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A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009

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

2008

Open to Public Inspection

B Che	eck ıf a	pplicable	Please	C Name of organization	TON INC		D Employer id	entification number
┌ Add			use IRS	ALASKA STATE EMPLOYEES ASSOCIAI	TON INC		92-01229	
┌ Nar	ne cha	inge	label or print or	Doing Business As ASEAAFSCME LOCAL 52			E Telephone n	umber
Init			type. See Specific				(907) 277-	5200
Ter			Instruc-	Number and street (or P O box if ma 1577 C STREET SUITE 201	ail is not delivered to street addre	ess) Room/suite	G Gross receip	ots \$ 5,045,058
_			tions.	Character and 7	ID 4		4	
☐ Am				City or town, state or country, and Z ANCHORAGE, AK 99501	IP + 4			
I App	olication	n pending						
				me and address of Principal Office	er		ıs a group retur	
				DUNCAN C STREET SUITE 201		affilia	ates?	⊤Yes ▼ No
			ANCH	ORAGE,AK 99501		- H(b) Are a	ll affiliates includ	led?
I Ta	x-exen	npt status	▽ 501(c) (5) ◀ (Insert no)	or 527	1		t See instructions)
J W	eb sit	e: ► www	v afscmelo	cal52 org		□	up Exemption N	
К Тур	e of or	ganızatıon	Corporat	tion trust association other		L Year of Fo	ormation 1987	State of legal domicile AK
Pa	rt I	Sumr	marv					
_ r u				e organization's mission or most	significant activities			
	-	•		REPRESENTING THE GENERAL	•	SU) FOR THE	STATE OF ALA	ASKA AND THE CITY
9			KA EMPLO			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Ē								
Ę.								
Governance	2	Check t	hıs box 🦵	ıf the organization discontinued i	ts operations or disposed o	of more than 2	25% of its asset	ts
တ္ 	3	Number	of voting i	members of the governing body (i	Part VI, line 1a)		. 3	15
مه دي د	4	Number	ofindeper	ndent voting members of the gove	erning body (Part VI, line 1	b)	. 4	15
Activities &	5	Total nu	ımber of er	nployees (Part V , line 2a)			5	28
들	6			olunteers (estimate if necessary)		6	200	
₫	7a	Total gr	oss unrela	ted business revenue from Part \		7a	0	
	1			iness taxable income from Form 9			7b	0
					Pri	or Year	Current Year	
	8	Contrib	outions and	d grants (Part VIII, line 1h)		4,171,539	4,719,926	
≗	9	Progra	m service	revenue (Part VIII, line 2g) .				0
Reven	10			me (Part VIII, column (A), lines :		70,341	-1,948	
æ	11			art VIII, column (A), lines 5, 6d		37,700	26,103	
	12	Total r	evenue—a	dd lines 8 through 11 (must equa	al Part VIII, column (A), lın	e		
		12)					4,279,580	4,744,081
	13			ar amounts paid (Part IX, column				0
	14		•	or for members (Part IX, column (•			0
Ø	15	Salarıe 10)	s, other co	ompensation, employee benefits	(Part IX, column (A), lines	5 –	2,208,997	2,496,434
Expenses	16a	•	cional fund	Iraising fees (Part IX, column (A)	lino 11a)		2,200,337	2,430,434
≖	_				, lille IIe)			
Д	b	•	_	penses, Part IX, column (D), line 25 0)		2 240 571	2 110 500
	17		•	(Part IX, column (A), lines 11a-1			2,249,571	2,110,590
	18			-add lines 13–17 (must equal Pa			4,458,568	4,607,024
<u>_ </u>	19	Revenu	ie iess ext	penses Subtract line 18 from line	12		-178,988	137,057
တက္ ကျကား						Beginn	ing of Year	End of Year
98.45 19.45 19.45	20	Total a	ssets (Pa	rt X, line 16)			2,576,688	2,492,930
Net Assets or Fund Balances	21	Total li	iabilities (f	Part X, line 26)			1,439,597	1,395,793
<u> ŽĪ</u>	22	Netas	sets or fur	nd balances Subtract line 21 from		1,137,091	1,097,137	
Pai	rt II	Signa	ature Bl	ock				
				erjury, I declare that I have examined th				
Dlaa		l.		correct, and complete Declaration of pre	eparer (other than officer) is base	1	, ,	iei ilas aliy kilowledge
Please Sign		**** Signa	** iture of office	er		2010 Date	-05-18	
Here		[2		
			S DUNCAN E or print nam	BUSINESS MANAGER ne and title				
		P	•		Date	Check If	Preparer's PTIN	(See Gen Inst)
D-' '		Preparer's		GETTY CPA		self-	, riepaiei s PIIN	(See Gen Inst)
Paid		-	<u> </u>			empolyed 🕨 🦳		
•	arer's	Firm's na if self-em	me (or your	s MIKUNDA COTTRELL & CO CPA'S			EIN Þ	_
Use (אווע		and ZIP + 4	3601 C STREET SUITE 600				
				ANCHORAGE, AK 99503			Phone no 🕨 (907) 278-8878
May	he IR	S discus	s this retu	irn with the preparer shown above	? (See instructions)			✓ Yes No

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

4e	Total program service	expenses \$	Must equal Part IX, Line 25, co.	lumn (B).	
4d	Other program service (Expenses \$	s (Describe in Schedule O) including grants	of\$)(Reve	nue \$)
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
_ _			· ·	,	,
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4a	(Code REPRESENTATION OF APPRO) (Expenses \$ OXIMATELY 8,500 STATE OF ALASKA GI	including grants of \$ ENERAL GOVERNMENTAL UNIT EMPLOYEES) (Revenue \$)
	Section 501(c)(3) and (others, the total expens	4) organizations and 4947 (a)(1 es, and revenue, if any, for each	.) trusts are required to report the a n program service reported	amount of grants	and allocations to
4	If "Yes," describe these		f the organization's three largest pr	ogram sarvicas h	v avnansas
3	Did the organization ceaservices?		ant changes in how it conducts any	program	┌ Yes ┌ No
	the prior Form 990 or 99 If "Yes," describe these	90-EZ?			┌ Yes ┌ No
2	-		services during the year which wer	e not listed on	
1	RESPECT IN THE WORKPLACE	REPRESENTATIVE FOR APPROXIMATELY FOR OUR MEMBERSHIP IN ADDITION	8,500 STATE AND MUNICIPAL EMPLOYEES, TO PROTECTING MEMBER RIGHTS THROU ERFORMANCE EVALUATIONS AND OTHER W	GH COLLECTIVE BAR	GAINING, WE SERVE AS AN

Part IV	Check	klist of	Required	Schedules
	CHEC	AIISL OI	<u>Reduiled</u>	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		Νο
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Νo
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Yes	
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? 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		Νο
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		N o
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,"			N o
10	complete Schedule D, Part IV	9		
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10		N o
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	Yes	
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		N o
Ь	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		N o
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		N o
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		N o
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>	17		N o
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		Νο
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		N o
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		N o
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		Νο
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</i> " <i>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

Pai	Tt 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 U.S. Information Returns. Enter -0- if not applicable			
	1a 7			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
С	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			
Ь	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.	2ь	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this			
	return?	3a		Νο
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		Νο
ь				
=	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, <i>Report of Foreign Bank and</i>			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5с		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		N o
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6b		
7	were not tax deductible?	6D		
	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or	7a		Νο
a	more?	/a		
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?	7с		<u> N o</u>
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		N o
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N o
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		N o
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h		Νο
8	required?			
Ū	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			
	excess business holdings at any time during the	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	I		
	Did the organization make any taxable distributions under section 4966?	9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities			
11	Section 501(c)(12) organizations Enter			
	Gross income from members or shareholders			
-	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)............ <mark>11b</mark>			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b			

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

Section A	. Governing	Body and	Management
		Doug and	I la lia gollioni

					Yes	No		
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below processes, or changes in Schedule O. See instructions.	, desc	ribe the circumstances,					
1a	Enter the number of voting members of the governing body	1a	15					
Ь	Enter the number of voting members that are independent	1b	15					
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		• •	2		No		
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3		No		
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?							
5	5 Did the organization become aware during the year of a material diversion of the organization's assets?							
6	6 Does the organization have members or stockholders?							
7a	a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?							
Ь	Are any decisions of the governing body subject to approval by members, stockhold	ers, o	rother persons?	7b		Νo		
8	Did the organization contemporaneously document the meetings held or written active year by the following	ons u	ndertaken during the					
а	the governing body?			8a	Yes			
Ь	each committee with authority to act on behalf of the governing body?			8b	Yes			
9a	Does the organization have local chapters, branches, or affiliates?			9a	Yes			
b	If "Yes," does the organization have written policies and procedures governing the a affiliates, and branches to ensure their operations are consistent with those of the o		• •	9b	Yes			
10	Was a copy of the Form 990 provided to the organization's governing body before it must describe in Schedule O the process, if any, the organization uses to review the			10		No		
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section Athe organization's mailing address? If "Yes," provide the names and addresses in Sc	,		11		No		

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 $$.	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		Νο
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		Νο
13	Does the organization have a written whistleblower policy?	13		Νo
14	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
b	Other officers or key employees of the organization?	15b		Νo
	Describe the process in Schedule O			
16a	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 copy 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. I another's website.
- 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. 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

SCOTT DUTTON ACCOUNTANT 1577 C STREET SUITE 201 ANCHORAGE,AK 99501 (907) 277-5200

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	ate any	OHIC	ei, u	mec	ισι, τι	uste	e of key employee		
Check this box if the organization did no	(B)	Posii t	tion (cheo	ck a		uste	(D) Reportable	(E) Reportable	(F) Estimated amount of other
(A) Name and Title	Average hours per week	Individual Trustee or Director	stitutional Trustee	Officei	Ke) emplojee	nest compensated Notee	Former	compensation from the organization (W- 2/1099MISC)	compensation from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations

Part VIII Continued

			(ition that	•				(D)	(5)	(F)
(A) Name and Title	(B) A verage hours per week	Individual Trustee or Director	Institutional Trustee	Office	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
1b Total							•	237,99	0	11,986

Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►2

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3		No
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		No

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	0

Part Statement of Revenue VIII

					(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or
9.9	1a	Federated camp	paigns 1a					514
aut Eut	ь		es 1b	4,672,926				
₽Š			ents 1c	<u> </u>				
म इ.स.	d		ations 1d					
Contributions, gifts, grants and other similar amounts		Government grants						
統	e	_		47,000				
美量	f	similar amounts no	ns, gifts, grants, and 1f t included above	47,000				
운항	g		butions included in					
걸	١.		- 1- 16)		4,719,926			
<u> </u>	h	Total (Add lines	s 1a-1f)		4,713,320			
<u> 9</u>	_			Business Code				
Æe⊓.	2a							
22	Ь							
- Ce	C							
Ž	d							
Ξ	e							
Program Serwce Revenue	f	All other progra	m service revenue			T		
<u>&</u>	g	Total Add lines	: 2a-2f					
	3		ome (including divident					
			nounts)	. ·	31,926			31,926
	4		tment of tax-exempt bond p					
	5			. 1				
		•	(ı) Real	(11) Personal				
	6a	Gross Rents						
	ь	Less rental						
	l c	expenses Rental income						
	d	or (loss)	me or (loss)					
	<u> </u>	Net rental incol	(i) Securities	(II) O ther				
	7a	Gross amount	267,103	(II) O thei				
		from sales of assets other						
	١.	than inventory Less cost or	200.077					
	Ь	other basis and	300,977					
	_c	sales expenses Gaın or (loss)	-33,874					
	d		s)		-33,874	-33,874		
	8a	Gross income fi events (not incl	rom fundraising uding					
Other Revenue		See Part IV , lın	reported on line 1c)					
ě			a					
<u>.</u>	ь	Less direct exp	penses b					
ŧ	С	Net income or (loss) from fundraising e	events 🗠				
•	9a	See part IV, lın	rom gaming activities e 19 ule G if total exceeds a					
	b c		penses b loss) from gaming activ	vities►				
	10a	Gross sales of returns and allo	nventory, less					
	ь	Less cost of go	oods sold b					
	С	Net income or (loss) from sales of inve	entory 🟲				
		Miscellaneous	Revenue	Business Code				
	11a	LEAVE BANK U	JTILIZATION	900,099	25,603	25,603		
	ь	MISCELLANEO	US	900,099	500	500		
	c							
	d	All other revenu	ne					
	u	Total. Add lines						
	12	Total Revenue.	Add lines 1h, 2g, 3, 4,	\$ 26,103 5,6d,7d,8c,	4,744,081	-7,771	0	31,926

Part IX Statement of Functional Expenses

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).							
Do ı	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 $\!$							
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	125,610						
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	1,648,562						
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	203,019						
9	Other employee benefits	369,793						
LO	Payroll taxes	149,450						
L1	Fees for services (non-employees)							
а	Management							
b	Legal							
c	Accounting							
d	Lobbying							
e	Professional fundraising See Part IV, line 17							
f	Investment management fees							
g	Other							
2	Advertising and promotion	16,407						
3	Office expenses							
4	Information technology							
5	Royalties							
6	Occupancy	185,993						
.7	Travel	32,533						
.8	Payments of travel or entertainment expenses for any Federal, state or local public officials							
9	Conferences, conventions and meetings	158,524						
0	Interest							
1	Payments to affiliates	1,217,742						
2	Depreciation, depletion, and amortization	35,972						
23	Insurance	21,001						
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	TELEPHONE	77,022			· · ·			
b	POSTAGE	57,981						
С	EXECUTIVE BOARD	43,086						
d	LOBBYIST & POLITICAL CO	41,342						
е	EQUIPMENT RENTAL	38,966						
f	All other expenses	184,021						
25	Total functional expenses. Add lines 1 through 24f	4,607,024						
26	Joint Costs. Check 🔽 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							

Dart V	Balance	Shoot
Part X	Balance	Sheet

					(A) Beginning of year			3) fyear
	1	Cash—non-interest-bearing			266,178	-		195,383
	2	Savings and temporary cash investments			219,165	2		308,862
	3	Pledges and grants receivable, net				3		
	4	Accounts receivable, net			100,234	4		78,616
	5	Receivables from current and former officers, directors, trustees, other related parties Complete Part II of Schedule L				5		
	6	Receivables from other disqualified persons (as defined under sepersons described in section 4958(c)(3)(B) Complete Part II of S	ction 4	1958(f)(1)) and		6		
	7	Notes and loans receivable, net				7		
	8	Inventories for sale or use				8		
20	9	Prepaid expenses and deferred charges			39,139	9		49,185
Assets	10a	Land, buildings, and equipment cost basis	10a	385,470				
4	b	Less accumulated depreciation Complete Part VI of		,				
		Schedule D	10b	270,255	· ·			115,215
	11	Investments—publicly traded securities	•		1,012,086			808,257
	12	Investments—other securities See Part IV, line 11 <i>Complete Par Schedule D</i>	t VII c	of	87,790	12		106,150
	13	Investments—program-related See Part IV, line 11 $\it Complete Part Set}$ of Schedule $\it D$.	rt VIII			13		
	14	Intangible assets				14		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D			762,794	15		831,262
	16	Total assets. Add lines 1 through 15 (must equal line 34)			2,576,688	16		2,492,930
	17	Accounts payable and accrued expenses .			408,356	17		264,713
	18	Grants payable				18		
	19	Deferred revenue	753,561	19		818,249		
	20	Tax-exempt bond liabilities			20			
<u>, o</u>	21	Escrow account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		21				
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
ï		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			277,680	25		312,831
	26	Total liabilities. Add lines 17 through 25			1,439,597	26		1,395,793
⋄		Organizations that follow SFAS 117, check here ► $\sqrt{}$ and complet through 29, and lines 33 and 34.	ete lin	es 27				
ä	27	Unrestricted net assets			1,136,851	27		1,096,890
Balance	28	Temporarily restricted net assets			240	28		247
돧	29	Permanently restricted net assets				29		
Fund		Organizations that do not follow SFAS 117, check here 🕨 🦵 and	comp	lete				
ō		lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .				31		
	32	Retained earnings, endowment, accumulated income, or other fun	ds			32		. ===
Ŋĕţ	33	Total net assets or fund balances			1,137,091	33		1,097,137
	34	Total liabilities and net assets/fund balances			2,576,688	34		2,492,930
Pa	rt XI	Financial Statements and Reporting						
							Yes	No

Deat VI	Financial Ctataments and Banautics	_
Part XI	Financial Statements and Reporting	1

1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	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?			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?			
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

If the Se Se If the Na	ction 501(c)(3) organizations tha ction 501(c)(3) organizations tha	t have filed Form 5768 (election under t have NOT filed Form 5768 (election et t have NOT filed Form 5768 (election es," to Form 990, Part IV, Line 5 (P zations complete Part III	r section 501(h)) c under section 501(omplete Part II-A Do not con (h)) Complete Part II-B Do n	mplete Part II-B	Δ
ALA	SKA STATE EMPLOTEES ASSOCIATION I	NC		92-0122915		
Par		by all organizations exempt te the instructions for Schedule			527	
1	Provide a description of the or	ganization's direct and indirect polit	ıcal campaıgn act	ıvıtıes ın Part IV		
2	Political expenditures				\$	35,50
3	V olunteer hours					300
Par	t I-B To be completed if for Schedule C for d	oy all organizations exempt etails.)	under section	501(c)(3). (See the i	nstructions	
1	Enter the amount of any excis	e tax incurred by the organization un	ider section 4955		\$	
2	Enter the amount of any excis	e tax incurred by organization manaç	gers under section	1 4955	\$	
3	If the organization incurred in	a section 4955 tax, did it file Form 4	1720 for this year	?	☐ Yes ☐	□ No
4a	Was a correction made?				☐ Yes ☐	□ No
ь	If "Yes," describe in Part IV					
Par		oy all organizations exempt for Schedule C for details.)	under section	ı 501(c), except sect	ion 501(c)(3).	ı
1	Enter the amount directly exp	ended by the filing organization for s	ection 527 exemp	t function activities	\$	
2	Enter the amount of the filing of 527 exempt funtion activities	organization's internal funds contribu	uted to other organ	nizations for section	\$	
3	Total of direct and indirect exe 1120-POL, line 17b	empt function expenditures Add line	s 1 and 2 and ent	er here and on Form	\$	
4	Did the filing organization file	Form 1120-POL for this year?			☐ Yes ☐	No.
5	were made Enter the amount political contributions receive	nd Employer Identification Number (paid and indicate if the amount was p d and promptly and directly delivered action committee (PAC) If additiona	baid from the filing d to a separate po	organization's own interna litical organization, such as	l funds or were s a separate	ıts
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's internal funds If none, enter - 0 -	(e) A mount of po contributions red and promptly a directly delivere separate polit organization If enter - 0-	ceive and ed to a tical

(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-
ASEA PAC	1577 C ST STE 201 ANCHORAGE,AK 99501	92-0122915		47,000

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—		oly	(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 line	es 1a and 1b)					
d	Other exempt purpose expenditures						
e	Total exempt purpose expenditures	(add lines 1c and 1	Ld)				
f	f Lobbying nontaxable amount Enter the amount from the following table in both columns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000 20% of the amount on line 1e						
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% o	of the excess over \$	500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% o	of the excess over \$	51,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of	f the excess over \$1	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	than line c				
j	If there is an amount other than zero section 4911 tax for this year?	on either line 1h c	or 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

Pai			ler section 501(c)(3) that had instructions for Schedule C for d			led	Form	
				(a)			(b)	
			,	Yes	No	'	A mour	nt
1		anızatıon attempt to ınfluence foreıgn t to ınfluence public opınıon on a legis						
а	Volunteers?							
ь	Paid staff or management (includ	le compensation in expenses reported	d on lines c through i)?					
c	Media advertisements?							
d	Mailings to members, legislators	, or the public?						
е	Publications, or published or broad	adcast statements?						
f	Grants to other organizations for	lobbying purposes?						
g	Direct contact with legislators, the	heir staffs, government officials, or a l	egislative body?					
h	Rallies, demonstrations, seminar	rs, conventions, speeches, lectures, c	or any other means?					
i	Other activities If "Yes," descri	be ın Part IV						
j	Total lines 1c through							
_	11				l			
2a		the organization to be not described	in section 501(c)(3)?			4		
	If "Yes" enter the amount of any		1 1013					
С.	·	tax incurred by organization manager				_		
		a section 4912 tax, did it file Form 4			E04/	<u> </u>	\	
Раг		. (See the instructions for Sched	under section 501(c)(4), sec	tion	201(c)(5), or	
	3001(0)(0)	. (See the mistractions for Senea	die e for details.)				Yes	No
1	Were substantially all (90% or m	nore) dues received nondeductible by	members?		ſ	1	Yes	
2		n-house lobbying expenditures of \$2,0			-	2		Νο
3		ryover lobbying and political expendit			-	3		Νο
Par			under section 501(c)(4), sec	tion	501(c)(5), or	<u> </u>
			1 and 2 are answered "No" (
	question 3 is ansv	wered "Yes." (See the instruction	ons for Schedule C for details.)					
1	Dues, assessments and similar a			L	1 \$			
2		obbying and political expenditures (de	o not include amounts of political					
	expenses for which the section	1 52/(f) tax was paid).			2a \$			
a b	Current Year Carryover from last year			-	2b \$			
_	Total				2c \$			
3		ection 6033(e)(1)(A) notices of nonde	eductible section 162(e) dues		3 \$			
4		unt on line 2c exceeds the amount or		-	<u>σφ</u>			
			f nondeductible lobbying and political		4 \$			
5	· ·	political expenditures (line 2c total m	inus 3 and 4)	- ⊢	5 \$			
Pa	rt IV Supplemental Inf		•	I	<u> </u>			
	• •	criptions required for Part I-A, line 1,	Part I-B, line 4, Part I-C, line 5, and F	Part II	-B, line	e 1ı		
	Ident if ier	Return Reference	Explanat id	on				
Part	*	Organizations Direct and Indirect Political Campaign Activities	· · · · · · · · · · · · · · · · · · ·			anızed	to	

Part IV Supplemental Information					
Ident if ier	Return Reference	Explanation			

Schedule C (Form 990 or 990EZ) 2008

OMB No 1545-0047

2008

Open to Public Inspection

SCHEDULE D (Form 990)

.

Department of the Treasury

► 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.

Supplemental Financial Statements

Employer identification number Name of the organization ALASKA STATE EMPLOYEES ASSOCIATION INC 92-0122915 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if 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) 3 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 □ No 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? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 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 importantly land area Preservation of certified historic structure Protection of natural habitat 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 2a Total number of conservation easements h 2b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 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 🕨 7 A mount 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 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.

- 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

For Paperwork Reduction Act Notice, see the Intructions for Form 990

- >

(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

	Organizations Maintaining C	•			•			ontinued)
3	Using the organization's accession and oth items (check all that apply)	er records, check any of th	ne fol	lowing that are	a sıgnıfıcant u:	se of its collection	1	
а	Public exhibition	d	Γ	Loan or exch	ange programs			
b	Scholarly research	e	Γ	Other				
c	Preservation for future generations							
4	Provide a description of the organization's of Part XIV	collections and explain ho	w the	y further the o	rganızatıon's ex	empt purpose in		
5	During the year, did the organization solicit	or receive donations of ar	t, hıs	torical treasur	es or other sım			_
	assets to be sold to raise funds rather than	· · · · · · · · · · · · · · · · · · ·					Yes	∏ No
Par	Trust, Escrow and Custodial Part IV, line 9, or reported an a				nization answ	ered "Yes" to Fo	orm 9	90,
1a	Is the organization an agent, trustee, custo included on Form 990, Part X?	odian or other intermediary	for c	ontributions o	r other assets r		Yes	┌ No
b	If "Yes," explain why in Part XIV and comp	lete the following table						
					-	A mou	ınt	
c	Beginning balance				1c			
d	Additions during the year				1d			
e	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on I					Г	Yes	│ No
	If "Yes," explain the arrangement in Part XI							
Pai	t V Endowment Funds. Complete)Prior				\ Four V	ears Back
1a	Beginning of year balance	(a)Curient feat (b	PHOL	real (C)IWO	reals back (u)	Tillee feats back (e)roul t	ears back
ь	Contributions							
c	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 ye	ar end balance held as						
а	Board designated or quasi-endowment 🕨							
b	Permanent endowment 🕨							
с	Term endowment ▶							
3a	Are there endowment funds not in the posse	ession of the organization	that	are held and ac	Iministered for	the		
	organization by					- 45	Yes	No
	(i) unrelated organizations					3a(i)		
ь	(ii) related organizations					3a(ii)	<u> </u> 	<u> </u>
4	Describe in Part XIV the intended uses of t	·						<u> </u>
	t VI Investments—Land, Building				rt X line 10			
		go, and Equipment S		a) Cost or other	(b)Cost or other			
	Description of investment			sis (investment)	basis (other)	(c) Depreciation	(d) B	ook value
1a	_and							
ь	Buildings)		
	_easehold improvements							
	Equipment		\vdash					
	 24hau		-		385,470	270,255		115,215
	. Add lines 1a-1e (Column (d) should equal i), line	10(c).)				115,215
	((() = =)4440.)	, , , , , , , , , , , , , , , , , , , ,	,	. , ,	-	Schedule D (F	Form 9	

Part VIII Investments—Other Securities. See	Form 990, Part X, line 1		
(a) Description of security or cateory	(b) Book value		d of valuation
(including name of security)		Cost or ena-or-	year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Total (column (b) should equal from 330, fall N, col (b) line 12)			
Part VIII Investments—Program Related. Se	e Form 990, Part X, line	13.	
			d of valuation
(a) Description of investment type	(b) Book value		year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III (a) Descrip			(h) Paak value
	ption		(b) Book value
DEPOSITS			13,781
BUSINESS LEAVE BANK (HELD BY STATE OF ALAKSA)			817,481
Total. (Column (b) should equal Form 990, Part X, col.(B) line	15.)		831,262
Part X Other Liabilities. See Form 990, Part X	(, line 25.		
(a) Description of Liability	(b) A mount		
Federal Income Taxes			
PAYROLL AND RELATED LIABILITIES	306,724		
OTHER LIABILITIES	6,107		
OTHER EIABIEITIES	0,107		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	312,831		

	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	ts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	4,744,081
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	4,607,024
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	137,057
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	-177,011
9	Total adjustments (net) Add lines 4 - 8	9	-177,011
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-39,954
	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		· · · · · · · · · · · · · · · · · · ·
1	Total revenue, gains, and other support per audited financial statements	1	4,568,716
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		· · · · · · · · · · · · · · · · · · ·
а	Net unrealized gains on investments		
ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-171,245
3	Subtract line 2e from line 1	3	4,739,961
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	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	4,120
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	4,744,081
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Ret	
1	Total expenses and losses per audited financial statements	1	4,608,670
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
Ь	Prior year adjustments		
с	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	5,766
3	Subtract line 2e from line 1	3	4,602,904
4	A mounts 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		
Ь	Other (Describe in Part XIV)	_	
С	Add lines 4a and 4b	4c	4,120
5	LOTAL EXPENSES AND LINES SAND ACTURIS SHOULD EDUAL FORM 990 Part Liline 18 1	5	4,607,024

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Return Reference	Explanation
Part XI, Line 8 - O ther Adjustments		NET UNREALIZED INVESTMENT GAINS OR (LOSSES) - 177011
Part XII, Line 2d - Other Adjustments		refunds/losses netted against revenue 5766
Part XII, Line 4b - Other Adjustments		investment fees netted against revenue 4120
Part XIII, Line 2d - Other Adjustments		refunds/losses netted against revenue 5766
Part XIII, Line 4b - Other Adjustments		Investment fees netted against revenue 4120

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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	n	Employer identification number
ALASKA STATE EMPLOYEES AS	SOCIAITON INC	
		02-0122015

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		WE ARE A MEMBERSHIP ORGANIZATION, OPERATING FOR THE BENEFIT OF OUR MEMBERS

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		The members elect the EB via a simple majority vote, they do not need to approve action take by the board unless it is specically spelled out in the constitution

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		Accountant performs a review by comparing the info in the 990 to the Audited financial tatements, which are also compared to the Trial Balance that make up the entities being rolled into the financial statements

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		Governing Documents and Conficts of Interest are ONLINE and on our WEBPAGE - the financial statements are available for inspection in our offices - this is per the executive board policies

ldentifier	Return Reference	Explanation	
		Board of Directors, Chapter Officers, Committee Members, Bargaining Team, Volunteer Member Organizors etc	