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## **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)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

benefit trust or private foundation)

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

• Inspection

<u>A</u>	For th	ne 2009 ca	alendar	rear, or tax year beginning January 1, 2009 , 2009, and ending Dece	embe	r 31	, 20 09			
В	Check if	applicable	Please	C Name of organization American Postal Workers Union #0735	D	Employ	er identification number			
$\overline{}$		change	use IRS label or	Doing Business As	7	48	0802662			
$\overline{}$	Name c	_	print or	Number and street (or P O box if mail is not delivered to street address) Room/suite	E	Telepho	one number			
	Initial re	_	type See	PO Box 12190	$\perp$ ( ;	316)	945-9430			
_	Termina		Specific Instruc-	City or town, state or country, and ZIP + 4						
$\overline{}$		ed return	tions.	Wichita KS 67277-2190	G Gross receipts \$ 28					
		on pending	F Nam	e and address of principal officer Chirstine L Pruitt			ceipts \$ 286,770 for affiliates \(^2\)\text{Yes} \( \vec{V} \) No			
_	, ibbiioaii	on pending	6920 P	uchla Wiehite VC 67200	_	•	ncluded? Yes No			
T	Tax-ex	empt status		137 (12)			list (see instructions)			
J	Webs	ıte: ▶	<u> </u>	H(c) Group			•			
ĸ		organization	Corpo	ation ☐ Trust ☐ Association ☑ Other ► Union L Year of formation 2009			legal domicile KS			
_	art I	Summ					1.5			
	T			he organization's mission or most significant activities: Collective Barg	ainin	a to S	Secure Better Worki			
	'	Drieny de	CBCITEC	The organization's mission of most significant activities.	• • • • • •	.9				
e	'									
Activities & Governance	'									
Ver	_ '	Charletter	. hav. b. [	if the organization discontinued its operations or disposed of more than 25% of its net as						
ဒိ	2				sseis. I	2	•			
≪ ≪	3			members of the governing body (Part VI, line 1a).		3	8			
Ë	4			endent voting members of the governing body (Part VI, line 1b)		4	0			
Ž	5			employees (Part V, line 2a)		5	29			
Ą	1			volunteers (estimate if necessary)		6	0			
				ated business revenue from Parts (HI) column (0) line 12		7a	0			
_	b	Net unre	lated bu	siness taxable income from Form 990-T, line 34		7b	0			
				Prior'			Current Year			
<u>a</u>	8	Contribut	tions an	d grants (Part VIII, line 1段.). JUL. <b>20</b> . 2010 . [ ]		7302	280413			
Revenue	9	Program	service	revenue (Part VIII, line 2b)	7	7740	6990			
ě	10			ne (Part VIII, column (A), lines 3, 4-and 7d)	2	2065	1378			
Œ	11	Other rev	venue (F	art VIII, column (A), lines 5, 6d, 8c=9c, toc land 11e)	4	1750	3486			
	12	Total reve	enue-a	d lines 8 through 11 (must equal Part VIII, column (A), line 12 )	281	857	292267			
	13	Grants a	nd sımıl	ar amounts paid (Part IX, column (A), lines 1-3)	2	2447	1663			
				or for members (Part IX, column (A), line 4)	16	3299	16301			
Ses	15			158	3887	163431				
Expenses	16a			npensation, employee benefits (Part IX, column (A), lines 5–10) raising fees (Part IX, column (A), line 11e)		0	0			
Ä	b			expenses (Part IX, column (D), line 25)	<b>167</b>	24.				
	1 -		_	Part IX, column (A), lines 11a-11d, 11f-24f)	99	520	105375			
				Add lines 13–17 (must equal Part IX, column (A), line 25).	277	153	286770			
				enses Subtract line 18 from line 12		1704	5497			
G 8	ß			Beginning of			End of Year			
	20	Total acc	ote (Pai	t X, line 16)		592	145090			
Ass, Ba	20		•	· · · · · · · · · · · · · · · · · · ·		435	6522			
Net/Assets	21 22			art X, line 26)		156	138568			
Ģ	art II		ature l			,130	130300			
5	المستبية			perjury, I declare that I have examined this return, including accompanying schedules and state	ements	s. and to	the best of my knowledge			
₹		and belie	it is true	, correct, and complete Declaration of preparer (other than officer) is based on all information	n of w	hich pre	parer has any knowledge			
⊋.	an		1/2	made My Stylle h		7/	17 /1/			
10.	yıı Xo	Sign	ature of o	ficer Di	ate		107.0			
٣	-	11/27	700	em HORSCH SECTION						
Ţ	Ĺ	Type	or print i	ame and title						
숡	gn ere	1,	<del></del>	Date Check if	Bron	araric is	dentifying number			
2		Preparer' signature		self-		instruct				
Paid signature employed L										
Preparer's Firm's name (or yours )										
	e Only	ıf self-em	iployed),	Lit	<u> </u>	:				
_			and ZIP +	- · · · · · · · · · · · · · · · · · · ·	no 🕨	(	)			
Ma	ay the	IRS disci	uss this	return with the preparer shown above? (see instructions)		<u> </u>	. Yes No			
Fο	r Priva	cy Act an	d Paper	vork Reduction Act Notice, see the separate instructions. Cat No	11282\	1	Form <b>990</b> (2009)			

Par	Statement of Program Service Accomplishments
1	Briefly describe the organization's mission. COLLECTIVE BARGAINING TO SECURE BETTER WORKING CONDITIONS
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code: 501 (c) (5)) (Expenses \$ including grants of \$ ) (Revenue \$ )  COLLECTIVE BARGAINING - Represented postal workers in grievance arbitration procedure, negotiated local agreements and numerous meetings with postal management to improve working conditions.
4b	(Code: 501 (c) (5)) (Expenses \$ including grants of \$ ) (Revenue \$ )
עד	Education: Published supplement to the Plaindealer. Trained arbitration advocates, provided legislative
	information to members, conducted and participated in seminars and national conventions.
4c	(Code: 501 (c) (5)) (Expenses \$ including grants of \$ ) (Revenue \$
	(Code: 501 (c) (5)) (Expenses \$ including grants of \$ ) (Revenue \$ )  Good & Welfare: Assisted members with health plan and OWCP claims. Provided monitary assistance.
	Organization: Provided program and information packets for new members. Participated with Wichita Labor Federation. Held monthly meetings
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )
4 -	Tabal numerum namina aynanasa

**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		>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		<b>✓</b>
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		<b>✓</b>
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		✓
6	Did the organization maintain any donor advised funds or any similar funds or 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	:	✓
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		<b>√</b>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8_		✓
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		✓
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10		✓
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Wed treet	<b>✓</b>
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	1		
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	2.7		
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12		<b>✓</b>
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			7.00
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$ . Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		<b>√</b>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i> .	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II .	15		✓
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? If "Yes," complete Schedule F, Part III	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
20	If "Yes," complete Schedule G, Part III	19 20		<b>✓</b>

Checklist of Required Schedules (continued)

	,		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		✓
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		<b>√</b>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.	24a		<b>√</b>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
	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		<b>√</b>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  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	24d 25a		<b>&gt;</b>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	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		✓_
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<b>√</b>
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<b>✓</b>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		<b>√</b>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		- <b>/</b>
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		1
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		1
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		✓
37	Did the organization conduct more than 5% 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		<b>√</b>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	<b>√</b>	<del>`</del> -

Pai	Statements Regarding Other IRS Filings and Tax Compliance			<u> </u>
			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	)		
b	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	. Salada	as desc
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	)		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓.	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			. 3,
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		<b>√</b>
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	<u> </u>	<u> </u>
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		1
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.	94.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>V</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	-	<b>-</b>
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		<b>V</b>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	4, 1240	7 30
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	94	<b>√</b>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		✓
	If "Yes," indicate the number of Forms 8282 filed during the year	- 21:		r . Š
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	Mainta'	<b>√</b>
f -	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f 7g	<del>                                     </del>	<b>V</b>
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	, <del>9</del>	_	
	required?	7h	· ·	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		342	
а	Did the organization make any taxable distributions under section 4966?	9a	<u> </u>	-
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No. on
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	1		
11	Section 501(c)(12) organizations. Enter			ob ne
ii a	Gross income from members or shareholders			2
b	Gross income from other sources (Do not net amounts due or paid to other sources against			1
_	amounts due or received from them.)			
	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 year.	12a		in the

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body Enter the number of voting members that are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 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 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a material diversion of the organization's assets? 5 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a 10a Does the organization have local chapters, branches, or affiliates? b If "Yes," does the organization have written policies and procedures governing the activities of such chapters. 10b affiliates, and branches to ensure their operations are consistent with those of the organization? Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11 . . . . . Q 3 11A Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give 12b rise to conflicts? . c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this is done 13 Does the organization have a written whistleblower policy? 14 Does the organization have a written document retention and destruction policy? 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? a The organization's CEO, Executive Director, or top management official . . . 15a 15b **b** Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a . . . . . . 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 List the states with which a copy of this Form 990 is required to be filed ► Kansas Section 6104 requires an organization to make its Forms 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. ☐ Another's website ☑ Upon request ☐ Own website 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.

State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Christine L Pruitt 6920 Pueblo Wichita KS 67209 316 945 9430

## 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. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

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

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 not compared to the	ompensate	any o	curre	ent	offi	cer, d	lirec	tor, or trustee.		
(A)						(D)	(E)	(F)		
Name and Title	Average	Position (check all that apply)				that ap		Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Bryan, Cindy K	3							4081	0	511
Director of Organization	3			✓			<u> </u>	4061	0	311
Hendrix, Paul A	0			` .				443	o	613
Director of Mechanization		-		✓	<u> </u>		<u> </u>	,		
Hoesch, Janice M Secretary/Treasurer	0			✓				382	0	996
Jobe, Kelly L	4							6151	0	1089
Installation Director				✓	<u> </u>			0131		
Pruitt, Christine L President	40			✓				81133	0	2326
Reed, Felicia D Executive Aide	1			<b>√</b>				1176	0	3069
Tate, Darrell D	2							2885	0	812
Vice President Thompson, Rita L	0			<b>√</b>				231	0	E74
Clerk Craft Director				✓				231	0	574
Underwood, Wm C Maintenance Craft Director	0			1				288	0	851
						-				<del></del>

на	Section A. Officers, Directors, 1rt		/ Emp	loy			d Higi	nesi			ontinued)
	· (A)  Name and title	(B)	Boot	nn (4	-	C)	that ap	-1.3	(D)	(E)	(F)
	)	Average hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
						l .					
1b	Total	<u> </u>						<b>•</b>	96,770	(	10,8410
	Total number of individuals (including but in reportable compensation from the organization)		to the	ose ——	liste	ed a	above)	) wh	o received mo	ore than \$100,0	Yes No
3	Did the organization list any <b>former</b> office employee on line 1a? If "Yes," complete S							уеє	e, or highest c	ompensated 	3 🗸
4	For any individual listed on line 1a, is the state organization and related organizations individual.	greater tha	n \$15								4
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue	comp	oen: S <i>ch</i>	satio edu	on f ile J	rom a	any <i>uch</i>	unrelated org	anization for	5 🗸
Se	ction B. Independent Contractors										
1	Complete this table for your five highest compensation from the organization.	ompensate	d ind	epe	nde	ent c	contra	ctor	s that received	d more than \$1	100,000 of
	(A) Name and business add	dress							(B) Description of s	ervices	(C) Compensation
											<del></del>
_											- <del>-</del>
2	Total number of independent contractors (i					to	those	liste	ed above) who	received	

L an	₩.								
	To a					(A)	(B)	(C)	(D)
				á		Total revenue	Related or exempt	Unrelated business	Revenue excluded from tax
4				100			function	revenue	under sections
S	x negoverno	the annual contract of the second	10 1 200 p. 2000 mm 2000 2000 2000 2000 2000 2000	1a	0	) 	revenue		512, 513, or 514
grants	ì	Federated campaigns					32.5		live:
tributions, gifts, grants other similar amounts	ł	Membership dues		1b	280413		4.		
gifts, Ilar an	С	Fundraising events .		1c	0				14
ig ja	d	Related organizations	.	1d	0		l de la		
ii s	e	Government grants (contri	ibutions).	1e	0			(4.00 E	
ë ₹	f All other contributions, gifts, grants,				1.				
Ē.		and similar amounts not inclu-		1f	0		13		
눌음	g	Noncash contributions include		\$	0				
Contributions, and other sim		Total. Add lines 1a-1f		. Ψ		280413		and the second second second second	Paragraph 1
	<del>                                     </del>	<u> </u>			Business Code	PC 4	(*)22.53.00.00.00.00.00.00.00.00.00.00.00.00.00	1-10-10-10-10-10-10-10-10-10-10-10-10-10	V 302 37
ž	_	New Member Dues Re	ehates			2535			
eve	2a	Reimbursed AFL-CIO	. <i> </i>				<del> </del>		
Program Service Revenue	b	Reinibursed AFL-CIO	Dues			4455			
Š	С								
Ser	d								
Ē	е								
gra	f	All other program service	ce revenue			0			
2	g	Total. Add lines 2a-2f			>	6990	4.1	R-II	, ± 4.5
	2	Investment income (inc	Judana diwa	ande	intorest and				
	3				_	1378	}	}	
	١.	•				0			
	4	Income from investment of	ı tax-exempi	bone	proceeds	- 0			
	5	Royalties	(i) Real	·-	(ii) Personal	U ACROSS			385497
	1		(I) Real		(II) Personal				
	6a	Gross Rents .	ļ	0	0		1 1		
	b	Less: rental expenses		0	0	<b>2</b> 2			
	С	Rental income or (loss)		0	0			4.	4. 7. 1
	d	Net rental income or (lo	oss)		<u> ▶</u>	0			
	79	Gross amount from sales of	(i) Securities	S	(II) Other	4.7		10 Marie 1 - 2	
	' "	assets other than inventory		0	0			100	5 1 *** EA
		•				100	1.00	t A	
	p	Less, cost or other basis			0		<b>新</b>	14	
		and sales expenses		<u> </u>	0	154 754			
		Gain or (loss)	L			7 2 2 2 2		and the second	
	a	Net gain or (loss)		•		U STANDER		8 8 8 8 8 8 8 7 5 7 A 7 A	
ne	8a	Gross income from	fundraisin	g					
evenue		events (not including \$		-					
ě		of contributions reported	d on line 1c	).		18.0			
Œ		See Part IV, line 18	•	а	0	10 m			1.0
þe	b	Less direct expenses		b	0		5.00	4 / 2	
Other		Net income or (loss) fro	om fundraisi	ng e	vents 🕨	0			
-				_		Andrew Co.			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	ya	Gross income from gam	_		0				1
		See Part IV, line 19 Less: direct expenses.		a	0		1.0	F-1	10 4 4 12
		Net income or (loss) from		b activ		0		(a) (22 Cont.)	C. M. C.
						U	7.00		
	10a	Gross sales of inve		s		(a.17) 7 12			e di
		returns and allowances		а	0			1	
		Less: cost of goods so		b	0	W 4	46.00	12.71	A4 (1) 10 10 10 10 10 10 10 10 10 10 10 10 10
	_ c	Net income or (loss) fror		vento	ory 🕨	0			
		Miscellaneous Reve	enue		Business Code			1 1 1 1 T	
	11a	Reimbursed Expense	:S		2612				
	þ						·		
	C	AH 13			874				
	d	All other revenue		•		2400	The second second	GF 2000 CONTRACTOR	Está a ses
	1 '	Total. Add lines 11a-1			🏲	3486	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	23(25)-24-24	A CONTRACTOR OF THE PARTY OF TH
	12	Total revenue. See ins	structions.		👱	292267	ļ	ļ	j.

### Part IX Statement of Functional Expenses

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

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

				p	(-), (-).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0	0	948 - 12 W	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	1663	1663		
3	Grants and other assistance to governments, organizations, and individuals outside the				To gather to
	U.S. See Part IV, lines 15 and 16 .	0	0		
4	Benefits paid to or for members	16301	16301	**************************************	
5	Compensation of current officers, directors, trustees, and key employees	107611	107611		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	0	o		1
-	persons described in section 4958(c)(3)(B) Other salaries and wages	40996	40996	V	
7	Pension plan contributions (include section 401(k)		40000		
8	and section 403(b) employer contributions)	4407	4407		
9	Other employee benefits	0	0		
10	Payroll taxes	10417	10417	V	
11	Fees for services (non-employees):		_		
а	Management	0	0		·
	Legal	0	0		
	Accounting	0	0	<del></del>	
-	Lobbying	I			
	Professional fundraising services See Part IV, line 17 Investment management fees	0	0	File to the complete to a few to sent to the top the	<del></del>
	Other	0	0		
_	Advertising and promotion	0	0		
13	Office expenses	12719	12719		
14	Information technology	0	0		
15	Royalties	0	0		· · · · · · · · · · · · · · · · · · ·
16	Occupancy	15955 0	15955		·
17	Travel		<u> </u>		
18	Payments of travel or entertainment expenses	11534	11534		
19	for any federal, state, or local public officials Conferences, conventions, and meetings.	27501	27501		
19 20 ·	Interest	0	0		
21	Payments to affiliates	22984	22984		
	Depreciation, depletion, and amortization.	4914	4914		-
23	Insurance	0	0	ar voranakom erinteka eza	
24	Other expenses. Itemize expenses not			100	
	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
_	Marketing	3475	3475	**************************************	Turper 17, 2 1, 40 1, 42 ms. 1 2 7 40 198000 m. 4 100
a b	Plaindealer (newsletter)	6293	6293		•
c		0	0		
d		0	0		
е	·	0	0		
f	All other expenses	0	<del></del>		
25	Total functional expenses. Add lines 1 through 24f  Joint costs. Check here ▶ ☐ If following	286770	286770		
26	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet	_ <del></del>		
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing	17447	1	26524
	2	Savings and temporary cash investments	67829	2	69163
	3	Pledges and grants receivable, net	0	_3	0
	4	Accounts receivable, net	0	4	0
	5	Receivables from current and former officers, directors, trustees, key		3	
		employees, and highest compensated employees. Complete Part II of		gold Z	
		Schedule L	0	5	0
	6	Receivables from other disqualified persons (as defined under section		1000	25745 B. St. St.
١		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L	0	6	n
w	7	Notes and loans receivable, net	0	7	0
Assets	7	, , , , , , , , , , , , , , , , , , , ,	0		0
AS.	8	Inventories for sale or use	0	9	
_	9	Prepaid expenses and deferred charges		- 2 m	
	10a	Land, buildings, and equipment book of			
	_	other basis. Complete Fait VI of Concadio 2	50116	100	45202
	b	Loos, about rate of deproduction	30110	$\vdash$	45203
	11	Investments—publicly traded securities		11	0
	12	Investments—other securities. See Part IV, line 11	4200	-	4200
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	139592	_	145090
	17	Accounts payable and accrued expenses	4435		6522
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
Liabilities	22	Payables to current and former officers, directors, trustees, key		7.2	
ap		employees, highest compensated employees, and disqualified			
===		persons, Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties .	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities. Complete Part X of Schedule D	0	25	
	26	Total liabilities. Add lines 17 through 25	4435	26	6522
		Organizations that follow SFAS 117, check here ▶ □ and			
ces		complete lines 27 through 29, and lines 33 and 34.			
a	27	Unrestricted net assets	27057	27	36187
Bal	28	Temporarily restricted net assets	58219	28	59500
ᇢ	29	Permanently restricted net assets	54316	29	49403
Fund Balanc		Organizations that do not follow SFAS 117, check here ▶ □	F 69 14 THE TOTAL		
		and complete lines 30 through 34.			
Net Assets or	30	Capital stock or trust principal, or current funds	0	30	0
set	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	0	32	0
et e	33	Total net assets or fund balances	139592	33	145090
Z	34	Total liabilities and net assets/fund balances	144027	34	151612
	<del> :</del>			<u> </u>	- 000 (*****

Par	TXI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990:   Cash   Accrual   Other	\$	X.(X)	22.00
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		✓
b	Were the organization's financial statements audited by an independent accountant?	2b		_
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	***************************************	
	If the organization changed either its oversight process or selection process during the tax year, explain in		-20	
	Schedule O.	4		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			# 1
За	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_		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	۱.,		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		<u> </u>

Form **990** (2009)

#### **SCHEDULE 0** (Form 990)

### Supplemental Information to Form 990

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

OMB No 1545-0047 Open to Public Inspection

Employer identification number

Name of the organization

Department of the Treasury Internal Revenue Service ► Attach to Form 990.

AMERICAN POSTAL WORKERS UNION #0735	48	0802662
PART VI SECTION a QUESTION 6: TAX EXEMPT ORGANIZATION WITH MEMBERS		
PART VI SECTION A QUESTION 7A: MEMBERS ELECT THE MEMBERS OF THE EXECUT	IVE BC	)ARD
PART VI SECTION A QUESTION 7B: MEMBERS APPROVE SIGNIFICANT DECISIONS		
PART VI SECTION B QUESTION 11A: IN ADDITION TO THE EXECUTIVE BOARD SIX (6) 1	RUSTI	EES ARE ELECTED BY THE
GENERAL MEMBERSHIP TO AUDIT THE BOOKS OF THE TREASURER. FORM 990 WAS	SUBMIT	ITED TO THE TRUSTEES
FOR REVIEW BEFORE IT WAS FILED		
		•
PART VI SECTION B QUESTION 15: PRESIDENT'S COMPENSATION IS BASED ON WAG	ES NEC	GOTIATED FOR THE
BARGAINING UNIT PLUS 10% OTHER OFFICERS ARE COMPENSATED 1 GRADE ABOV	E THEII	R CURRENT POSTAL
SALARY		
PART VI SECTION C QUESTION 19: GOVERNING DOCUMENTS AND FINANCIAL STATE	MENTS	ARE MADE
AVAILABLE TO THE PUBLIC UPON REQUEST		<del></del>

## Form 4562

Department of the Treasury Internal Revenue Service (99)

# **Depreciation and Amortization**(Including Information on Listed Property)

► See separate instructions. ► A

► Attach to your tax return.

OMB No 1545-0172

Attachment Sequence No 67

Name(s) shown on return Business or activity to which this form relates Identifying number American Postal Worker's Union #0735 Union 48-0802662 Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount. See the instructions for a higher limit for certain businesses . . . . . . . . . . . \$250,000 1 2 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) . 3 \$800,000 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- . . . . . 4 Dollar limitation for tax year, Subtract line 4 from line 1. If zero or less, enter -0-, if married filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 6 Building Equipment 13,244 13,244 89,809 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction, Enter the smaller of line 5 or line 8 . . . . . 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 0 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 0 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 13. Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 0 15 0 16 Other depreciation (including ACRS) 16 0 Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2009 . . . . . 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here . Section B-Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (business/investment use (a) Classification of property (e) Convention (f) Method placed in (a) Depreciation deduction period only-see instructions) 19a 3-year property b 5-year property 7-year property d 10-year property e 15-year property f 20-year property a 25-year property 25 yrs. h Residential rental 27.5 yrs. ММ S/L property 27.5 yrs. ММ S/L i Nonresidential real 39 yrs. MM S/L property MM S/L Section C-Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System S/L 20a Class life S/L **b** 12-year 12 yrs 40 yrs. S/L c 40-year Part IV Summary (See instructions.) 21 4,914 21 Listed property. Enter amount from line 28 72 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 4,914 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

☐ Yes ☐ No

Elected section

179 cost

Form 4562 (2009) Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A-Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles) **24a** Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No 24b If "Yes," is the evidence written? (b) (f) (h) (a) Business/ (d) Basis for depreciation Type of property (list Date placed in Method/ Recovery Depreciation nvestment use Cost or other basis (business/investment vehicles first) service Convention deduction period percentage use only) Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25 Property used more than 50% in a qualified business use: see attached

depreciation % see attached schedule % 4,914 Property used 50% or less in a qualified business use: 6/L -5/L -% % S/L -

Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 Add amounts in column (i), line 26. Enter here and on line 7, page 1

28 4.914

#### Section B-Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30	Total business/investment miles driven during the year (do not include	Vehi	-		b) cle 2 —		cle 3	Vehi-			(e) ncle 5	Vehic	
31 32	commuting miles)												-
33	Total miles driven during the year Add lines 30 through 32												
34	Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35	Was the vehicle used primarily by a more than 5% owner or related person?												
36	Is another vehicle available for personal use?												

#### Section C-Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

<b>37</b>	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
	Do you treat all use of vehicles by employees as personal use?		
41	Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.		4.00

Part VI Amortization
----------------------

	(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortiza period percent	or	(f) Amortization for this year
42	Amortization of costs that begin	s during your 2009	tax year (see instructions):				
43	Amortization of costs that beg	an before your 200	09 tax year			43	
44	Total. Add amounts in column	n (f). See the instru	ctions for where to repor	t <u>.</u>		44	

### Form 990 DEPRECIATION 2009

Building	Cost	Prior Years Depreciation	2009 Depreciation	Book value
<ol> <li>25 yr Building 1983</li> <li>25 yr Shed 2000</li> </ol>	51,259.95 6,330.51	51,259.95 2,278.80	0 253 20	0 3,798.51
3. 5 yr Bldg Improvements 2006	16.139 81	6,455.92	3,227.96	6,455.93
4. 7 yr Monument Sign 2006 TOTAL	2,835.12 7 <b>6,565.39</b>	810.04 <b>60,804.71</b>	405.02 <b>3,886.18</b>	1,620 06 <b>11,874.50</b>
Building	Cost	Prior Years Depreciation	2009 Depreciation	Book 1 Value
5. 5 yr Previous to 2006 6. 5 yr Intel Celeron D Processor 325	7,742.44	7,742.44	0	0
Pres. Comp. 2006 7. 5 yr 3-Celeron D	780.07	312.02	156.01	312.04
Processor 2006 8. 5 yr 2-Computers 2006 9. 7 yr President's	2,069 81 1,379 87	827 92 551 94	413.96 275 97	827.93 551.96
Desk 2006 10. 7 yr Chairs 2006	945.07 326.55	270 02 93.30	135.01 46.65	540.04 186.60
TOTAL	13,243.81	9,797.64	1,027.60	2,418.57
TOTAL BLDG & EQUIP	89,809.20	70,602.35	4,913.78	14,293.07
<ul><li>11. Land 1977</li><li>12. Land 1989</li><li>TOTAL LAND</li></ul>	15,559.54 15,350.00 <b>30,909.54</b>	0	0	30,909.54
TOTAL LAND, BLDG & EQUIP	120,718.74	70,602.35	4,913.78	45,202.61
Form 990	(a) Cost/Other	(b) Accumulated Depreciation	(c) Book Value	
Land, Bldg, Sign & Shed Equipment TOTAL	107,475 13,243 <b>120,718</b>	64,691 10,825 <b>75,516</b>	42,784 2,418 <b>45,202</b>	
2009 DEPRECIATION EXI 5 YR Depreciation Exp 7 YR Depreciation Exp 25 YR Depreciation Exp TOTAL	p 4,074 p 587	Form 4562 Part Form 4562 Part Form 4562 Part <b>Form 4562 Par</b>	III Line 19c III Line 19g	

## FORM 990 Explanations, 2009

Form 990 Part 1 Summary Line 8	
Prior Year 267,302 Current Year 280,413	
Member ship dues 287,403	Profit & Loss Stmt LM2 Stmt B Item36
New Member Dues Rebates (2,535)	Profit & Loss Stmt
Reimbursed AFL-CIO Dues (4,455)	Profit & Loss Stmt
Form 990 Part 1 Summary Line 9	
Prior year Current Year 6,990	
New Member Dues Rebates 2,535	Profit & Loss Stmt
Reimbursed AFL-CIO Dues 4,455	Profit & Loss Stmt
Form 990 Part 1 Summary Line 10	
Prior Year - 2,065 Current Year - 1,378	Profit & Loss Stmt LM2 Stmt B Item 40
Form 990 Part 1 Summary Line 11	
Prior Year - 4,750 Current Year - 3,486	Profit & Loss Stmt LM2 Stmt B Item 48
Form 990 Part 1 Summary Line 12	
Prior Year - 281,857 Current Year - 292,267	Profit & Loss Stmt LM2 Stmt B Item 49
Total Income 280,413	•
Total Interest 1,378	
Other Income 10,476	
Form 990 Part 1 Summary Line 13	
Prior Year - 2,447 Current Year - 1,663	Profit & Loss Stmt
Memorials 214	LM2 Schedule 17 Stmt B Item 52
Cash Donations 400	
Non-Cash Contribution 1,048	
Form 990 Part 1 Summary Line 14	
Prior Year 16,929 Current Year 16,301	Profit & Loss Stmt
USPS Disbursing/Health Ins 15,780	LM 2 Schedule 20 Item 55
APWU Accident Distribution (ABA) 398	Livi 2 Schedule 20 Rein 55
` ,	
WEJ INSURANCE 123	
WEJ INSURANCE 123 Form 990 Part 1 Summary Line 15	Profit & Loss Stmt
WEJ INSURANCE 123  Form 990 Part 1 Summary Line 15  Prior Year 158,887 Current Year - 163,431	Profit & Loss Stmt
WEJ INSURANCE       123         Form 990 Part 1 Summary Line 15       Current Year - 163,431         Prior Year       158,887       Current Officers         Current Officers       107,611	Part IX Line 5 LM2 Schedule 11
WEJ INSURANCE       123         Form 990 Part 1 Summary Line 15         Prior Year       158,887       Current Year - 163,431         Current Officers       107,611         Employee Payroll       40,996	Part IX Line 5 LM2 Schedule 11 Part IX Line 7 LM2 Schedule 12
WEJ INSURANCE 123  Form 990 Part 1 Summary Line 15  Prior Year 158,887 Current Year - 163,431  Current Officers 107,611  Employee Payroll 40,996 401K 4,407	Part IX Line 5 LM2 Schedule 11 Part IX Line 7 LM2 Schedule 12 Part IX Line 8 LM 2 Schedule 20
WEJ INSURANCE       123         Form 990 Part 1 Summary Line 15         Prior Year       158,887       Current Year - 163,431         Current Officers       107,611         Employee Payroll       40,996         401K       4,407         Payroll Taxes       10,417	Part IX Line 5 LM2 Schedule 11 Part IX Line 7 LM2 Schedule 12
WEJ INSURANCE       123         Form 990 Part 1 Summary Line 15         Prior Year       158,887       Current Year - 163,431         Current Officers       107,611         Employee Payroll       40,996         401K       4,407         Payroll Taxes       10,417         Form 990 Part 1 Summary Line 17	Part IX Line 5 LM2 Schedule 11 Part IX Line 7 LM2 Schedule 12 Part IX Line 8 LM 2 Schedule 20
WEJ INSURANCE       123         Form 990 Part 1 Summary Line 15         Prior Year       158,887       Current Year - 163,431         Current Officers       107,611         Employee Payroll       40,996         401K       4,407         Payroll Taxes       10,417         Form 990 Part 1 Summary Line 17         Prior Year       99,520       Current Year - 105,375	Part IX Line 5 LM2 Schedule 11 Part IX Line 7 LM2 Schedule 12 Part IX Line 8 LM 2 Schedule 20 Part IX Line 10 LM 2 Stmt B Line 65
WEJ INSURANCE       123         Form 990 Part 1 Summary Line 15         Prior Year       158,887       Current Year - 163,431         Current Officers       107,611         Employee Payroll       40,996         401K       4,407         Payroll Taxes       10,417         Form 990 Part 1 Summary Line 17	Part IX Line 5 LM2 Schedule 11 Part IX Line 7 LM2 Schedule 12 Part IX Line 8 LM 2 Schedule 20 Part IX Line 10 LM 2 Stmt B Line 65  Profit & Loss Stmt
WEJ INSURANCE       123         Form 990 Part 1 Summary Line 15         Prior Year       158,887       Current Year - 163,431         Current Officers       107,611         Employee Payroll       40,996         401K       4,407         Payroll Taxes       10,417         Form 990 Part 1 Summary Line 17         Prior Year       99,520       Current Year - 105,375	Part IX Line 5 LM2 Schedule 11 Part IX Line 7 LM2 Schedule 12 Part IX Line 8 LM 2 Schedule 20 Part IX Line 10 LM 2 Stmt B Line 65  Profit & Loss Stmt Credit Card Reconcilliation
WEJ INSURANCE   123     Form 990 Part 1 Summary   Line 15     Prior Year   158,887   Current Year - 163,431     Current Officers   107,611     Employee Payroll   40,996     401K   4,407     Payroll Taxes   10,417     Form 990 Part 1 Summary   Line 17   Prior Year   99,520   Current Year - 105,375   Total Expenses   287,403	Part IX Line 5 LM2 Schedule 11 Part IX Line 7 LM2 Schedule 12 Part IX Line 8 LM 2 Schedule 20 Part IX Line 10 LM 2 Stmt B Line 65  Profit & Loss Stmt Credit Card Reconcilliation LM 2 Stmt B Line 68 Total Disbursements
WEJ INSURANCE       123         Form 990 Part 1 Summary       Line 15         Prior Year       158,887       Current Year - 163,431         Current Officers       107,611         Employee Payroll       40,996         401K       4,407         Payroll Taxes       10,417         Form 990 Part 1 Summary         Prior Year       99,520       Current Year - 105,375         Total Expenses       287,403    Depreciation Exp       +4,914	Part IX Line 5 LM2 Schedule 11 Part IX Line 7 LM2 Schedule 12 Part IX Line 8 LM 2 Schedule 20 Part IX Line 10 LM 2 Stmt B Line 65  Profit & Loss Stmt Credit Card Reconcilliation
WEJ INSURANCE       123         Form 990 Part 1 Summary       Line 15         Prior Year       158,887       Current Year - 163,431         Current Officers       107,611         Employee Payroll       40,996         401K       4,407         Payroll Taxes       10,417         Form 990 Part 1 Summary       Line 17         Prior Year       99,520       Current Year - 105,375         Total Expenses       287,403    Depreciation Exp       +4,914       Total Disbursements       286,770	Part IX Line 5 LM2 Schedule 11 Part IX Line 7 LM2 Schedule 12 Part IX Line 8 LM 2 Schedule 20 Part IX Line 10 LM 2 Stmt B Line 65  Profit & Loss Stmt Credit Card Reconcilliation LM 2 Stmt B Line 68 Total Disbursements
WEJ INSURANCE       123         Form 990 Part 1 Summary       Line 15         Prior Year       158,887       Current Year - 163,431         Current Officers       107,611         Employee Payroll       40,996         401K       4,407         Payroll Taxes       10,417         Form 990 Part 1 Summary       Line 17         Prior Year       99,520       Current Year - 105,375         Total Expenses       287,403    Depreciation Exp     Total Disbursements     Less Line 15     (163,431)	Part IX Line 5 LM2 Schedule 11 Part IX Line 7 LM2 Schedule 12 Part IX Line 8 LM 2 Schedule 20 Part IX Line 10 LM 2 Stmt B Line 65  Profit & Loss Stmt Credit Card Reconcilliation LM 2 Stmt B Line 68 Total Disbursements
WEJ INSURANCE         123           Form 990 Part 1 Summary         Line 15           Prior Year         158,887         Current Year - 163,431           Current Officers         107,611           Employee Payroll         40,996           401K         4,407           Payroll Taxes         10,417           Form 990 Part 1 Summary         Line 17           Prior Year         99,520         Current Year - 105,375           Total Expenses         287,403           Depreciation Exp         +4,914           Total Disbursements         286,770           Less Line 15         (163,431)           Less Line 14         (16,301)	Part IX Line 5 LM2 Schedule 11 Part IX Line 7 LM2 Schedule 12 Part IX Line 8 LM 2 Schedule 20 Part IX Line 10 LM 2 Stmt B Line 65  Profit & Loss Stmt Credit Card Reconcilliation LM 2 Stmt B Line 68 Total Disbursements
WEJ INSURANCE       123         Form 990 Part 1 Summary       Line 15         Prior Year       158,887       Current Year - 163,431         Current Officers       107,611         Employee Payroll       40,996         401K       4,407         Payroll Taxes       10,417         Form 990 Part 1 Summary       Line 17         Prior Year       99,520       Current Year       105,375         Total Expenses       287,403         Depreciation Exp       +4,914         Total Disbursements       286,770         Less Line 15       (163,431)         Less Line 14       (16,301)         Less Line 13       (1,663)	Part IX Line 5 LM2 Schedule 11 Part IX Line 7 LM2 Schedule 12 Part IX Line 8 LM 2 Schedule 20 Part IX Line 10 LM 2 Stmt B Line 65  Profit & Loss Stmt Credit Card Reconcilliation LM 2 Stmt B Line 68 Total Disbursements
WEJ INSURANCE         123           Form 990 Part 1 Summary         Line 15           Prior Year         158,887         Current Year - 163,431           Current Officers         107,611           Employee Payroll         40,996           401K         4,407           Payroll Taxes         10,417           Form 990 Part 1 Summary         Line 17           Prior Year         99,520         Current Year - 105,375           Total Expenses         287,403           Depreciation Exp         +4,914           Total Disbursements         286,770           Less Line 15         (163,431)           Less Line 14         (16,301)	Part IX Line 5 LM2 Schedule 11 Part IX Line 7 LM2 Schedule 12 Part IX Line 8 LM 2 Schedule 20 Part IX Line 10 LM 2 Stmt B Line 65  Profit & Loss Stmt Credit Card Reconcilliation LM 2 Stmt B Line 68 Total Disbursements

Form 990 Part 1 Summary Line 19	
Prior Year - 4,704 Current Year - 5,497	
Revenue 292,267	
Expenses 286,770	
Form 990 Part 1 Summary Line 20	
Prior Year 139,592 Current Year - 145,090	LM 2 Stmt A Line 29
Savings 9,661.85	Balance Sheet
CDs 59,500.44	Balance Sheet
Checking 26,524.44	Balance Sheet
Total Cash 95,686.73	LM 2 Stmt A Line 22
Investments - PlainDealer 4,200.00	Balance Sheet LM 2 Stmt A Line 26
Fixed Assets 120,718.74	Balance Sheet EW 2 Sunt A Eme 20
Accumulated Depreciation (75,516.00)	Depreciation Worksheet
Form 990 Part 1 Summary Line 21	Depreciation worksheet
Prior Year 4,435 Current Year - 6,522	Balance Sheet - Current Liabilities
Master Card 2,003	Balance Sheet Current Diabilities
401 K 724	
FICA 1,054	
FUTA 276	
Fed WH 1,293	
Medicare 246	
SUTA 194	
State WH <u>392</u>	
OTHER 340	
6,522	LM 2 Sch10 LM 2 Stmt A Line 33
Form 990 Part 1 Summary Line 22	DIVI 2 SONTO DIVI 2 SUNT IX DINE 35
Prior Year 135,156 Current Year - 138,568	LM 2 Stmt A Line 35
Total Assets 145,090	LM 2 Stmt A Line 29
Current Liab, (6,522)	LM 2 Stmt A Line 33
Net Assets or Fund Balances 138,568	
Form 990 Part VIII Statement of Revenue Line 1b	
Membership Dues 280,413	
Dues Check-Off 280,413	Profit & Loss Stmt
Form 990 Part VIII Statement of Revenue Line 2 a & b	
6,990.00	
New Member Bonus 25,35.00	Profit & Loss Stmt
Reimbursed AFL-CIO Dues 4,455.00	Profit & Loss Stmt
Form 990 Part VIII Statement of Revenue Line 3	
Investment income 1,378	Profit & Loss Stmt LM 2 Stmt B Line 39
Form 990 Part VIII Statement of Revenue Line 11 e	
3,486.00	Profit & Loss Stmt LM 2 Stmt B Line 48
Reimbursed Exp 2,612.00	
Other 874.00	
Form 990 Part VIII Statement of Revenue Line 12	
292,267	LM 2 Stmt B Line 49
Membership Dues 280,413	Profit & Loss Stmt
New Member Bonus 2,535	Profit & Loss Stmt
Reimbursed AFL-CIO Dues 4,455	Profit & Loss Stmt
Interest 1,378	Profit & Loss Stmt
Other Revenue 3,486	Profit & Loss Stmt

Form 990 Part X Balar	nce Sheet Line 1	
Prior Year - 17,447	Current Year - 26,524	Profit & Loss Stmt
Form 990 Part X Balar	·	Tion & Boss Sunt
Prior Year - 67,828	Current Year - 69,163	
11101 1001 07,020	Savings 9,661.85	Profit & Loss Stmt
•	CDs 59,500.44	Profit & Loss Stmt
Form 990 Part X Ralar	nce Sheet Line 10a 120,718.74	Balance Sheet
Tom 770 Last & Dalar	Line 10b 75,516.00	
	Line 10c	Depreciation Worksheet
Prior Year - 50,116	Current Year 45,203	LM 2 Stmt A Line 27
Form 990 Part X Balar	· · · · · · · · · · · · · · · · · · ·	Livi 2 Stifft A Line 27
Prior Year - 4,200	Current Year - 4,200	Balance Sheet LM 2 Stmt A Line 26
Form 990 Part X Balan	,	Balance Sheet LM 2 Stmt A Line 26
Prior Year - 139,592	Current Year - 145,090	
F1101 1 cal - 139,392	•	Dolomos Chast
	,	Balance Sheet
	Savings & CD 69,163	Balance Sheet
	Fixed Assets 45,203	Depreciation Worksheet
	Investments $4,200$	Balance Sheet
	145,090	LM 2 Stmt A Line 29
Form 990 Part X Balan		
Prior Year - 4,435	Current Year - 6,522	Balance Sheet LM 2 Sch.10 Stmt A Line 33
	Master Card 2,003	
	401 K 724	
	FICA 1,054	
	FUTA 276	
	Fed WH 1,293	
	Medicare 246	
	SUTA 194	
	State WH 392	
	Other 340	
Form 990 Part X Balan	nce Sheet Line 27	
Prior Year - 27,057	Current Year - 36,187	Balance Sheet
	Savings 9,661.85	
	Checking 26,524.44	
Form 990 Part X Balan	ice Sheet Line 28	
Prior Year - 58,219	Current Year - 59,500	Balance Sheet
	CDs 59,500	
Form 990 Part X Balan	ice Sheet Line 29	
Prior Year - 54,316	Current Year - 49,403	Balance Sheet
	PlainDealer - 4,200.00	
	Fixed Assets - 45,203	Depreciation Worksheet
Form 990 Part X Balan	ice Sheet Line 33	•
Prior Year - 139,592	Current Year - 145,090	LM 2 Stmt A Line 29
	Savings 9,661.85	Balance Sheet
	Checking 26,524.44	Balance Sheet
	CDs 59,500.44	Balance Sheet
	PlainDealer - 4,200.00	Balance Sheet
	Fixed Assets - 45,203.00	Depreciation Worksheet
Form 990 Part X Balan	•	Z-r
Prior Year - 144,027	Current Year - 151,612	
21.02 2 m 2 . 19v=1	Total Assets 145,090	
	Total Liab 6,522	
	- 0	

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ Investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
Building	01/01/03	100	51,259 95	51.259 95	25	s/1	0	
Building/Shed	01/01/00	100	6,330 51	6,330 51	25	1/s	253 20	
Building Improvements	90/10/10	100	16,139 81	16,139 81	5	s/I	3,227 96	
Building Monument Sign	90/10/10	100	2,835 12	2,835.12	7	s/l	405.02	
Total Building			76,565.39	76,565.39			3.886.18	
Equipment	00/10/10	100	7,742 44	7,742 44	5	s/l	0	
Equipment	90/10/10	001	4,229 75	4,229 75	5	l/s	845.94	
Equipment	01/01/06	100	1,271 62	1,271 62	7	s/I	181 66	
Total Equipment			13,243.81	13,243.81			1,027.60	
Land	01/01/77		15,559.54					
Land	01/01/77		15,350.00					
Total Land			30,909.54					
Total Land, Bldg & Equip			120,718.74					

