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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 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

Inspection

| A Fo | r the 2 | 2008 ca | lendar vea | ır, or tax year beginning 07-01-2008 | and ending 06-30-200 | 9 | | |
|--|---------------------|-----------------------|--------------------------|---|---|-----------------|--------------------------------------|-----------------------------|
| | | plicable | | C Name of organization | | - | D Employer id | entification number |
| _ | dress cha | | Please use IRS | ALASKA PUBLIC EMPLOYEES ASSOCIATION AFT SUPERVISORY UNIT LOCAL 4900 | DN | | 27-002807 | 7 5 |
| _ | | - | label or | Doing Business As | | | E Telephone n | |
| Na _ | me chan | nge | print or type. See | | | | (007) 596 | 2224 |
| Init | al retur | 'n | Specific Instruc- | Number and street (or P O box if mail | s not delivered to street addre | ess) Room/suite | (907) 586- G Gross receip | |
| Tei | mınatıor | n | tions. | 211 FOURTH STREET No 306 | | | d dioss receip | 11.5 \$ 903,703 |
| – _{Am} | ended r | eturn | | City or town, state or country, and ZIP | + 4 | | 1 | |
| | | pending | | JUNEAU, AK 99801 | | | | |
| Apı | JICALIOTI | pending | | | | | | |
| | | | | me and address of Principal Officer | | | ıs a group returr | n for |
| | | | JO H N N | WHITE DURTH STREET SUITE 306 | | affilia | ites? | ΓYes Γ Nο |
| | | | | U,AK 99801 | | H(b) Are a | II affiliates includ | ed? |
| [Ta | x-exem | pt status | ⋝ 501(c | () (5) ◀ (insert no) | □ 527 | | | t See instructions) |
| | . 1 10 . | | 04/61/455 | A-AFT ORG | | | io, attach a list ip Exemption Ni | |
| | ed Site | =: - | W SU APE | A-AFI ORG | | "(c) | .p _ x =p | |
| / Tun | o of ora | anization | Cornerat | tion | OR LINTON | L Voor of Ed | ermation 2002 M | State of legal domicile AK |
| Стур | e or orga | anization | Corporat | tion trust association other | OK ONION | L rear or Fo | ormation 2002 M | State of legal domicile. AK |
| | | | | | | | | |
| Pa | rt I | Sumi | mary | | | | | |
| | 1 | Briefly o | describe th | ie organization's mission or most si | gnificant activities | | | |
| 01 | | то імр | ROVEME | MBERS COMPENSATION AND WO | RKING CONDITIONS | | | |
| ≚ | | | NO VE III | TIBERO COM ENGATION AND WO | ARRIVO COMBILIONS | | | |
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| ≣ | | | | | | | | |
| Governance | 2 | Check t | his box | if the organization discontinued its | operations or disposed | of more than 2 | 25% of its asset | :S |
| | 3 | Number | of voting r | members of the governing body (Pai | rt VI, line 1a) | | . 3 | 5 |
| eo Co | 4 | Number | of indeper | ndent voting members of the govern | ing body (Part VI, line 1 | b) | . 4 | 5 |
| <u>~</u> | 1 | | | mployees (Part V, line 2a) | | | 5 | 0 |
| 툳 | | | | olunteers (estimate if necessary) | | | | 0 |
| Activities | | | | | | | • . | |
| 4. | | - | | ited business revenue from Part VII | , | | - | <u>-</u> |
| | b | Net unr | elated busi | iness taxable income from Form 99 | 0-T, line 34 | | 7Ь | 0 |
| | | | | | | Pri | or Year | Current Year |
| | 8 | Contri | butions and | d grants (Part VIII, line 1h) | | | | 0 |
| ≗ | 9 | Progra | m service | revenue (Part VIII, line 2g) | | | 242,166 | 225,659 |
| Revenu | 10 | Invest | ment incor | me (Part VIII, column (A), lines 3, | 4.and 7d) | | 40,590 | -169,860 |
| æ | 11 | | | Part VIII, column (A), lines 5, 6d, 8 | | -12,396 | | |
| | | | - | dd lines 8 through 11 (must equal F | | | -12,330 | |
| | 12 | 12) | evenue—a | dd illies o tillough 11 (must equal r | rait VIII, Column (A), m | ie | 270,360 | 55,799 |
| | 13 | Grants | and simila | ar amounts paid (Part IX, column (A |), lines 1-3) | | | 0 |
| | 14 | | | or for members (Part IX, column (A) | ., | | | 0 |
| | | | • | . , , , , , , , , , , , , , , , , , , , | | _ | | |
| 83 | 15 | 10) | es, other co | ompensation, employee benefits (Pa | art IX, column (A), lines | 5- | | 0 |
| Expenses | 16a | • | sional fund | draising fees (Part IX, column (A), li | ne 11e) | | | 0 |
| <u>क</u> | | | | | ne rre) | | | |
| ठ | b | | _ | penses, Part IX, column (D), line 25 <u>0</u> |) | | | |
| | 17 | Other | expenses | (Part IX, column (A), lines 11a-11e | d, 11f–24f) | | 161,745 | 135,099 |
| | 18 | Total | expenses— | -add lines 13–17 (must equal Part I | (X, line 25, column (A)) | | 161,745 | 135,099 |
| | 19 | Reven | ue less exp | penses Subtract line 18 from line 1 | 2 | | 108,615 | -79,300 |
| <u>8</u> 4 | | | | | | Beginn | ing of Year | End of Year |
| Net Assets or Fund Balances | 36 | T - 4 - 1 | | mt V June 163 | | Degiiiii | | |
| 35.00 37.00 37.00 37.00 37.00 37.00 | 20 | | • | rt X, line 16) | | | 1,318,395 | 1,239,095 |
| ŽŽ | 21 | Totall | ıabılıtıes (F | Part X, line 26) | | | | 0 |
| 22 | 22 | Netas | sets or fun | nd balances Subtract line 21 from li | ne 20 | | 1,318,395 | 1,239,095 |
| Pai | t II | Sian | ature Bl | ock | | | | |
| | | | | equry, I declare that I have examined this r | eturn, including accompanying | g schedules and | statements, and to | the best of my knowledge |
| | | | | correct, and complete Declaration of prepa | | | | |
| Plea | se | l k | | | | 2010 | -05-14 | |
| Sigr | | Signa | ature of office | er | | | | |
| Her | е | N 10Hr | N WHITE PRE | SIDENT | | | | |
| | | | or print nam | | | | | |
| | I | F | | | Data | Charle of | Dress of Deep | /Sac Car Tret \ |
| | | Preparer signature | | | Date | Check if self- | Preparer's PIIN | (See Gen Inst) |
| Paid | | signature | · F | | | empolyed 🕨 🦵 | · | |
| Prep. | arer's | | ame (or your | s Lockitch Clements & Rice PS | 1 | • | | |
| Jse (| Only | | nployed), and ZIP + 4 | 534 Westlake Ave N Ste 300 | | | EIN 🕨 | |
| | - | auuress, | and ZIF + 4 | 554 Westiake Ave IN STE 300 | | | Phone no 🕨 (2 | 206) 622-4253 |
| | | | | Seattle, WA 98109 | | | Thome no # (2 | |
| | | | | irn with the preparer shown above? | | | | L vas L No |

Cat No 11282Y

Form 990 (2008) Part III Statement of Program Service Accomplishments (See the instructions.)

| 1 | Briefly describe the organization | | TIONS AND COMPENSATION | | |
|----|--|---------------------------|--|----------------------|----------|
| | | | | | |
| 2 | Did the organization und the prior Form 990 or 99 | | ogram services during the year which | h were not listed on | es 🗸 No |
| | If "Yes," describe these | | | | |
| 3 | services? | | ıgnıfıcant changes ın how ıt conduct • • • • • • • • • | s any program Y | 'es ✓ No |
| _ | If "Yes," describe these | - | | | |
| 4 | Section 501(c)(3) and (4 | 4) organızatıons and 494 | ach of the organization's three large 7 (a)(1) trusts are required to repor or each program service reported | | |
| 4a | (Code |) (Expenses \$ | including grants of \$ |) (Revenue \$ |) |
| | TO IMPROVE MEMBERS COM | IPENSATION AND WORKING CO | DNDITIONS | | |
| | | | | | |
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| | | | | | |
| | | | | | |
| 4b | (Code |) (Expenses \$ | including grants of \$ |) (Revenue \$ |) |
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| | | | | | |
| 4c | (Code |) (Expenses \$ | ıncludıng grants of \$ |) (Revenue \$ |) |
| | (0000 | , (Expenses ϕ | melading grants or \$ |) (Nevende 4 | , |
| | | | | | |
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| | | | | | |
| 4d | Other program service: | s (Describe in Schedule | 0) | | |
| | (Expenses \$ | ıncludıng | grants of \$ | (Revenue \$ |) |
| 4e | Total program service | expenses \$ | Must equal Part IX, Line . | 25, column (B). | |

| art IV | Checklist of | Required | Schedules |
|--------|--------------|----------|-----------|
|--------|--------------|----------|-----------|

| | | | Yes | No |
|-----|---|-----|-----|----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | 1 | | No |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | | No |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | Νο |
| 4 | Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II | 4 | | |
| 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 | Yes | |
| 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 Schedule D, Part I. | 6 | | No |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II | 7 | | No |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | 8 | | No |
| 9 | Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV. | 9 | | No |
| 10 | Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | Νο |
| 11 | Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable | 11 | | No |
| 12 | Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII. | 12 | Yes | |
| 13 | Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | Νο |
| 14a | Did the organization maintain an office, employees, or agents outside of the U.S.? | 14a | | Νο |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I | 14b | | Νο |
| 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? <i>If "Yes," complete Schedule F, Part II</i> | 15 | | No |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If</i> "Yes," complete Schedule F, Part III | 16 | | No |
| 17 | Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I | 17 | | No |
| 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 | | No |
| 19 | Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | | Νo |
| 20 | Did the organization operate one or more hospitals? If "Yes," complete Schedule H | 20 | | Νο |
| 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 | | No |
| 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 | | Νο |
| 23 | Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J | 23 | | Νο |
| 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 | | No |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | 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 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 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II | 26 | | No |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> | 27 | | No |

Part IV Checklist of Required Schedules (Continued)

| | | | 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 | | | |
| | | 28a | | No |
| b | Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV | 28b | | No |
| c | 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 | | No |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | No |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M | 30 | | Νο |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | Νο |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II | 32 | | No |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I | 33 | | No |
| 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 | | No |
| 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 | | No |
| 36 | 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 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | No |

| | rt V Statements Regarding Other IRS Filings and Tax Compliance | | | raye |
|------|---|-----|-----|------|
| لنقط | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal | | | ···• |
| | of U.S. Information Returns. Enter -0- if not applicable | | | |
| | 1a 0 | | | |
| b | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0 | | | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | Yes | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return | | | |
| b | If at least one is reported in 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 this return. | 2b | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | 3a | | No |
| ь | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | No |
| b | If "Yes," enter the name of the foreign country | | | |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22.1, 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 | | Νo |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | Νo |
| С | If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? | 5c | | |
| 6a | Did the organization solicit any contributions that were not tax deductible? | 6a | | Νo |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section $170(c)$. | | | |
| а | Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? | 7a | | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | |
| e | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | |
| g | For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| h | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? | 7h | | |
| 8 | Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds and section $509(a)(3)$ supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring 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. | | | |
| 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 | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 10a | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | _ | | |
| 11 | Section 501(c)(12) organizations Enter | | | |
| а | Gross income from members or shareholders | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) | _ | | |
| 17- | | 13- | | |
| | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the | 12a | | |

9a

10

11

Yes

Yes

Yes

Νo

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Does the organization have local chapters, branches, or affiliates?

must describe in Schedule O the process, if any, the organization uses to review the Form 990 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

b If "Yes," does the organization have written policies and procedures governing the activities of such chapters,

| Se | ction A. Governing Body and Management | | | |
|----|---|------|-----|----|
| | | | Yes | No |
| | For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions. | | | |
| а | Enter the number of voting members of the governing body 1a | 5 | | |
| b | Enter the number of voting members that are independent 1b | 5 | | |
| | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | | No |
| 1 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . | . 3 | | No |
| • | Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? | 4 | | No |
| ; | Did the organization become aware during the year of a material diversion of the organization's assets? | 5 | | Νο |
| , | Does the organization have members or stockholders? | 6 | Yes | |
| a | Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? | 7a | Yes | |
| b | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . | . 7b | | Νο |
| } | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | | |
| а | the governing body? | 8a | Yes | |
| b | each committee with authority to act on behalf of the governing body? | 8b | Yes | |
| | | | _ | |

Section B. Policies

| | | | Yes | No |
|-----------|--|-----|-----|----|
| L2a | Does the organization have a written conflict of interest policy? If "No", go to line 13 | 12a | | Νo |
| b | Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | | |
| С | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done | 12c | | |
| L3 | Does the organization have a written whistleblower policy? | 13 | | Νo |
| L4 | Does the organization have a written document retention and destruction policy? | 14 | | Νo |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision | | | |
| а | The organization's CEO, Executive Director, or top management official? | 15a | | Νo |
| Ь | Other officers or key employees of the organization? | 15b | | Νo |
| | Describe the process in Schedule O | | | |
| L6a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16a | | Νο |
| b | If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? | 16b | | |
| | | | | |

Section C. Disclosure

| 17 | List the States | with which a c | conv of thic | Form 990 ic | required to be filed |
|----|-----------------|----------------|--------------|-------------|----------------------|
| l/ | List the States | with which a c | CODY OF THIS | Form 990 IS | required to be filed |

- 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. upon request
 - L9 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. See Additional Data Table
 - 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

CHIP VERRELLI 211 FOURTH STREET SUITE 306 JUNEAU,AK 99801 (907) 586-2334

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) and key employees 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- * List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

| Check this box if the organization did no | t compens | te any o | office | r, dı | rect | or, tru | stee | or key employee | | | |
|--|--|-------------------------------------|-----------------------|---------|--------------|------------------------------|--------|---|--|--|--|
| | | (C) Position (check all that apply) | | | | | | | | (F) | |
| (A) Name and Title | (B) Average hours per week | Individual Trustee or Director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | (D) Reportable compensation from the organization (W- 2/1099MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | Estimated amount of other compensation from the organization and related organizations | |
| JOHN WHITE , PRESIDENT | | Х | | Х | | | | 0 | 0 | 0 | |
| BILL PARKER, SECRETARY/TREASURER | | Х | | Х | | | | 0 | 0 | 0 | |
| JEF MORGAN , CHAPTER CHAIR SE REGION | | Х | | Х | | | | 0 | 0 | 0 | |
| CHRIS SANDERS-PORTER , CHAPTER CHAIR SC REGION | | х | | х | | | | 0 | 0 | 0 | |
| SCOTT LEIGH , CHAPTER CHAIR N REGION | | Х | | Х | | | | 0 | 0 | 0 | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

Part VII Continued

| | | | tion that a | | | all | | | (E) | (F) |
|------------------------------|--|-----------------------------------|-----------------------|---------|--------------|------------------------------|------------|---|---|--|
| (A) Name and Title | (B) Average hours per week | Individual Trustee or Director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | (D) Reportable compensation from the organization (W- 2/1099MISC) | Reportable compensation from related organizations (W- 2/1099- MISC) | Estimated amount of other compensation from the organization and related organizations |
| | | | | | | | | | | |
| | | | - | | | | | | | |
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| | | | | | - | | \vdash | | | |
| | | | | | - | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 1b Total | | | | | | | • | (| 0 | 0 |
| 1b Total | | • • • | • | | • | | | | | 0 |

Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►0

| | | | 110 |
|---|---|---|---------|
| 3 | Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> "Yes," complete Schedule J for such individual | 3 | Νο |
| 4 | For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual | 4 | No |
| 5 | Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person | 5 | Νο |

Section B. Independent Contractors

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

| (A) Name and business address | (B) Description of services | (C) Compensation | | |
|---|-----------------------------|---------------------|--|--|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation | | | | |

Vec |

Page **9**

Part VIII

Statement of Revenue

| | | | | | (A) Total Revenue | (B) Related or Exempt Function Revenue | (C) Unrelated Business Revenue | (D) Revenue Excluded from Tax under IRC 512, 513, or 514 |
|--|--------|--|----------------------------|-----------------|----------------------|--|--|--|
| | 1a | Federated campai | gns 1a | | | Revenue | | 312, 313, 61 314 |
| nts Disse | ь | Membership dues | | | | | | |
| ou ou | | | 1b | | | | | |
| gifts, gra lar amot | С | Fundraising event | s 1c | | | | | |
| | d | Related organizati | ons1d | | | | | |
| Ξ̈́ | е | Government grants (c | ontributions) 1e | | | | | |
| Contributions, gifts, grants and other similar amounts | f | All other contributions, | | | | İ | | İ |
| | | sımılar amounts not ın | icluded above 1f | | | | | |
| 늍 | g | Noncash contribu | tions included in | | | | | |
| ပ္မ | ١. | lines 1a-1f \$ | | | | | | |
| | h | Total (Add lines 1 | a-1f) | | | | | |
| Program Service Revenue | | | | Business Code | | | | |
| | 2a | BUSINESS LEAVE BANK | (| 900,099 | 200,000 | 200,000 | | |
| | b | DUES | | 900,099 | 25,659 | 25,659 | | |
| ě. | С | | | | | | | |
| ž | d | | | | | | | |
| 3g | e | | | | | | | |
| Tag L | f | All other program | service revenue | | | | | |
| ₽og | g | Total. Add lines 2a | a-2f | | | | | |
| | 3 | ► \$ 225,659 Investment incom | ne (includina divi | dends. Interest | | | | |
| | | other similar amou | | | 30,019 | | | 30,019 |
| | | | | ▶ | | | | |
| | 4 | Income from investme | ent of tax-exempt b | ona proceeds | | | | |
| | 5 | Royalties | | | | | | |
| | | | (ı) Real | (11) Personal | | | | |
| | 6a | Gross Rents | | | | | | |
| | b | Less rental expenses | | | | | | |
| | С | Rental income or (loss) | | | | | | |
| | d | Net rental income | or(loss) | | | | | |
| | | | ı) Securities | (II) O ther | | | | |
| | 7a | Gross amount | 728,027 | (II) O tilel | | | | |
| | | from sales of assets other | | | | | | |
| | | than inventory | 027.006 | | | | | |
| | b | Less cost or other basis and | 927,906 | | | | | |
| | c | sales expenses Gain or (loss) | -199,879 | | | | | |
| | d | Net gain or (loss) | | | -199,879 | | | -199,879 |
| | | iver gam or (1033) | | . ► | | | | |
| | 8a | Gross income from events (not includ | | | | | | |
| Other Revenue | | \$ of contributions re | _ ported on line | | | | | |
| 듄 | | 1c) See Part IV, | line 18 | | | | | |
| ě Ž | | Attach Schedule G s | | | | | | |
| <u>.</u> | ь | Less direct exper | | | | | | |
| ¥ | c | Net income or (los | | | | | | |
| • | | | | <u>▶</u> | | | | |
| | 9a | Gross income from activities See par | | | | | | |
| | | Complete Schedule | | | | | | |
| | | exceeds \$15,000 | a | | | | | |
| | ь | Less direct exper | | | | | | |
| | c | Net income or (los | | | | | | |
| | | <u> </u> | | ▶ | | | | |
| | 10a | Gross sales of inv returns and allowa | inces . | | | | | |
| | - | less sait of | a Jacobs L | | | | | |
| | Ь | Less cost of good Net income or (los | | | | | | |
| | | Miscellaneous Re | | Business Code | | | | |
| | 11a | Filscenaneous Re | - Toniuc | Dasiness Code | | | | |
| | b | | | | | | | |
| | | | | | | | | |
| | C | | | | | | | |
| | d | All other revenue | | | | | | |
| | e | Total. Add lines 1: | | | | | | |
| | 12 | Total Revenue. A c 8c, | dd lines 1h, 2g, 3 | , 4, 5, 6d, 7d, | 55,799 | 225,659 | 0 | -169,860 |
| | | 9c, 10c, and 11e | | . ▶ | | | | |

Part IX Statement of Functional Expenses

| 4 | Section $501(c)(3)$ and $501(c)(4)$ orgall other organizations must complete column (A) but are not re | | | |)). |
|------------|---|--------------------|------------------------------|-------------------------------------|--------------------------------|
| | not include amounts reported on lines 6b, 7b, 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 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 salaries and wages | | | | |
| 8 | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | | | | |
| 10 | Payroll taxes | | | | |
| L1 | Fees for services (non-employees) | | | | |
| а | Management | | | | |
| b | Legal | | | | |
| С | Accounting | 2,100 | | | |
| d | Lobbying | | | | |
| е | Professional fundraising See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| g | Other | | | | |
| L2 | Advertising and promotion | | | | |
| L3 | Office expenses | 111 | | | |
| L 4 | Information technology | | | | |
| L5 | Royalties | | | | |
| L6 | Occupancy | | | | |
| L7 | Travel | 29,818 | | | |
| 18 | Payments of travel or entertainment expenses for any Federal, state or local public officials | | | | |
| L9 | Conferences, conventions and meetings | | | | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | | | | |
| 23 | Insurance | | | | |
| 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) | | | | |
| а | | 87,361 | | | |
| ь | BANK & INVESTMENT FEES | 12,856 | | | |
| c | UNION ELECTIONS | 2,704 | | | |
| d | TEMPORARY HELP | 149 | | | |
| f | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24f | 135,099 | | | |
| 26 | Joint Costs. Check I if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation | | | | |

| Part X | Balance | Sheet |
|--------|---------|-------|

| | | | | (A) Beginning of year | | (B) End of year |
|-------------------|-------|---|-----------|--------------------------|-----|--------------------|
| | 1 | Cash—non-interest-bearing | | 19,637 | 1 | 123,741 |
| | 2 | Savings and temporary cash investments | | 473,830 | 2 | 445,935 |
| | 3 | Pledges and grants receivable, net | | | 3 | |
| | 4 | Accounts receivable, net | | | 4 | |
| | 5 | Receivables from current and former officers, directors, trustees, key emp other related parties Complete Part II of Schedule L | loyees or | | 5 | |
| | 6 | Receivables from other disqualified persons (as defined under section 495 persons described in section 4958(c)(3)(B) Complete Part II of Schedule L | | | 6 | _ |
| | 7 | Notes and loans receivable, net | | | 7 | |
| | 8 | Inventories for sale or use | _ | | 8 | |
| ø, | 9 | Prepaid expenses and deferred charges | | | 9 | |
| Assets | 10a | Land, buildings, and equipment cost basis | | | | |
| ⋖ | _ | 10a | | | | |
| | Ь | Less accumulated depreciation Complete Part VI of Schedule D | | | 10c | |
| | 11 | Investments—publicly traded securities | | 824,928 | 11 | 669,419 |
| | 12 | Investments—other securities See Part IV, line 11 Complete Part VII of Schedule D | | | 12 | _ |
| | 13 | Investments—program-related See Part IV, line 11 Complete Part VIII of Schedule D . | | | 13 | |
| | 14 | Intangible assets | | | 14 | |
| | 15 | Other assets See Part IV, line 11 Complete Part IX of Schedule D | | 15 | | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | | 1,318,395 | 16 | 1,239,095 |
| | 17 | Accounts payable and accrued expenses . | | | 17 | |
| | 18 | Grants payable | | | 18 | |
| | 19 | Deferred revenue | | | 19 | |
| | 20 | Tax-exempt bond liabilities | | | 20 | |
| <u>.</u> | 21 | Escrow account liability Complete Part IV of Schedule D | | | 21 | _ |
| Liabilities | 22 | Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified | | | | |
| Ë | | persons Complete Part II of Schedule L | | 22 | | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | | 23 | |
| | 24 | Unsecured notes and loans payable | | | 24 | |
| | 25 | Other liabilities Complete Part X of Schedule D | | | 25 | |
| | 26 | Total liabilities. Add lines 17 through 25 | | 0 | 26 | 0 |
| \$ 0 0 | | Organizations that follow SFAS 117, check here ► ☐ and complete lines through 29, and lines 33 and 34. | 27 | | | |
| anc | 27 | Unrestricted net assets | | | 27 | |
| Balance | 28 | Temporarily restricted net assets | | | 28 | |
| <u> </u> | 29 | Permanently restricted net assets | | | 29 | |
| r Fund | | Organizations that do not follow SFAS 117, check here ▶ and complet lines 30 through 34. | e | | | |
| s or | 30 | Capital stock or trust principal, or current funds | | 0 | 30 | 0 |
| Assets | 31 | Paid-in or capital surplus, or land, building or equipment fund | | 0 | 31 | 0 |
| AS | 32 | Retained earnings, endowment, accumulated income, or other funds | | 1,318,395 | 32 | 1,239,095 |
| Net | 33 | Total net assets or fund balances | | 1,318,395 | 33 | 1,239,095 |
| Z | 34 | Total liabilities and net assets/fund balances | | 1,318,395 | 34 | 1,239,095 |
| | | | | | | |
| Pa | rt XI | Financial Statements and Reporting | | | | |

| Dowl VI | Financial | Ctatamanta | and Reporting |
|---------|-------------|------------|---------------|
| 7.11.5 | l Financiai | Statements | and Reporting |

| | | | Yes | No |
|----|---|----|-----|-----|
| | | | 165 | 140 |
| 1 | Accounting method used to prepare the Form 990 🔽 cash 🗆 accrual 🗀 other | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | 2a | | Νο |
| Ь | Were the organization's financial statements audited by an independent accountant? | 2b | Yes | |
| С | If "Yes" to lines 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 | | Νο |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | 3a | | Νο |
| ь | If "Yes," did the organization undergo the required audit or audits? | 3b | | |

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities)

- ◆ 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 990EZ, Part VI, line 47 (Lobbying Activities)

- ◆ 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 ILB. Do not complete Part ILA

| If the | , , , , | s," to Form 990, Part IV, Line 5 (Pr | | (ii)) Complete Fait IPD Do ii | ot complete i art II-A | | |
|--------|--|--|---|--|---|--|--|
| N a n | ne of the organization KA PUBLIC EMPLOYEES ASSOCIATION SUPERVISORY UNIT LOCAL 4900 | zations complete rait iii | | Employer iden 27-0028075 | tification number | | |
| Part | | oy all organizations exempt of the compact of the c | | | 527 | | |
| 1 | Provide a description of the or | ganızatıon's dırect and ındırect politic | cal campaign act | ıvıtıes ın Part IV | | | |
| 2 | Political expenditures | | | | \$ | | |
| 3 | V olunteer hours | | | | | | |
| Part | I-B To be completed to for Schedule C for d | oy all organizations exempt (| under section | 1 501(c)(3). (See the I | nstructions | | |
| 1 | Enter the amount of any excis | e tax incurred by the organization und | der section 4955 | | \$ | | |
| 2 | Enter the amount of any excise | n 4955 | \$ | | | | |
| 3 | If the organization incurred in | a section 4955 tax, did it file Form 4 | 720 for this year | ? | ☐ Yes ☐ No | | |
| 4a | Was a correction made? | | | | ┌ Yes | | |
| ь | If "Yes," describe in Part IV | | | | | | |
| Part | | oy all organizations exempt of some standard or some stan | under section | ı 501(c), except sect | ion 501(c)(3). | | |
| 1 | Enter the amount directly expe | ended by the filing organization for se | ction 527 exemp | ot function activities | \$ | | |
| 2 | Enter the amount of the filing of 527 exempt funtion activities | organization's internal funds contribut | ted to other orgai | nizations for section | \$ | | |
| 3 | Total of direct and indirect exe 1120-POL, line 17b | empt function expenditures Add lines | 1 and 2 and ent | er here and on Form | \$ | | |
| 4 | Did the filing organization file I | Form 1120-POL for this year? | | | ┌ Yes ┌ No | | |
| 5 | were made Enter the amount political contributions receive | nd Employer Identification Number (E paid and indicate if the amount was pa d and promptly and directly delivered action committee (PAC) If additional | aid from the filing to a separate po | organization's own internal Hitical organization, such as | l funds or were s a separate | | |
| | (a) Name | (b) Address | (c) EIN | (d) A mount paid from filing organization's internal funds If none, enter - 0 - | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | soo the instructions for Form 900 | Cat No E(| | Form 000 or 000 E7\ 200 | | |

d Grassroots non-taxable amount

f Grassroots lobbying expenditures

e Grassroots ceiling amount (150% of line d, column (e))

| P | art II-A To be completed by (election under sec | | | | | | 768 |
|----------|---|----------------------|--|-------------------|---------------|--|---|
| | Check If the filing organization | belongs to an affili | ated group | | | | |
| <u>B</u> | Check If the filing organization Limits on Lo (The term "expenditure | bbying Expend | litures— | | olly | (a) Filing Organization's Totals | (b) Affiliated Group Totals |
| 1a | Total lobbying expenditures to influe | nce public opinion | (grass roots lob | bying) | | | |
| ь | Total lobbying expenditures to influe | nce a legislative b | ody (direct lobby | yıng) | | | |
| c | Total lobbying expenditures (add lin | es 1a and 1b) | | | | | |
| d | Other exempt purpose expenditures | | | | | | |
| e | Total exempt purpose expenditures | (add lines 1c and 1 | d) | | | | |
| f | Lobbying nontaxable amount Entercolumns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000 | | taxable amount | | | | |
| | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% o | \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 | | | | |
| | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% o | | | | | |
| | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of | the excess over \$1 | .,500,000 | | | |
| | Over \$17,000,000 | \$1,000,000 | | | | | |
| | Grassroots nontaxable amount (ente | er 25% of line 1f) | | | | | |
| h | Subtract line 1g from line 1a Enter | 0- ıflıne g ıs more | than line a | | | | |
| i | Subtract line 1f from line 1c Enter - | 0- ıflıne fıs more t | han line c | | | | |
| j | If there is an amount other than zero section 4911 tax for this year? | on either line 1h o | r line 11, did the | organization file | Form 4720 rep | orting | ┌ Yes ┌ No |
| | (Some organizations tha columns below. | | on 501(h) el | ection do not | have to cor | | he five |
| | Lobb | ying Expendit | ures During | 4-Year Avera | ging Period | | |
| | Calendar year (or fisca beginning in) | l year | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) Total |
| _2a | Lobbying non-taxable amount | | | | | | |
| | Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | | |
| | : Total lobbying expenditures | | | | | | |

Schedule C (Form 990 or 990-EZ) 2008

| FC | | y organizations exempt und ler section 501(h)). (See the | | | | eu | r OI III | |
|-----|---|--|--|------------|-----------|-------|----------|----|
| | | | | (; | a) | | (b) | |
| | | | | Yes | No | 4 | A moun | nt |
| 1 | | nization attempt to influence foreign, to influence public opinion on a legis | The state of the s | | | | | |
| а | V olunteers? | | | | | | | |
| b | Paid staff or management (include | compensation in expenses reported | on lines c through i)? | | | | | |
| С | Media advertisements? | | | | | | | |
| d | Mailings to members, legislators, | or the public? | | | | | | |
| е | Publications, or published or broad | dcast statements? | | | | | | |
| f | Grants to other organizations for lo | obbying purposes? | | | | | | |
| g | Direct contact with legislators, the | eir staffs, government officials, or a l | egislative body? | | | | | |
| h | Rallies, demonstrations, seminars | , conventions, speeches, lectures, o | r any other means? | | | | | |
| i | Other activities If "Yes," describe | e ın Part IV | | | | | | |
| j | Total lines 1c through 1: | | | | | | | |
| 2a | | he organization to be not described i | n section 501(c)(3)? | | | | | |
| b | If "Yes" enter the amount of any ta | ax incurred under section 4912 | | | | | | |
| c | If "Yes" enter the amount of any ta | ax incurred by organization managers | s under section 4912 | | | | | |
| d | If the filing organization incurred a | a section 4912 tax, did it file Form 47 | 20 for this year? | | | | | |
| Par | t IIII-A To be completed b | y all organizations exempt (| ınder section 501(c)(4), se | ction | 501(| c)(5 |), or | |
| | section 501(c)(6). | (See the instructions for Schedi | ıle C for details.) | | | | | |
| 1 | Were substantially all (90% or mo | ore) dues received nondeductible by | nemhers? | | Г | 1 | Yes | No |
| 2 | · · · | house lobbying expenditures of \$2,0 | | | - | 2 | Yes | |
| 3 | • | yover lobbying and political expendit | | | - | 3 | 100 | No |
| | | y all organizations exempt i | | ction | 501(| c)(5 |). or | |
| | section 501(c)(6) i | if BOTH Part III-A, questions | 1 and 2 are answered "No' | ' OR i | | | | |
| | - | ered "Yes." (See the instruction | ns for Schedule C for details.) | | | | | |
| 1 | Dues, assessments and similar ar | | | . | 1 \$ | | | |
| 2 | expenses for which the section is | obying and political expenditures (do 527(f) tax was paid) | not include amounts of political | ' | | | | |
| а | Current Year | 327(1) tax was paid). | | | 2a \$ | | | |
| b | Carryover from last year | | | Ì | 2b\$ | | | |
| С | Total | | | ŀ | 2c \$ | | - | |
| 3 | Aggregate amount reported in sec | tion $6033(e)(1)(A)$ notices of nonde | ductible section 162(e) dues | | 3 \$ | | | |
| 4 | | nt on line 2c exceeds the amount on | | | | | | |
| | | ryover to the reasonable estimate of | nondeductible lobbying and politic | | 4 \$ | | | |
| 5 | expenditure next year? | olitical expenditures (line 2c total mi | nus 3 and 4) | - | 5 \$ | | | |
| | irt IV Supplemental Info | | ilus 3 aliu 4) | | э ֆ | | | |
| | | | Dort I B line 4 Dort I C line 5 | 4 D = -+ 1 | I D 1 | . 1 . | | |
| | o, complete this part to provide the desc | riptions required for Part I-A, line 1, onal information | Part I-B, line 4, Part I-C, line 5, and | ı Part I | I-B, IINE | 11 | | |
| | Ident if ier | Return Reference | Explana | tion | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

| Part IV Supplemental I | <u>nformation</u> | |
|------------------------|-------------------|-------------|
| Ident if ier | Return Reference | Explanation |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
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Schedule C (Form 990 or 990EZ) 2008

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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

Supplemental Financial Statements

Open to Public

| terna | Revenue Service | answered res, tore | onn 990, Fait 14, line 0, 7, 0, 9, 10, 11, 01 1 | 4. | Inspec | tion |
|----------|---------------------------------------|--|--|----------------|---------------------|-----------|
| | me of the organi | | | Employer i | dentification numb | er |
| | SKA PUBLIC EMPLOY SUPERVISORY UNIT | | | 27-00280 | 175 | |
| Pa | | | dvised Funds or Other Similar Fu | | | te if the |
| | organiz | zation answered "Yes" to Form 99 | | | | |
| | | | (a) Donor advised funds | (b) Fur | nds and other accou | unts |
| L | Total number a | · | | | | |
| | | tributions to (during year) | | | | |
| 4 | | nts from (during year) | | | | |
| + | | le at end of year | | | | |
| • | funds are the o | organization's property, subject to the | sors in writing that the assets held in dono organization's exclusive legal control? | | ☐ Yes | ☐ No |
| 5 | used only for c | | donor advisors in writing that grant funds r efit of the donor or donor advisor or other | nay be | √Yes | □ No |
| Pai | | | ıf the organization answered "Yes" to | Form 990 | Part IV, line 7. | • |
| | · | conservation easements held by the or | <u> </u> | | , | |
| | | ıon of land for publıc use (e g , recreatı | | nistorically i | mportantly land are | a |
| | Protection | n of natural habitat | Preservation of cer | tified histori | c structure | |
| | ☐ Preservati | ion of open space | | | | |
| 2 | • | s 2a-2d if the organization held a quali of the tax year | Ified conservation contribution in the form (| of a conserv | ation easement | |
| | | | | | Held at the End of | the Year |
| а | Total number | of conservation easements | | 2a | | |
| b | Total acreage | restricted by conservation easement: | s | 2b | | |
| c | Number of cor | nservation easements on a certified hi | storic structure included in (a) | 2c | | |
| d | Number of cor | nservation easements included in (c) a | acquired after 8/17/06 | 2d | | |
| 3 | Number of con: | servation easements modified, transfe | erred, released, extinguished, or terminated | by the orga | inization during | |
| | the taxable yea | ar ► | | | | |
| 1 | Number of stat | tes where property subject to conserva | ation assement is located by | | | |
| - | | • • • | | uone and | | |
| , | _ | f the conservation easements it holds? | g the periodic monitoring, inspection, violat ? | .ioris, and | ☐ Yes | ┌ No |
| 5 | | | cting and enforcing easements during the | | | |
| <i>'</i> | • | | ng, and enforcing easements during the yea | · | | |
| 3 | 170(h)(4)(B)(ı |) and 170(h)(4)(B)(II)? | (d) above satisfy the requirements of sect | | ☐ Yes | ☐ No |
| 9 | balance sheet, | • | onservation easements in its revenue and the footnote to the organization's financial : nents | • | , | |
| ar | t IIII Organ | izations Maintaining Collectio | ons of Art, Historical Treasures, on "Yes" to Form 990, Part IV, line 8. | r Other S | imilar Assets. | |
| La | If the organizat art, historical t | tion elected, as permitted under SFAS treasures, or other similar assets held | 116, not to report in its revenue statemer for public exhibition, education or researcl ancial statements that describes these ite | ın furtheraı | | е, |
| b | historical treas | · | 116, to report in its revenue statement ar public exhibition, education, or research in s | | • | |
| | (i) Revenues II | ncluded in Form 990, Part VIII, line 1 | | | ► \$ | |
| | (ii) Assets incl | luded in Form 990, Part X | | . | - \$ | |
| 2 | | • | orical treasures, or other similar assets for | | 1 | |
| | | nts required to be reported under SFA | | - | | |
| а | Revenues inclu | uded in Form 990, Part VIII, line 1 | | • | - \$ | |

b Assets included in Form 990, Part X

| Par | Organizations Maintaining Co | llections of Art | , His | tori | cal Treasur | es, or Othe | r Similar Asse | ts (co | ntınued) |
|----------------------------|---|-----------------------|--------------|---------|---|---|----------------------|-----------------|-----------|
| 3 | Using the organization's accession and othe items (check all that apply) | r records, check any | ofth | e foll | _ | _ | se of its collection | | |
| а | Public exhibition d Loan or exchange programs | | | | | | | | |
| b | Scholarly research e Other | | | | | | | | |
| c | Preservation for future generations | | | | | | | | |
| 4 | Provide a description of the organization's co | ollections and explai | ın hov | v they | further the org | janization's ex | empt purpose in | | |
| 5 | During the year, did the organization solicit of assets to be sold to raise funds rather than t | | | | | | | Yes | ┌ No |
| Par | Trust, Escrow and Custodial A Part IV, line 9, or reported an an | Arrangements. | Com | plete | e if the organi | | ered "Yes" to Fo | rm 99 | 90, |
| 1a | Is the organization an agent, trustee, custod included on Form 990, Part X? | ıan or other ınterme | dıary | for c | ontributions or | other assets n | ot | Yes | ∏ No |
| b | If "Yes," explain why in Part XIV and comple | te the following tabl | е | | | | | | |
| | | | | | | | A mou | nt | |
| С | Beginning balance | | | | | 1c | | | |
| d | Additions during the year | | | | | 1d | | | |
| е | Distributions during the year | | | | | 1e | | | |
| f | Ending balance | | | | | 1f | | | |
| 2a | Did the organization include an amount on Fo | orm 990, Part X, line | 21? | | | | Γ, | Yes | ∏ No |
| | If "Yes," explain the arrangement in Part XIV | | | | | | | | |
| Pa | rt V Endowment Funds. Complete | | | | | | | | |
| | | (a)Current Year | (b) | Prior Y | ear (c)Two | Years Back (d) | hree Years Back (e) | Four Ye | ars Back |
| la | Beginning of year balance | | | | | | | | |
| b | Contributions | | | | | | | | |
| с | Investment earnings or losses | | | | | | | | |
| d | Grants or scholarships | | | | | | | | |
| e | Other expenditures for facilities and programs | | | | | | | | |
| f | Administrative expenses | | | | | | | | |
| g | End of year balance | | | | | | | | |
| 2 | Provide the estimated percentage of the yea | r end balance held a | ıs | | | | | | |
| а | Board designated or quasi-endowment | | | | | | | | |
| ь | Permanent endowment | | | | | | | | |
| c | Term endowment - | | | | | | | | |
| 3a | Are there endowment funds not in the posses organization by | ssion of the organiza | ation 1 | that a | re held and adr | ministered for t | the | Yes | No No |
| | (i) unrelated organizations | | | | | | 3a(i) | | |
| | (ii) related organizations | | | | | | 3a(ii) | | |
| L | If "Yes" to 3a(II), are the related organizatio | · | | | | | 3b | | |
| ט | Describe in Part XIV the intended uses of th | e organızatıon's end | lowme | ent fu | | | | | |
| 4 | | | | _ | | | | | |
| 4 | t VI Investments—Land, Buildings | s, and Equipme | nt. S | ee F | orm 990, Par | t X, line 10. | | | |
| 4 | TINVESTMENTS—Land, Buildings Description of investment | s, and Equipme | nt. S | (; | orm 990, Par a) Cost or other sis (investment) | t X, line 10. (b)Cost or other basis (other) | (c) Depreciation | (d) Bo | ook value |
| 4 Par | | s, and Equipme | <u>nt. S</u> | (; | a) Cost or other | (b)Cost or other | (c) Depreciation | (d) Bo | ook value |
| 4 Par 1a | Description of investment | s, and Equipme | nt. S | (; | a) Cost or other | (b)Cost or other | (c) Depreciation | (d) Bo | ook value |
| 4 Par 1a b | Description of investment | s, and Equipme | nt. S | (; | a) Cost or other | (b)Cost or other | (c) Depreciation | (d) Bo | ook value |
| Par Par 1a b c | Description of investment Land | s, and Equipme | <u>nt. S</u> | (; | a) Cost or other | (b)Cost or other | (c) Depreciation | (d) Bo | ook value |
| Par 1a b c d | Description of investment Land | | | (a ba | a) Cost or other sis (investment) | (b)Cost or other basis (other) | (c) Depreciation | (d) Bo | ook value |

| Part VII | Investments-Other Securities. See | Form 990, Part X, line 1 | 2. | |
|---------------|---|--------------------------|----|--------------------------------------|
| | (a) Description of security or cateory (including name of security) | (b)Book value | | d of valuation ·year market value |
| Financial d | erivatives and other financial products | | | |
| | eld equity interests | | | |
| Other | | | | |
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| Total. (Colu | mn (b) should equal Form 990, Part X, col (B) line 12) 🕨 | | | |
| Down VIII | Investments Duesus Polated Co | a Farm OOO Dart V June | 12 | |
| Part VIII | Investments—Program Related. Se | | | d of valuation |
| | (a) Description of investment type | (b) Book value | | year market value |
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| Total (Colu | mn (b) should equal Form 990, Part X, col (B) line 13) | | | |
| Part IX | | ne 15. | | |
| | (a) Descri | | | (b) Book value |
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| Total. (Colu | ımn (b) should equal Form 990, Part X, col.(B) line . | 15.) | | |
| | Other Liabilities. See Form 990, Part 3 | | | |
| | (a) Description of Liability | (b) A mount | | |
| Federal Inc | come Taxes | | | |
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| Total. (Colum | mn (b) should equal Form 990, Part X, col (B) line 25) 🕨 | | 1 | |
| ,, | · · · · · · · · · · · · · · · · · · · | 1 | | |

| Par | t XI Reconciliation of Cl | <u>hange in Net Assets from Fori</u> | n 99 | 0 to F | inancial Stateme | nts | |
|-----------|--|---|--------------|-------------|-------------------|------------|---------------------|
| 1 | Total revenue (Form 990, Part | VIII, column (A), line 12) | | | | 1 | 55,799 |
| 2 | Total expenses (Form 990, Par | t IX, column (A), line 25) | | | | 2 | 135,099 |
| 3 | Excess or (deficit) for the year | eficit) for the year Subtract line 2 from line 1 | | | | | -79,300 |
| 4 | Net unrealized gains (losses) o | | | | | | |
| 5 | Donated services and use of fa | cilities | | | | 5 | |
| 6 | Investment expenses | | | | | 6 | |
| 7 | Prior period adjustments | | | | | 7 | |
| 8 | Other (Describe in Part XIV) | | | | | 8 | |
| 9 | Total adjustments (net) Add lir | nes 4 - 8 | | | | 9 | 0 |
| 10 | • • • | per financial statements Combine line | s 3 ar | nd 9 | | 10 | -79,300 |
| Part | | evenue per Audited Financial | | | ts With Revenue i | per R | eturn |
| 1 | Total revenue, gains, and othe | - | | | | | 55,799 |
| | statements | | | | | 1 | |
| 2 | | t not on Form 990, Part VIII, line 12 | | | | | |
| а | Net unrealized gains on invest | | • | 2a | | 4 | |
| Ь | Donated services and use of fa | | • | 2b | | _ | |
| С | Recoveries of prior year grants | | • | 2c | | 4 | |
| d | Other (Describe in Part XIV) | | • | 2d | | 1 | |
| e | Add lines 2a through 2d . | | | | | 2e | 0 |
| 3 | | | | | | 3 | 55,799 |
| 4 | | 0, Part VIII, line 12, but not on line 1 | | | | | |
| а | | uded on Form 990, Part VIII, line 7b | • | 4a | | 4 | |
| b | Other (Describe in Part XIV) | | | 4b | | _ | |
| С | Add lines 4a and 4b | | | | | 4c | 0 |
| 5 | | d 4c. (This should equal Form 990, Par | | | | 5 | 55,799 |
| Part 1 | | xpenses per Audited Financia audited financial statements | | teme | nts With Expense: | s per 1 | |
| 2 | | t not on Form 990, Part IX, line 25 | | | | ├ | 135,099 |
| | Donated services and use of fa | | | 2a | I | | |
| a b | | | | 2b | | 1 | |
| | Prior year adjustments | | • | 20 2c | | 1 | |
| C C | Other (Describe in Part XIV) | Part IX, line 25 | | | | ┨ | |
| d | , | | • | 2d | | ١,, | |
| e n | Add lines 2a through 2d | | • | | | 2e | 135,000 |
| 3 4 | Subtract line 2e from line 1 . | | • | | | 3 | 135,099 |
| 4 | | 0, Part IX, line 25, but not on line 1: | | 4- | 1 | | |
| a h | | uded on Form 990, Part VIII, line 7b | | 4a 4b | | 1 | |
| b | Add lines 4a and 4b | | • | 40 | | 4c | 0 |
| с 5 | | nd 4c. (This should equal Form 990, Pa | • •+ T li | no 10 \ | | 5 | 135,099 |
| | t XIV Supplemental Inf | | 11, 11 | 116 10) | | | 133,099 |
| Com | plete this part to provide the des | scriptions required for Part II, lines 3, 9, Part XII, lines 3, 9, Part XII, lines 2d and 4b, and Part XI | | | | art XIV | /, lines 1b and 2b, |
| | Ident if ier | Return Reference | | | Explanat | ion | |
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SCHEDULE O

(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

ALASKA PUBLIC EMPLOYEES ASSOCIATION

AFT SUPERVISORY UNIT LOCAL 4900

Inspection

Employer identification number

27-0028075

| ldentifier | Return Reference | Explanation |
|--------------------------------------|------------------|--|
| Form 990, Part VI, Section A, line 6 | | THIS IS A LABOR UNION AS SUCH IT IS MADE UP OF MEMBERS |

| ldentifier | Return Reference | Explanation |
|---------------------------------------|------------------|--|
| Form 990, Part VI, Section A, line 7a | | THE MEMBERS ELECT THE OFFICERS OF THE ORGANIZATION |

| ldentifier | Return Reference | Explanation |
|---------------------------------------|---------------------|---|
| Form 990, Part VI, Section A, line 10 | | A DRAFT OF THE 990 IS PROVIDED TO THE PRESIDENT FOR REVIEW BEFORE IT IS FILED |

| ldentifier | Return Reference | Explanation |
|---------------------------------------|---------------------|--|
| Form 990, Part VI, Section C, line 19 | | THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST |