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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

Dep: Inter	artment nal Rev	of the Treasury enue Service		► The organization may have to us	se a copy of this return to s	atisfy state reporti	ing requirements	Open to	Public Inspection
	For t	he 2009 calend	ar year,	or tax year beginning		09, and ending		<u></u>	***************************************
В	Ad Na In	ddress change ame change stal return ermination	Please use IRS label or punt or type. See specific Instruc- tions.	C National Associati 133 NALC 6215 Watt Ave North Highlands, C		Carriers	94-0 E Telepho 916-	-348-01	133
	A		Same A	As C Above	hn Howell		(a) Is this a group return H(b) Are all affiliates incli If 'No,' attach a list	n for affiliates uded?	Yes No
1	Tax	-exempt status	X 501	(c) (8) ◄ (insert no)	4947(a)(1) or	527	n No, atlaura iist	(see insudent	oris)
J	We	bsite: ► N/A	1				H(c) Group exemption nu	mber ►	685
K		of organization	Corpora	tion Trust X Association	Other►	L Year of Formation	on 1979 Mis	tate of legal o	domicile CA
Pa	ert l	Summai							
Activities & Governance	2 3 4 5 6 7a	services services, Check this box Number of voti Number of inde Total number of Total gross uni	and b lega ng mem ependen of emploi of volunterelated b	panization's mission or most senefits such as deal aid, collective last the organization discontinuations of the governing body (Fit voting members of the goveryees (Part V, line 2a) evers (estimate if necessary) usiness revenue from Part VI	bargaining and the distance of	health and represent sposed of more lb)	nd dental bental bentation.	enefits assets 3 4 5 6 7a	7 2,136 86 0
Revenue	8 9 10 11	Contributions a Program service Investment inco	and gran ce reveni ome (Pa (Part VI)	ts (Part VIII, line 1h) ue (Part VIII, line 2g) rt VIII, column (A), lines 3, 4, II, column (A), lines 5, 6d, 86, ues 8 through 11 (must equal	APR 2 6 20 and Zo) GO GO		Prior Year 696, 5 8, 7 20, 3 725, 6	70. 63.	0. Current Year 763, 541. 10, 937. 22, 516.
Expenses	13 14 15 16a b	Grants and sim Benefits paid to Salaries, other Professional fu Total fundraisin	nilar amo o or for r compen ndraising	nunts paid (Part IX, column (A) members (Part IX, column (A) sation, employee benefits (Part IX, column (A), li g fees (Part IX, column (D), line	(i), lines 1-3) (i), line 4) (art IX, column (A), lin (ii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (36,2 476,3	28.	796, 994. 29, 381. 442, 301.
				X, column (A), lines 11a-11d,	•		254,6		199,315.
				ies 13-17 (must equal Part IX			767,1		670,997.
Net Assets or Fund Balances	20 21 22	Total assets (P Total liabilities Net assets or fu	art X, Iır (Part X, und balaı	line 26) nces Subtract line 21 from lin			-41,5 Beginning of Young 559,5 559,5	ear 52.	125, 997. End of Year 684, 188. 0. 684, 188.
Sig He		Signatur Under penalties of true, correct, and Signature of Greg F Type or print	of perjury, I complete officer	declare that I have examined this return Declaration of preparation of the than office	n, including accompanying s er) is based on all informati	chedules and state on of which prepare	ments, and to the best of er has any knowledge 4//9/2 Date Sec/Treas	my knowledg	e and belief, it is
Pai Pre par Use On	er's	Preparer's signature Firm's name (or yours if self-employed), address, and ZIP + 4	Bren B E 3340	da Wilson Wilson Bookkeeping Marysville Blvd ramento, CA 95838	Service	Date 4/12/10	Check if self-employed ►	N/A /A	r's identifying number fructions)
May	the If			with the preparer shown above	? (see instructions)		1	(<u>)</u> [X]	
				work Reduction Act Notice, s		uctions.	TEEA0113L		Form 990 (2009)

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Part IV Checklist of Required Schedules

Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete 1 Schedulě A Is the organization required to complete Schedule B, Schedule of Contributors? 2 X 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates 3 X for public office? If 'Yes,' complete Schedule C, Part I Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete 4 Schedule C. Part II 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 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 X 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 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' 8 complete Schedule D, Part III X 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 X Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If Y is Y in the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If Y is Y is Y is Y in Y is Y is Y in Х 10 11 Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D. Parts VI. VII. VIII, IX, or 11 Х X as applicable • Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI 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 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 Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12 Х 12A Was the organization included in consolidated, independent audited financial statement for the tax Yes No year? If 'Yes,' completing Schedule D. Parts XI, XII, and XIII is optional 12 A 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E X 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a **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? *If 'Yes,' complete Schedule F, Part I* Х 14b 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 X 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 Х 16 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 17 Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 Х lines 1c and 8a? If 'Yes,' complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III 19 19 Х Х Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H 20

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Form 990 (2009) National Association of Letter Carriers

Part IV Checklist of Required Schedules (continued)

			Yes	No
21 [Old 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		Х
22 [Old the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part X, column (A), line 2° If 'Yes,' complete Schedule I, Parts I and III	22_		Χ
a	Old 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		Х
a	Old 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, and 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		Х
b [Old 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		
d [Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25a 9	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		
t	s 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 V	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		Х
C	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
II	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete			
3	Schedule L, Part IV	28b		Х
c /	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		Х
29 [Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
C	Old the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Old the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		Х
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3° If 'Yes,' complete Schedule R, Part I	33		Х
	Nas the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	s any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		Х
36 5	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		-
37 [Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38 [Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38		Х

BAA

Statements Regarding Other IRS Filings and Tax Compliance Part V Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of US Information Returns. Enter -0- if not applicable 0 1a 0 1b **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the 86 calendar year ending with or within the year covered by this return 2b 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) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by 3a Х this return? b 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 **b** If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts 5a 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited 5с Tax Shelter Transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization 6a Х solicit any contributions that were not tax deductible? b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services Х provided to the payor? 7a 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 Х 7с d If 'Yes.' indicate the number of Forms 8282 filed during the year 7d e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7 e benefit contract? 7 f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g 7h h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 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. a Did the organization make any taxable distributions under section 4966? 9a **b** Did the organization make any distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a Gross income from other members or shareholders 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

BAA Form **990** (2009)

Section A. Governing Body and Management

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

			Yes	No			
18	a Enter the number of voting members of the governing body						
1	b Enter the number of voting members that are independent 2,136						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2		Х			
3	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		Х			
4 Did the organization make any significant changes to its organizational documents							
	since the prior Form 990 was filed?			X			
5 Did the organization become aware during the year of a material diversion of the organization's assets?							
6	Does the organization have members or stockholders?	6		Χ			
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?							
1	b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
i	a The governing body?	8a		X			
(b Each committee with authority to act on behalf of the governing body?	8b		X			
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		Х			
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal		'				
Rev	enue Code)	_					
			Yes	No			
10	a Does the organization have local chapters, branches, or affiliates?	10a		<u>X</u>			
١	b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b					
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11		X			
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O							
12	a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	12a		<u>X</u>			
ı	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b					
•	Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12c					
13	Does the organization have a written whistleblower policy?	13		<u>X</u>			
14	Does the organization have a written document retention and destruction policy?	14		X			
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?						
ā	The organization's CEO, Executive Director, or top management official	15a		<u>X</u>			
ŀ	Other officers of key employees of the organization	15b		X			
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)						
16	a 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		X			
ŀ	o 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	164					
Sec	status with respect to such arrangements?	16b					
	List the states with which a copy of this Form 990 is required to be filed None						
18		aılabl	e for p	ublic			
Own website Another's website Upon request							
19	19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy statements available to the public.						
	State the name, physical address, and telephone number of the person who possesses the books and records of the orgated Price 6215 Watt Ave North Highlands CA 95660	anızatı	on				
	Tredory Ittice 0512 Marr voe Moren Hitalitalias CV 32000						

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 organizations'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 employees.'
- 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 compensate any current officer, director, or trustee.										
(A)	(B)	(c)						(D)	(E)	(F)
Name and Title	Average hours		Position (check all that apply)				Reportable	Reportable compensation from	Estimated	
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable 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
John Howell										
President	40			Х				55,099.	0.	0.
Roxanne Luce										
Executive V.P.	40			X				56,043.	0.	0.
Brian Bump										
Senior V.P.	40			X				56,202.	0.	0.
Craig Bishop										
First V.P.	4			X				8,912.	0.	0.
James Oakley							ĺ			
Second V.P.	5			Χ				13,174.	0.	0.
Greg Price										
Sec/Treas	40			Х				59,000.	0.	0.
Jeff Chester										
Ins. Officer	4			_X				12,472.	0.	0.
		,								
				٠						
	-		$\neg \neg$							<u></u>
										-
				\dashv						
<u></u>										

Part VII Section A. Officers, Directors, Trus	tees, l	Кеу	En	npl	oye	ees	, ar	nd Highest Co	mpensated Em	ployees (cont.)
(A)	(B)			•	:)			(D)	(E)	(F)
Name and Title	Average hours per week	_						Reportable compensation from	Reportable compensation from	Estimated amount of other
	hei week	Individual trustee or director	nstitutional trustee	Officer	Xey er	Highest co employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization
		ual tr	ional		employee					and related organizations
		ustee	trust		ee	mpensa				
		"	ee			ated				
	_					H				
								-		
	}									
	}									
					-					
4.00										
					<u> </u>					
1 b Total							>	260,902.	0.	0.
2 Total number of individuals (including but not limite	d to tho	se li	sted	abo	ove)	wh	o re	ceived more than	\$100,000 in report	table compensation
from the organization • 0		-								Yes No
2. Did the ergonization list any former officer, director	or truct	00 1	kov	omr	dov		or b	ighost compensat	ed employee	100 100
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such ii	ndividua	iee, i	кеу	em	oloy	ee, (OI 111	ignest compensat	ed employee	3 X
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater to	portable	cor	npe	nsa If 'Y	tion	and	oth	er compensation	from such	
individual	Παιτφιο	,,,,	,0 .	,, ,	CJ	COIII	pici	e otherale o for	Sucri	4 X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sch	ompens	atio	n fro	om a	any	unre	elate	ed organization fo	r services	
rendered to the organization? If 'Yes,' complete Sci Section B. Independent Contractors	hedule J	for	suc	n pe	erso	n				5 X
1 Complete this table for your five highest compensat	ed inde	pend	dent	cor	ntrac	ctors	tha	at received more t	han \$100,000 of	
compensation from the organization.								<u> </u>		
(A) Name and business addres	s							(B Description) of Services	(C) Compensation
Traine dita basinese dadi es								B G G G F F G G F F	0, 00, 11,000	
	·									
									-	
2 Total number of independent contractors (including	but not	limi	ted	to th	nose	lıst	ed a	above) who receiv	red more than	
\$100,000 in compensation from the organization										

Pai	T VIII Statement of Revenue				
	•	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u></u>	1a Federated campaigns 1a				
N S N	b Membership dues 1b 763,54	1.			
80	•				
A. A.					
늏뙭	d Related organizations 1d				
NS,	e Government grants (contributions)	—			
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above				
EO	g Noncash contribns included in Ins 1a-1f: \$				
ŞΨ	h Total. Add lines 1a-1f	▶ 763,541.			}
ш	Business Code				
	2a	_	1		Ì
2					
Ä	b				
≅∣	c				
SE	d				
Ψ¥	e				
8	f All other program service revenue				
24	g Total. Add lines 2a-2f	•			
	3 Investment income (including dividends, interest and				
	other similar amounts)	► 10,937.	10,937.		
	4 Income from investment of tax-exempt bond proceeds	, •			
	5 Royalties	•			
	(i) Real (ii) Personal				
	6a Gross Rents				
	b Less: rental expenses				
	c Rental income or (loss)	→	1		}
	d Net rental income or (loss)	>			
	7a Gross amount from sales of (i) Securities (ii) Other				
	assets other than inventory				
	b Less cost or other basis				
	and sales expenses				
	c Gain or (loss)				
-	d Net gain or (loss)	•			
UE	8a Gross income from fundraising events (not including \$				
Ē	of contributions reported on line 1c)				
Æ					
OTHER REVEN					
₽	b Less. direct expenses b		1		1
	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities See Part IV, line 19				
	b Less direct expenses b				
	c Net income or (loss) from gaming activities	▶			
	10a Gross sales of inventory, less returns				
	and allowances a	_			
	b Less: cost of goods sold b				
	c Net income or (loss) from sales of inventory	•	ļ.,,		ļ
	Miscellaneous Revenue Business Code				1
	11a Miscellaneous	22,216.	22,216.		
	b Rent	300.	300.		
	c				
	d All other revenue				
	e Total, Add lines 11a-11d	▶ 22,516.			
	12 Total revenue. See instructions	► 796,994.	33,453.	0.	0.
	12 POLE I CACITACIONIS	1,50,551.	- 55/ 100.		<u> </u>

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). **(D)** Fundraising (A) Do not include amounts reported on lines Program service Management and Total expenses 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses expenses general expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members 29,381 Compensation of current officers, directors, 260,902 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) 0 74,383 Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer 74,309 contributions) Other employee benefits 32,707. 10 Payroll taxes 11 Fees for services (non-employees). a Management **b** Legal c Accounting 2,610 d Lobbying e Prof fundraising svcs. See Part IV, In 17 f Investment management fees g Other 10 70. 12 Advertising and promotion 30,660. 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 37,422. 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 17,109. 22 Depreciation, depletion, and amortization 23 17,512. Insurance 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)		
a Union Administration	17,480.	
<pre>b Postage and Shipping</pre>	10,248.	
c Building Maintenance	9,698.	
d Contributions	8,627.	
e Per Capita Tax	7,988.	
f All other expenses	39,881.	
25 Total functional expenses Add lines 1 through 24f	670,997.	
26 Joint costs. Check here ► If following		1
SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational		

campaign and fundraising solicitation

RΔΔ

Page 11

Part)	Balance Sheet		[-		
•			(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing			1	
2	Savings and temporary cash investments		461,215.	2	602, <u>9</u> 60.
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net			4	
5	Receivables from current and former officers, director and highest compensated employees Complete Part		5		
6	Receivables from other disqualified persons (as define	ed under section 4958(f)(1))			
	and persons described in section 4958(c)(3)(B) Comp	olete Part II of Schedule L		6	
Ŝ 7	Notes and loans receivable, net			7	
S 7 S 8 T 8	Inventories for sale or use			8	
5 9	Prepaid expenses and deferred charges			9	
10	a Land, buildings, and equipment cost or other basis.	10a 357, 458.			
	Complete Part VI of Schedule D				
	b Less; accumulated depreciation	10ь 276,230.	98,337.	10c	81,228
11	Investments – publicly-traded securities			11	
12				12	
13				13	
14	· -			14	
15			· · · · · · · · · · · · · · · · · · ·	15	
16		34)	559,552.	16	684,188
17		337,3327	17	<u> </u>	
18				18	· · · · · · · · · · · · · · · · · · ·
19			19		
는 20			20		
A 21	·		21		
B 21	•	stees, kev emplovees.		-	······································
<u>†</u>	of Schedule L	sons. Complete Fait if		22	
E 23		urd partice		23	
- 1	, ,			24	
- 1	Unsecured notes and loans payable to unrelated third	parties	<u></u>	25	
25	•		0.		0.
26			0.	26	<u> </u>
P	Organizations that follow SFAS 117, check here ►	and complete lines			
	27 through 29 and lines 33 and 34.				
§ 27				27	
§ 28				28	
=-	Permanently restricted net assets	.		29	
R	Organizations that do not follow SFAS 117, check he	re► X and complete		1	
F 30	lines 30 through 34.		:		
- 1				30	
B 31				31	504 100
k 32		or other funds.	559,552.	32	684,188.
B 31 A 32 NC 33 S 34			559,552.	33	684,188.
š 34	Total liabilities and net assets/fund balances.		559,552.	34	684,188.

Form 990 (2009) National Association of Letter Carriers	94-6102878	Pa	ige 12
Part XI Financial Statements and Reporting			
		Yes	No
1` Accounting method used to prepare the Form 990 X Cash Accrual Other			
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		Х
b Were the organization's financial statements audited by an independent accountant?	2b		X
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for overs review, or compilation of its financial statements and selection of an independent accountant?	sight of the audit, 2c		
If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ain		
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year w consolidated basis, separate basis, or both:	rere issued on a		
Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth Audit Act and OMB Circular A-133?	h in the Single		Х

BAA Form 990 (2009)

3b

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

 Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
 ► Attach to Form 990.
 ► See separate instructions 2009

Open to Public Inspection

Name of the organization Employer Identification number National Association of Letter Carriers 133 NALC 94-6102878 Part I 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 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? No Yes 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 for any other purpose conferring impermissible private benefit?? Part II | Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2с d Number of conservation easements included in (c) acquired after 8/17/06 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement it holds? No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year > Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990. Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X

amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1

b 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

Schedule D (Form 990) 2009 Natio	onal Assoc	iation of Let	ter Carriers	94-61	02878		Page 2
Part III Organizations Mainta						contir	
Using the organization's acquisit items (check all that apply)							
a Public exhibition		d Loan	or exchange program	S			
b Scholarly research		e Othe					
c Preservation for future gener	rations	о <u>Г</u>] о ш	· 				
Provide a description of the orgal Part XIV		ctions and explain ho	ow they further the org	anızatıon's exempt purp	ose in		
5 During the year, did the organiza assets to be sold to raise funds i	ation solicit or re rather than to be	eceive donations of a e maintained as part	art, historical treasures of the organization's o	, or other similar collection?	Yes	ſ	No
Part IV Escrow and Custodia 9, or reported an amo	I Arrangeme ount on Form	nts Complete if 990, Part X, line	organization answ 21.	ered 'Yes' to Form !	990, Pai	rt IV,	line
1a Is the organization an agent, trus	stee, custodian.	or other intermedian	v for contributions or o	other assets not			
included on Form 990, Part X?	, ,		, . .		Yes		No
b If 'Yes,' explain the arrangement	in Part XIV and	d complete the follow	ving table				
					Amount	i	
c Beginning balance				1c			
d Additions during the year				1 d			
e Distributions during the year				1 e			
f Ending balance				1f			
2a Did the organization include an a		i 990, Part X, line 21	?		Yes	l	No
b If 'Yes,' explain the arrangement							
Part V Endowment Funds Co	mplete if org	ganization answe	<u>ered 'Yes' to Form</u>				
	(a) Current ye	ar (b) Prior ye	ar (c) Two years b	ack (d) Three years back	(e) F	our year	rs back
1 a Beginning of year balance							
b Contributions							
 c Net Investment earnings, gains, and losses 							
d Grants or scholarships							
 Other expenditures for facilities and programs 							
f Administrative expenses							
g End of year balance					-		
2 Provide the estimated percentage	e of the year en	id balance held as					
a Board designated or quasi-endov	vment ►	8					
b Permanent endowment ▶	%						
c Term endowment	%						
3a Are there endowment funds not a organization by:	n the possessio	n of the organization	n that are held and adr	ministered for the		Yes	No
(i) unrelated organizations					3a(i)		
(ii) related organizations					3a(ii)		
b If 'Yes' to 3a(II), are the related of	organizations lis	ted as required on S	chedule R?		3b		
4 Describe in Part XIV the intended	d uses of the or	ganization's endowm	ent funds				
Part VI Investments—Land, B	uildings, an	d Equipment. Se	ee Form 990, Part	X, line 10.			
Description of investment	(a	Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) B	Book Va	alue
1a Land							
b Buildings			325,000				<u>,965.</u>
c Leasehold improvements			19,730			16,	,263.
d Equipment			12,728	. 12,728.			0.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) BAA

Schedule **D** (Form 990) 2009

81,228.

Part VII: Investments—Other Securities Sec		ne 12. N/A	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
Financial derivatives			
Closely-held equity interests			
Other	· – 		
			
			· · · · · · · · · · · · · · · · · · ·
Total. (Column (b) must equal Form 990 Part X, col (B) line 12)		10)	
Part VIII Investments—Program Related (Se		ne 13) N/A	11-11
(a) Description of investment type	(b) Book value	(c) Method of valu	ation
		Cost or end-of-year ma	rket value
			
•			
1000 (00000 1000 0000 1000 000 1000 000	>		
Part IX Other Assets (See Form 990, Part	X, line 15) N/A		
(a)	Description		(b) Book value
			1
			
			<u> </u>
· · · · · · · · · · · · · · · · · · ·			
	•		
Total. (Column (b) must equal Form 990, Part X, col (E	2) /mo 15)	•	
			L
Part X Other Liabilities (See Form 990, P			
(a) Description of Liability	(b) Amount		
Federal Income Taxes			
			
		_	
			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)			
2 FIN 48 Footpote In Part XIV provide the text of the	factnate to the organization	's financial statements that reports th	o organization's liability

Schedule D (Form 990) 2009 National Association of Letter Carriers

94-6102878

Page 3

Sche	dule D (Form 990) 2009 National Association of Letter Car	riers	<u>94-610</u>	12878	Page 4
Par	XI Reconciliation of Change in Net Assets from Form 990 to	Financial Statements	5	N/A	
1	Total revenue (Form 990, Part VIII,column (A), line 12)				
2,	Total expenses (Form 990, Part IX, column (A), line 25)				
3	Excess or (deficit) for the year. Subtract line 2 from line 1			<u> </u>	
4	Net unrealized gains (losses) on investments				
5	Donated services and use of facilities				
6	Investment expenses.				
7	Prior period adjustments		ļ		
8	Other (Describe in Part XIV)				
9	Total adjustments (net) Add lines 4 through 8				
	Excess or (deficit) for the year per audited financial statements. Combine lines				
	XII Reconciliation of Revenue per Audited Financial Stateme	nts With Revenue pe	<u>r Retur</u>	n N/A	
	Total revenue, gains, and other support per audited financial statements		1		
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1			
	Net unrealized gains on investments.	2a			
	Donated services and use of facilities	2b	_[]		
	Recoveries of prior year grants	2c	[]		
	Other (Describe in Part XIV)	2d			
	Add lines 2a through 2d		2e		
_	Subtract line 2e from line 1	1 1	3		_
	Amounts included on Form 990, Part VIII, line 12, but not on line 1		f		
	Investments expenses not included on Form 990, Part VIII, line 7b	4a	<u> </u>		
b	Other (Describe in Part XIV)	4b			
_	Add lines 4a and 4b		4c		
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	14dal =	5		
	Reconciliation of Expenses per Audited Financial Statements	s With Expenses per R	i . 1	N/A	
	Total expenses and losses per audited financial statements		1		
	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 - 1			
	Donated services and use of facilities	2a	_[1		
	Prior year adjustments	2b			
	Other losses	2c	_		
	Other (Describe in Part XIV)	2d	_		
	Add lines 2a through 2d		2e		
	Subtract line 2e from line 1	1 1	3		
	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
	Investments expenses not included on Form 990, Part VIII, line 7b	4a	1		
	Other (Describe in Part XIV)	4b		1	
	Add lines 4a and 4b		4c		
_	Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	<u></u>	5		
Par	XIV Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; P	art III, lines 1a and 4, Part	IV, lines	1b and 2b; F	art V,
	, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d nation	and 4b. Also complete this	, part to p	rovide any a	aditional
			<u>_</u>		
					
	•				
		- 			
		-			

Schedule, D	(Form 990) 2009	National	Association	n of Lette:	r Carriers		94-6102878	Page 5
Part XIV	(Form 990) 2009 Supplemental	Information	n (continued)					
				<u>-</u>				
		- -						
						_		_
		-						
		- -						
						•		
	•							
								-
-				-				
~								_
				- -		- 		

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Attach to Form 990.

Employer identification number Name of the organization National Association of Letter Carriers 94-6102878 133 NALC Form 990, Part VI, Line 11 - Form 990 Review Process No review was or will be conducted.

2009·

Schedule D, Part XIV - Supplemental Information National Association of Letter Carriers 133 NALC

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Schedule D, Part XI, Line 8 Other Changes In Net Assets Or Fund Balances

Change in Accounts Payable