPLOYEES, A DIV. Schedule R (Form 990) 2008

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Identification of Related Organizations Taxable as a Partnership

Part III

(J)*
General or managing partner? Schedule R (Form 990) 2008 Yes No Percentage ownership (I)
Code V—UBI
amount in box 20 of
Schedule K-1
(Form 1065) end-of-year assets (G) Share of (H)
Disproportionate Yes No (G) Share of end-of-year assets (F) Share of total income (F) Share of total income Type of entity (C corp, S corp. or trust) (E)
Predominant income (related, (D)
Direct controlling unrelated) Identification of Related Organizations Taxable as a Corporation or Trust (D)
Direct controlling
entity (C) Legal domicile foreign country) (state or (C)
Legal
domicile
(state or
foreign Primary activity (B) Primary activity Name, address, and EIN of related organization (A)
Name, address, and EIN of related organization Part IV DAA

65-0489137 Schedule R (Form 990) 2008 FEDERATION OF PUB EMPLOYEES, A DIV.

Page 3

Transactions With Related Organizations Part V

Note. Complete line 1 if any entity is listed in Parts II, III, or IV			Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		•	
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		19	×
b Gift, grant, or capital contribution to other organization(s)		1b	×
c Gift, grant, or capital contribution from other organization(s)		10	×
d Loans or loan quarantees to or for other organization(s)		19	×
e Loans or loan guarantees by other organization(s)			×
f Sale of assets to other organization(s)		#	×
g Purchase of assets from other organization(s)		19	×
h Exchange of assets		£	×
 Lease of facilities, equipment, or other assets to other organization(s) 		=	×
i Lease of facilities, equipment, or other assets from other organization(s)		÷	×
k Performance of services or membership or fundraising solicitations for other organization(s)		*	×
l Performance of services or membership or fundraising solicitations by other organization(s)		=	×
m Sharing of facilities, equipment, mailing lists, or other assets		13	×
n Sharing of paid employees		=	×
 Reimbursement paid to other organization for expenses 		- 6	×
p Reimbursement paid by other organization for expenses		Q	×
		•	
q Other transfer of cash or property from other organization(s)		₽ =	< ×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	action thresholds		
(A)	(8)	(c)	
Name of other organization(s)	Transaction type (a-r)	Amount involved	pe/
(1)			
(2)			
(3)			ļ
(4)			
(5)			
(9)			
	Sche	Schedule R (Form 990) 2008	990) 2008

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Unrelated Organizations Taxable as a Partnership Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

Œ	General or managing partner?	Yes No								1000
-	···	۲			 <u> </u>					
(9)	Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)									2000 1000 mm c 17 G c 17 F c 4 c 3
(F)	Disproportionate allocations?	ο _N	 -							
	Dispre allox	Yes								
(E)	Share of end-of-year assets									
	artners on)(3) trons?	ş		·						
(Q)	Are all partners section 501(c)(3) organizations?	Yes				-			-	
(0)	Legal domicile (state or foreign country)	I								
(B)	Primary activity									
(A) (B) (C)	Name, address, and EIN of entity					•	:			

Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

See separate instructions. Attach to your tax return.

2008
Attachment Sequence No 67

OMB No 1545-0172

Name(s) shown on return

FEDERATION OF PUB EMPLOYEES, A DIV. OF NAT'L FED OF PUB & PRIV, AFL-CIO

Identifying number 65-0489137

	ess or activity to which this form relates ndirect Depreciati	.on								
Pa	art I Election To Expens	-	•							
	Note: If you have a	ny listed proper	ty, complete P	art V be	fore you	com	<u>plete Pa</u>	<u>rt I.</u>		
1	Maximum amount See the instructi	•		ses					1	250,000
2	Total cost of section 179 property p	•	•						2	
3	Threshold cost of section 179 prope	=		structions)				_3	800,000
4	Reduction in limitation Subtract line								4	
<u>5</u>	Dollar limitation for tax year Subtract line		less, enter -0- If mar				ctions		5	····· -· · · · · · · · · · · · · · · ·
	(a) Description	n of property		(b) Cost (business use	only)	(c) E	lected cost		
6			_							
				l						
7	Listed property Enter the amount fr		! (-) !			7	<u> </u>		•	<u> </u>
8	Total elected cost of section 179 pro	• •	in column (c), lines	s o and /					8	<u>.</u>
9	Tentative deduction Enter the sma		007 Farm 4560						9	
10	Carryover of disallowed deduction f	•		4h	\				10	
1 2	Business income limitation Enter the Section 179 expense deduction Ad		,			ee ins	ructions)		11	
	•	•			'' 	13		لسسب	12	
l3 Vote	Carryover of disallowed deduction t : Do not use Part II or Part III below f					13	<u> </u>			<u> </u>
	art II Special Depreciation			ociation	(Do not	incl	uda lista	d prope	rty) ((See instructions)
14	Special depreciation allowance for o						ude liste	и ргорс	<u> </u>	Oce mandenons.)
•	during the tax year (see instructions		ici tilaii iistea prop	city) piac	ca iii scrvice	•			14	
15	Property subject to section 168(f)(1	•							15	
6	Other depreciation (including ACRS	•							16	6,022
_	art III MACRS Depreciati		ide listed propi	ertv.) (S	ee instru	ction	s.)			
				ion A						
17	MACRS deductions for assets place	ed in service in tax ye	ears beginning befo	ore 2008				-	17	0
18	If you are electing to group any assets pla	aced in service during th	e tax year into one or	more gene	ral asset acco	ounts, c	heck here	▶□∣		
	Section B—	Assets Placed in Se	rvice During 2008	Tax Yea	r Using the	Gene	ral Depred	iation Sys	stem	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr (business/investme only-see instruc	ent use	d) Recovery period	(e) (Convention	(f) Met	hod	(g) Depreciation deduction
19a	3-year property									
b	5-year property					ļ <u>.</u>				
С	7-year property					<u> </u>				
d	10-year property									
е	15-year property					ļ			_	
f	20-year property									
	25-year property				25 yrs	<u> </u>		S/L		
h	Residential rental				27 5 yrs	-	MM	S/L	_	<u> </u>
	property				27.5 yrs		MM	S/L		
i					39 yrs	ļ	ММ	S/L		
	property					<u> </u>	MM	S/L		
		ssets Placed in Serv	vice During 2008 1	Tax Year	Using the A	Alterna	tive Depre	eciation S	ystem	· · · · · · · · · · · · · · · · · · ·
	Class life					<u> </u>		S/L		
-	12-year				12 yrs	ļ		S/L		
	40-year		<u> </u>		40 yrs		MM	S/L		
	art IV Summary (See ins					<u> </u>		- I		
21	Listed property. Enter amount from		40						21	
22	Total. Add amounts from line 12, lin									C 000
	Enter here and on the appropriate li		•	corporatio	ns—see ins	tr.			22	6,022
23	For assets shown above and placed	•	-			ا ہے ا				
	enter the portion of the basis attribu	table to section 263A	costs .			23				_

Forms		
990	1	990-PF

Mortgages and Other Notes Payable

_	ar	ιd	er	١d	เทด

2000	2	20	0	8
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Name

FEDERATION OF PUB EMPLOYEES, A DIV. OF NAT'L FED OF PUB & PRIV, AFL-CIO

For calendar year 2008, or tax year beginning

Employer Identification Number

65-0489137

OI MAI II IID OI	TOD & PRIV,	ALL CIO		03 0403137
Form 990, Part	X, Line 23 -	Additional	Information	
	ame of lender			inlifed name
1) UNION BANK	ame or lender		Relationship to disqu	laillied person
				
2)				<u> </u>
(3)		-		·
(4)				
(5)				
6)				
(7)				
(8) 9)				
10)				
10)				
	·		T	
Original amount borrowed	Date of loan	Matunty date	Repayment terms	Interest rate
1)	Various	Various	MONTHLY	7.750
2)	102000			7.755
3)				
(4)				
(5)				
6)				
7)				
8)				
9)				
10)				
<u> </u>				
	ity provided by borrower		Purpose of l	
1) AUTOMOBILES			PURCHASE AUTOMOBILES	
(2)				
(3)				
4)				
5)				
6)				
7)				
8)				
9)		 		
10)				
		-	1	
Camandanatio	n furnished by lender		Balance due at	Balance due at
	in lurnished by lender		beginning of year 6,013	end of year
1)			8,013	
2)			 	
4)			<u> </u>	
4) 5)		 	 	
<u>5)</u>	· · · · · · · · · · · · · · · · · · ·		+	
6) 7) 8)			 	
<u>' </u>		<u> </u>	<u> </u>	
9)			 	
10)				
Totals	· · · · · · · · · · · · · · · · · · ·		6,013	

FYE: 12/31/2008

3150 FEDERATION OF PUB EMPLOYEES, A DIV. 65-0489137 Federal Asset Report **Indirect Depreciation**

06/30/2010 1:57 PM

Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
0.1	.							
Other 1	<u>Depreciation:</u> FURNITURE & OFFICE EQUIPMENT	1/10/96	19,587		19,587	10 MO S/L	19,587	0
2	OFFICE FURNITURE	5/08/98	763		763	10 MO S/L	738	25
3 4	FILING CABINET FILING CABINET	5/08/98 5/11/98	382 382		382 382	10 MO S/L 10 MO S/L	369 369	13 13
5	LATERAL FILE CABINET	6/12/98	635		635	10 MO S/L	609	26
6	HP LASERJET PRINTERS	5/19/99	1,802		1,802	5 MO S/L	1,802	0
7 8	NORSTAR TELEPHONE SYSTEM HP LASERJET PRINTER	6/11/99 7/20/99	1,558 912		1,558 912	5 MO S/L 5 MO S/L	1,558 912	0
9	COMPUTER & SOFTWARE	10/21/99	3,412		3,412	5 MO S/L	3,412	ŏ
	KITCHEN REMODEL	4/13/99	2,000		2,000	5 MO S/L	2,000	0
14 16	OFFICE FURNITURE COREL DRAW SOFTWARE	6/16/00 1/16/01	675 562		675 562	10 MO S/L 5 MO S/L	675 562	0
17	HEWLETT PACKARD - PRINTER	1/12/01	280		280	5 MO S/L	280	0
18	DIGITAL CAMERA	1/12/01	460		460	5 MO S/L	460	0
19 20	HEWLETT PACKARD - 4100 PRINTER MONITOR	4/09/01 4/05/01	1,249 205		1,249 205	5 MO S/L 5 MO S/L	1,249 205	0
21	SCANNER	1/31/01	212		212	5 MO S/L	212	0
22 23	MONITOR	5/07/01 5/30/01	288 189		288 189	5 MO S/L 5 MO S/L	288 189	0
	MONITOR BROTHER INTELLIFAX 4750	11/30/01	544		544	5 MO S/L	544	0
25	5 OFFICE CHAIRS	1/17/01	548		548	5 MO S/L	548	0
26 27	LABORWORKS SOFTWARE MONITOR	5/30/01 3/30/01	10,390 519		10,390 519	5 MO S/L 5 MO S/L	10,390 519	0
	COMPUTER HARD DRIVE EN-7237	3/30/01	1,314		1,314	5 MO S/L	1,314	0
29	NETWORKING ITEMS	4/23/01	852		852	5 MO S/L	852	0
	HP LASERJET PRINTER HP LASERJET PRINTER - YVETTE	4/10/02 9/24/03	857 699		857 699	5 MO S/L 5 MO S/L	814 594	43 105
	FILING CABINETS	9/26/03	1,484		1,484	5 MO S/L	1,261	223
33	FILING CABINETS	10/14/03	424		424	5 MO S/L	360	64
35	2004 WHITE FORD EXPLORER Sold/Scrapped 9/30/08	4/29/04	27,652		27,652	4 MO S/L	25,348	2,304
36	OFFICE FURNITURE	2/12/04	689		689	10 MO S/L	270	69
37	OFFICE FURNITURE	10/21/04	685		685		217	68
	OFFICE FURNITURE PRINTER	11/09/04 9/27/04	1,595 687		687	10 MO S/L 5 MO S/L	505 446	160 138
	HAYWORTH DIVIDERS	8/29/05	1,988		1,988	10 MO S/L	464	199
41 42	PRINTER 4250n WINBOOK COMPUTERS	6/23/05 5/26/05	1,743 3,206		1,743 3,206	5 MO S/L 5 MO S/L	872 1,656	348
	PAINT	7/20/05	3,200		3,200	5 MO S/L	1,030	642 74
44	PAINT	8/29/05	302		302	5 MO S/L	141	60
45 46	1/4 CLEAR PATTERN CONFERENCE TO NEW CLOSET	£ 9/27/06 6/21/07	661 2,400		661 2,400	10 MO S/L 5 MO S/L	83 274	66 480
47	HP 4700DN LASERJET PRINTER	9/11/07	1,798		1,798	5 MO S/L	120	359
48	CANON CAMERA	11/21/07	996		996		17	199
49 50	CHERRYWOOD DESK COMPUTER OPTIPLEX 755	6/27/08 9/23/08	2,078 1,017		2,078 1,017	5 MO S/L 5 MO S/L	0	208 51
51	HP LASER JET PRINTERS	9/23/08	1,034		1,034	5 MO S/L	ŏ	52
52	MERIDAN TELEPHONES (3)	10/20/08	1,006		1,006	5 MO S/L	0	34
	Total Other Depreciation	_	103,093		103,093		83,265	6,023
	Total ACRS and Other Depre	ciation =	103,093	,	103,093		83,265	6,023
	Grand Totals		103,093		103,093		83,265	6,023
	Less: Dispositions		27,652		27,652		25,348	2,304
	Less: Start-up/Org Expense	_	0		0		0	0
	Net Grand Totals	=	75,441		75,441		57,917	3,719

3150 FEDERATION OF PUB EMPLOYEES, A DIV.
65-0489137 State Asset Report

FYE: 12/31/2008

Indirect Depreciation

06/30/2010 1:57 PM

Asset	Description	Date In Service	Cost	Basis for Depr	State Pnor	State Current	Federal Current	Difference Fed - State
Other	Depreciation:							
1	FURNITURE & OFFICE EQUIPMENT	1/10/96	19,587	19,587	19,587	0	0	0
2	OFFICE FURNITURE	5/08/98	763	763	738	25	25	0
3	FILING CABINET	5/08/98	382	382	369	13	13	0
4 5	FILING CABINET LATERAL FILE CABINET	5/11/98 6/12/98	382 635	382 635	369 609	13 26	13 26	0 0
6	HP LASERJET PRINTERS	5/19/99	1,802	1,802	1,802	0	0	0
7	NORSTAR TELEPHONE SYSTEM	6/11/99	1,558	1,558	1,558	ŏ	ŏ	ŏ
8	HP LASERJET PRINTER	7/20/99	912	912	912	0	0	0
9	COMPUTER & SOFTWARE	10/21/99	3,412	3,412	3,412	0	0	0
	KITCHEN REMODEL	4/13/99	2,000	2,000	2,000	0	0	0
	OFFICE FURNITURE COREL DRAW SOFTWARE	6/16/00	675 562	675 562	675 562	0	0	0
	HEWLETT PACKARD - PRINTER	1/16/01 1/12/01	280	562 280	280	0	0	0
18	DIGITAL CAMERA	1/12/01	460	460	460	ŏ	ŏ	ő
19	HEWLETT PACKARD - 4100 PRINTER	4/09/01	1,249	1,249	1,249	0	Õ	Ŏ
	MONITOR	4/05/01	205	205	205	0	0	0
21	SCANNER	1/31/01	212	212	212	0	0	0
22	MONITOR	5/07/01	288	288	288	. 0	0	0
23 24	MONITOR BROTHER INTELLIFAX 4750	5/30/01 11/30/01	189 544	189 544	189 544	0	0	0
25	5 OFFICE CHAIRS	1/17/01	548	548	548	0	0	0
	LABORWORKS SOFTWARE	5/30/01	10,390	10,390	10,390	ŏ	ő	ő
	MONITOR	3/30/01	519	519	519	Ō	Ö	Ö
28	COMPUTER HARD DRIVE EN-7237	3/30/01	1,314	1,314	1,314	0	0	0
29	NETWORKING ITEMS	4/23/01	852	852	852	0	0	Ō
	HP LASERJET PRINTER	4/10/02	857	857	814	43	43	0
31 32	HP LASERJET PRINTER - YVETTE FILING CABINETS	9/24/03	699	699	594	105	105	0
33	FILING CABINETS FILING CABINETS	9/26/03 10/14/03	1,484 424	1,484 424	1,261 360	223 64	223 64	0
35	2004 WHITE FORD EXPLORER	4/29/04	27,652	27,652	25,348	2,304	2,304	0
-	Sold/Scrapped: 9/30/08	25, 0.	27,052	27,002	20,5 10	2,501	2,501	V
36	OFFICE FURNITURE	2/12/04	689	689	270	69	69	0
	OFFICE FURNITURE	10/21/04	685	685	217	68	68	0
	OFFICE FURNITURE	11/09/04	1,595	1,595	505	160	160	0
	PRINTER HAYWORTH DIVIDERS	9/27/04 8/29/05	687	687	446 464	138 199	138 199	0
41	PRINTER 4250n	6/23/05	1,988 1,743	1,988 1,743	872	348	348	0
42	WINBOOK COMPUTERS	5/26/05	3,206	3,206	1,656	642	642	ŏ
43	PAINT	7/20/05	372	372	180	74	74	Õ
44	PAINT	8/29/05	302	302	141	60	60	0
45	1/4 CLEAR PATTERN CONFERENCE TA		661	661	83	66	66	0
46 47	NEW CLOSET HP 4700DN LASERJET PRINTER	6/21/07	2,400	2,400	274	480	480	0
48	CANON CAMERA	9/11/07 11/21/07	1,798 996	1,798 996	120 17	359 199	359 199	0
49	CHERRYWOOD DESK	6/27/08	2,078	2,078	ó	208	208	ő
50	COMPUTER OPTIPLEX 755	9/23/08	1,017	1,017	Ŏ	51	51	ő
51	HP LASER JET PRINTERS	9/23/08	1,034	1,034	0	52	52	0
52	MERIDAN TELEPHONES (3)	10/20/08	1,006	1,006	0	34	34	0
	Total Other Depreciation		103,093	103,093	83,265	6,023	6,023	0
	Total ACRS and Other Deprec	iation	102 002	102 002	92 265	6.022	6.022	0
	Total ACRS and Other Deprec	.iativii	103,093	103,093	83,265	6,023	6,023	0
	Grand Totals		103,093	103,093	83,265	6,023	6,023	0
	Less: Dispositions		27,652	27,652	25,348	2,304	2,304	ŏ
	Less: Start-up/Org Expense		0	0	0	0	0	0
	Net Grand Totals		75,441	75,441	57,917	3,719	3,719	0

3150 FEDERATION OF PUB EMPLOYEES, A DIV.
65-0489137 **Depreciation Adjustment Report**

All Business Activities

06/30/2010 1:57 PM

Form Unit Asset

FYE: 12/31/2008

Description

Tax

AMT

AMT Adjustments/ Preferences

There are no assets that meet the criteria of this report

06/30/2010 1:57 PM

3150 FEDERATION OF PUB EMPLOYEES, A DIV. 06 65-0489137 Future Depreciation Report FYE: 12/31/09

FYE: 12/31/2008

Indirect Depreciation

Asset	Description	Date In Service	Cost	Tax	AMT
Other D	epreciation:				
1	FURNITURE & OFFICE EQUIPMENT	1/10/96	19,587	0	0
2	OFFICE FURNITURE	5/08/98	763	ŏ	ŏ
3	FILING CABINET	5/08/98	382	Ö	ŏ
4	FILING CABINET	5/11/98	382	Ö	Ō
5	LATERAL FILE CABINET	6/12/98	635	0	0
6	HP LASERJET PRINTERS	5/19/99	1,802	0	0
7	NORSTAR TELEPHONE SYSTEM	6/11/99	1,558	0	0
8	HP LASERJET PRINTER	7/20/99	912	0	0
9	COMPUTER & SOFTWARE	10/21/99	3,412	0	0
10	KITCHEN REMODEL	4/13/99	2,000	0	0
14 16	OFFICE FURNITURE	6/16/00	675	0	0
16 17	COREL DRAW SOFTWARE	1/16/01	562	0	0
17	HEWLETT PACKARD - PRINTER DIGITAL CAMERA	1/12/01 1/12/01	280 460	0	0
19	HEWLETT PACKARD - 4100 PRINTER	4/09/01	460 1,249	0	0
20	MONITOR	4/05/01	205	0	0
21	SCANNER	1/31/01	203	0	0
22	MONITOR	5/07/01	288	0	0
23	MONITOR	5/30/01	189	ŏ	ő
24	BROTHER INTELLIFAX 4750	11/30/01	544	Ö	ŏ
25	5 OFFICE CHAIRS	1/17/01	548	0	0
26	LABORWORKS SOFTWARE	5/30/01	10,390	0	0
27	MONITOR	3/30/01	519	0	0
28	COMPUTER HARD DRIVE EN-7237	3/30/01	1,314	0	0
29	NETWORKING ITEMS	4/23/01	852	0	0
30	HP LASERJET PRINTER	4/10/02	857	0	0
31	HP LASERJET PRINTER - YVETTE	9/24/03	699	0	0
32 33	FILING CARDIETS	9/26/03	1,484	0	0
35 36	FILING CABINETS OFFICE FURNITURE	10/14/03 2/12/04	424	0	0
30 37	OFFICE FURNITURE	10/21/04	689 685	69 69	0
38	OFFICE FURNITURE	11/09/04	1,595	159	0
39	PRINTER	9/27/04	687	103	0
40	HAYWORTH DIVIDERS	8/29/05	1,988	198	0
41	PRINTER 4250n	6/23/05	1,743	349	ő
42	WINBOOK COMPUTERS	5/26/05	3,206	641	ŏ
43	PAINT	7/20/05	372	75	ŏ
44	PAINT	8/29/05	302	61	0
45	1/4 CLEAR PATTERN CONFERENCE TABLE		661	66	0
46	NEW CLOSET	6/21/07	2,400	480	0
47	HP 4700DN LASERJET PRINTER	9/11/07	1,798	360	0
48	CANON CAMERA	11/21/07	996	199	0
49 50	CHERRYWOOD DESK	6/27/08	2,078	415	0
50	COMPUTER OPTIPLEX 755	9/23/08	1,017	203	0
51 52	HP LASER JET PRINTERS	9/23/08	1,034	206	0
52	MERIDAN TELEPHONES (3)	10/20/08	1,006	201	0
	Total Other Depreciation		75,441	3,854	0
	Total ACRS and Other Depreciation		75,441	3,854	0
	Grand Totals		75,441	3,854	0

3150 FEDERATION OF PUB EMPLOYEES, A DIV. 06/30/2010 1:57 PM 65-0489137 Future Depreciation Report FYE: 12/31/09

FYE: 12/31/2008

65-0489137

Indirect Depreciation

Asset	Description	Date In Service	Cost	State
Other D	epreciation:			
Office D				_
1	FURNITURE & OFFICE EQUIPMENT	1/10/96	19,587	0
2 3	OFFICE FURNITURE FILING CABINET	5/08/98 5/08/98	763 382	0
4	FILING CABINET	5/11/98	382	ő
5	LATERAL FILE CABINET	6/12/98	635	ŏ
6	HP LASERJET PRINTERS	5/19/99	1,802	0
7	NORSTAR TELEPHONE SYSTEM	6/11/99	1,558	0
8	HP LASERJET PRINTER	7/20/99	912	0
9	COMPUTER & SOFTWARE	10/21/99	3,412	0
10	KITCHEN REMODEL	4/13/99	2,000	0
14	OFFICE FURNITURE	6/16/00	675 562	0
16 17	COREL DRAW SOFTWARE HEWLETT PACKARD - PRINTER	1/16/01 1/12/01	280	0
18	DIGITAL CAMERA	1/12/01	460	0
19	HEWLETT PACKARD - 4100 PRINTER	4/09/01	1,249	ŏ
20	MONITOR	4/05/01	205	ŏ
21	SCANNER	1/31/01	212	0
22	MONITOR	5/07/01	288	0
23	MONITOR	5/30/01	189	0
24	BROTHER INTELLIFAX 4750	11/30/01	544	0
25	5 OFFICE CHAIRS	1/17/01	548	0
26	LABORWORKS SOFTWARE	5/30/01	10,390	0
27 28	MONITOR COMPUTER HARD DRIVE EN-7237	3/30/01 3/30/01	519 1,314	0
28 29	NETWORKING ITEMS	4/23/01	1,314 852	0
30	HP LASERJET PRINTER	4/10/02	857	0
31	HP LASERJET PRINTER - YVETTE	9/24/03	699	ŏ
32	FILING CABINETS	9/26/03	1,484	Õ
33	FILING CABINETS	10/14/03	424	0
36	OFFICE FURNITURE	2/12/04	689	69
37	OFFICE FURNITURE	10/21/04	685	69
38	OFFICE FURNITURE	11/09/04	1,595	159
39	PRINTER	9/27/04	687	103
40 41	HAYWORTH DIVIDERS PRINTER 4250n	8/29/05 6/23/05	1,988 1,743	198 349
42	WINBOOK COMPUTERS	5/26/05	3,206	641
43	PAINT	7/20/05	372	75
44	PAINT	8/29/05	302	61
45	1/4 CLEAR PATTERN CONFERENCE TABLE	9/27/06	661	66
46	NEW CLOSET	6/21/07	2,400	480
47	HP 4700DN LASERJET PRINTER	9/11/07	1,798	360
48	CANON CAMERA	11/21/07	996	199
49	CHERRYWOOD DESK	6/27/08	2,078	415
50 51	COMPUTER OPTIPLEX 755 HP LASER JET PRINTERS	9/23/08 9/23/08	1,017 1,034	203 206
52	MERIDAN TELEPHONES (3)	10/20/08	1,034	206 201
32	Total Other Depreciation	10/20/00	75,441	3,854
	Total Other Depreciation		73,441	
	Total ACRS and Other Depreciation		75,441	3,854
	Grand Totals		75,441	3,854

3150 FEDERATION OF PUB EMPLOYEES, A DIV.
65-0489137 Federal Statements

FYE: 12/31/2008

Taxable Interest on Investments

Unrelated Exclusion Postal Description Business Code Amount Code Code \$ 42,027

6/30/2010 1:57 PM

Total

42,027

	Federal Statements	
5150 FEDERATION OF PUB EMPLOYEES, A DIV.	65-0489137	FYE: 12/31/2008

	Form 990,	Part IX, Line 24f - All Other Expenses	f - All Ot	ner Expenses		
Description	_	Total Expenses		Program Service	Management & General	Fund Raising
PICNIC FORUM DONATIONS	ഗ	48,232 41,884 27,876	ᡐ	48,232 41,884 27,876	w	S
ORGANIZING GRIEVE & UNIT MGMT EQUIPMENT RENTAL		20,151 18,685 18,491		20,151 18,685 18,491		
RECRUITING MEMBERS POLITICAL ACTION OUTSIDE LABOR		5,736 5,254 5,200		5,736 5,254 5,200		
GIFTS & CONDOLENCES Total	\	1,844	w.	1,844	8	\$