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Short Form
Return of Organization Exempt From Income TaxUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

2009

Open to Public
Inspection

A For the 2009 calendar year, or tax year beginning		, 2009, and ending	
B Check if applicable		C Name of organization	
<input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		Enid, Oklahoma, City Employees Local #1136 of AFSCME,AFL-CIO Number and street (or P O box, if mail is not delivered to street address) Room/suite 215 W Owen K Garrett Ste 4 City or town, state or country, and ZIP + 4 Enid, OK 73701	
		D Employer identification number 51-0671277	
		E Telephone number 580-747-7401	
		F Group Exemption Number ► 1381	

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

I Website: ► N/A	G Accounting Method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ►
J Tax-exempt status (check only one) — <input checked="" type="checkbox"/> 501(c) (5) ► (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	H Check ► <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)
K Check ► <input type="checkbox"/> if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000 A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return	
L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$	

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1 Contributions, gifts, grants, and similar amounts received	1 942
	2 Program service revenue including government fees and contracts	2
	3 Membership dues and assessments	3 65311
	4 Investment income	4 32
	5a Gross amount from sale of assets other than inventory	5a
	b Less: cost or other basis and sales expenses	5b
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	
	6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ► <input type="checkbox"/>	
	a Gross revenue (not including \$ 6) of contributions reported on line 1 2010	6a
	b Less: direct expenses other than fundraising expenses	6b
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)		
7a Gross sales of inventory, less returns and allowances	7a	
b Less: cost of goods sold	7b	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		
8 Other revenue (describe ►)	8	
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ► 9 66285	9 66285	
Expenses	10 Grants and similar amounts paid (attach schedule)	10 853
	11 Benefits paid to or for members	11
	12 Salaries, other compensation, and employee benefits	12
	13 Professional fees and other payments to independent contractors	13 13195
	14 Occupancy, rent, utilities, and maintenance	14 5558
	15 Printing, publications, postage, and shipping	15 192
	16 Other expenses (describe ► <u>Adv/Dues/Good&Welfare/Office Supplies/Ins/Fund Raising Exp</u>)	16 26527
	17 Total expenses. Add lines 10 through 16 ► 17 46325	17 46325
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 19960
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19 30276
20 Other changes in net assets or fund balances (attach explanation)	20	
21 Net assets or fund balances at end of year. Combine lines 18 through 20 ► 21 50236	21 50236	

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.
(See the instructions for Part II.)

Net Assets	(A) Beginning of year	(B) End of year	
	29809	22	49412
	0	23	0
	467	24	832
	30276	25	50244
	0	26	8
	30276	27	50236
22 Cash, savings, and investments			
23 Land and buildings			
24 Other assets (describe ► <u>Equipment/Security Deposit/Inventory</u>)			
25 Total assets			
26 Total liabilities (describe ► <u>Sales Tax Payable</u>)			
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)			

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

What is the organization's primary exempt purpose? **Member Services**

What is the organization's primary exempt purpose? _____
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
Required for section
501(c)(3) and 501(c)(4)
organizations and section
1947(a)(1) trusts, optional
or others)

28	Organized new members			
(Grants \$ <input type="text"/> N/A) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>		28a	N/A	
29	Negotiated contracts			
(Grants \$ <input type="text"/> N/A) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>		29a	N/A	
30	Handled grievances			
(Grants \$ <input type="text"/> N/A) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>		30a	N/A	
31	Other program services (attach schedule)			
(Grants \$ <input type="text"/> N/A) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>		31a	N/A	
32	Total program service expenses (add lines 28a through 31a)			
► <input type="checkbox"/>		32	N/A	

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

Part V Other Information (Note the statement requirements in the instructions for Part V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	✓
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	✓
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.	35a	✓
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35b	
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a N/A	37b	✓
b Did the organization file Form 1120-POL for this year?	38a	✓
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38b	N/A
b If "Yes," complete Schedule L, Part II and enter the total amount involved	39a	N/A
39 Section 501(c)(7) organizations. Enter:	39b	N/A
a Initiation fees and capital contributions included on line 9	40a	
b Gross receipts, included on line 9, for public use of club facilities	40b	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ► _____ ; section 4912 ► _____ ; section 4955 ► _____	40c	
b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40d	
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ► _____	40e	✓
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ► _____		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.		
41 List the states with which a copy of this return is filed. ► Oklahoma		
42a The organization's books are in care of ► Juanita Gates	Telephone no. ► 580-747-7401	
Located at ► 7107 W Southgate Enid, OK	ZIP + 4 ► 73703	
b 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)?	42b	✓
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.		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	✓
If "Yes," enter the name of the foreign country: ► _____		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► 43	43	□
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	✓
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	✓

Part VI

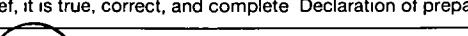
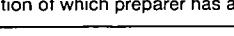
Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46–49b and complete the tables for lines 50 and 51.

46	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	Yes	No
46			
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	Yes	No
47			
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	Yes	No
48			
49a	Did the organization make any transfers to an exempt non-charitable related organization?	Yes	No
49a			
b	If "Yes," was the related organization a section 527 organization?	Yes	No
49b			
50	Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "	Yes	No

f Total number of other employees paid over \$100,000 ►

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

d Total number of other independent contractors each receiving over \$100,000 ►

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge			
			Date	
	Signature of officer Juanita Gates, Secretary-Treasurer Type or print name and title			
Paid Preparer's Use Only	Preparer's signature 	Date	Check if self- employed <input type="checkbox"/>	Preparer's identifying number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 		EIN 	Phone no 

May the IRS discuss this return with the preparer shown above? See instructions

Enid, Oklahoma, City Employees Local #1136 of AFSCME, AFL-CIO

Employer ID # 51-0671277

Form 990-EZ - 2009

Attachment

Part I

Expenses:

Line 10 Charitable Contributions/Projects:

AFSCME Local 1136 participated in our Community Wide “Scare-on-the-Square” to help promote a safe Halloween. Members were present to hand out candy and balloons to all who attended.

Total cost of project = \$240.00.

AFSCME Local 1136 members donated funds to the Vance Strike Relief Fund. Total cost of project = \$215.00.

AFSCME Local 1136 members adopted a family for Christmas. Total cost of project = \$398.00.

Total projects – 2009 = \$853.00