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R005 02/25/2011 3 30 PM

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No 1545-0047 2010

Department of the Treasury Internal Revenue Service

Open to Public

	F41- 0040		· · · · · · · · · · · · · · · · · · ·		111000011011				
<u>~</u>		lendar year, or tax year beginning , and ending							
	Check 🕏 applicable	C Name of organization NBPC of the AFGE		D Empl	oyer identification number				
X	Address change	AFGE AFL-CIO Council 083							
	Name change	Doing Business As		86-	-6030872				
	·	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telep	hone number				
	initial return	PO Box 1908	recombodito		5-724-5165				
	Terminated				724 3103				
		City or town, state or country, and ZIP + 4			4 011				
ᆜ	Amended return	Laredo TX 78044-1908		G Gross rec	eipts 4,557,211				
	Application pending	F Name and address of principal officer	H(a) Is this a gr	our roturn for	affiliates? Yes X No				
		TJ Bonner	1	·					
		29520 Primrose Dr.	H(b) Are all at	ffiliates inclu	uded? Yes No				
		Campo CA 91906	If "No	o," attach a l	list (see instructions)				
· - ī	Tax-exempt statu	s 501(c)(3) X 501(c) (5) 4 (insert no) 4947(a)(1) or 527	1 –						
	Website: ▶ I		H(c) Group ex	comption of	ımbar 🏲				
	Form of organization			965					
			ear of formation 1	903	M State of legal domicile DC				
		ımmary							
	1	escribe the organization's mission or most significant activities							
Ф	See	Schedule O							
يَ									
펼									
ē									
8	2 Check th	is box $lacktriangle$ if the organization discontinued its operations or disposed of more than 25	% of its net ass	ets					
G		of voting members of the governing body (Part VI, line 1a)		3	9				
σο o				<u> </u>	9				
Activities & Governance		of independent voting members of the governing body (Part VI, line 1b)		4					
Ę		nber of individuals employed in calendar year 2010 (Part V, line 2a)		5	19				
Ä	6 Total nur	nber of volunteers (estimate if necessary)		6					
-	7a Total unr	elated business revenue from Part VIII, column (C), line 12		7a					
	b Net unre	ated business taxable income from Form 990-T, line 34		7b	0				
			Prior Yea		Current Year				
_	8 Contribut	ions and grants (Part VIII, line 1h)							
Ĕ		service revenue (Part VIII, line 2g)	3,664	1 440	4,450,511				
Revenue									
ě		nt income (Part VIII, column (A), lines 3, 4, and 7d)		738	36,951				
_	11 Other rev	ren րել (Բգր [All, Ծ [երդո (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,370	69,749				
	12 Total rev	enue – add lines 8 through (1) (must equal Part VIII, column (A), line 12)	3,760	,548	4,557,211				
	13 Grants	nd similar amounts paid (ParkIX, column (A), lines 1–3)		Ī					
	14 Benefits	paid to of for members (Parthy, column (A), line 4)	34	,456	50,500				
	15 Salarios	other compensation, employee benefits (Part IX, column (A), lines 5–10)		,472	493,798				
2011	4C- Dass	OCOLTAL IN TO THE IN THE STATE OF THE INC. COLUMN (A), INITES 3-10)		, = , 2	495,196				
	16a Professio	na) unda serra lees (Part IX, column (A), line 11e)			~				
ĭ, Exp	o rotal tun	draising expenses (Part IX, column (D), line 25)							
	17 Other exp	penses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,090	,298	2,324,021				
	18 Total exp	enses Add lines 13–17 (must equal Part IX, column (A), line 25)	2,622	2226	2,868,319				
7	19 Revenue	less expenses Subtract line 18 from line 12	1,138		1,688,892				
Sets or laisnes	10 110101100	issa superiosa deputade into to mont into the	Beginning of Curr		End of Year				
els els	20 Total ass	ets (Part X, line 16)	4,745		6,434,752				
E SE	24 Total liab	ilities (Part X, line 26)		5,577					
Z = E					66,577				
<u> </u>	***************************************	s or fund balances Subtract line 21 from line 20	4,679	7,283	6,368,175				
S.P	art II Si	gnature Block							
ຸ ເທັ Ur	ider penalties of p	egury, I declare that I have examined this return, including accompanying schedules and statements,	and to the best of	my knowled	ige and belief, it is				
tru	e, correct, and co	mplete Declaration of preparer (other than officer) is based on all information of which preparer has a	ny knowledge						
		Ook in they			2-26-2011				
Sig	n P -				A 36- COI)				
_	4 -	ignature of officer	•	Date					
Hei	re _	JOE BRADLEY SEC/TREAS)						
	T T	ype or print name and title							
	Print/Typ	e preparer's name Preparer's sygnature	Date	Check	if PTIN				
Paid	Rita B	. Dominguez	I		nployed P00737978				
Pre	22505								
•	Only Firm's na		Fi	rm's EIN 🕨	74-2081589				
USE	Cilly	9901 McPherson Rd, Ste 202							
	Firm's ac	dress > Laredo, TX 78045	Pt	none no	956-727-8590				
May	the IRS discus	s this return with the preparer shown above? (see instructions)			Yes No				
		duction Act Notice, see the separate instructions.			Form 990 (2010)				
DAA					roim 330 (2010)				

Part IV Checklist of Required Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	4		
2	complete Schedule A	_1_		$\frac{\mathbf{x}}{\mathbf{x}}$
2 3	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2		
3	candidates for public office? If "Yes," complete Schedule C, Part I	•		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II			
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4		
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			l
	Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	<u> </u>		
•	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	- 1	X
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		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
•	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	0		-
•	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		х
0	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		x
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
•	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		i	
-	complete Schedule D, Part VI	11a	x	
h	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	- 14		
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	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	11c		X
d	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	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
3	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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, Parts I and IV	14b	- 1	X
5	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, Parts II and IV	15	I	X
6	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, Parts III and IV	16		X
7	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 (see instructions)	17		X
8	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		X
9	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	[<u>x</u>
0a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some			
	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Pa	art IV 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		X
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		X
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	X	
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		_X_
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		_	
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
þ	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		X
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		X
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		<u> </u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-37 If "Yes," complete Schedule R, Part I	33		X
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		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a	ĺ		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,			
	Part V, line 2			
36	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		X
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	X	L
		Form	, գզո	/2010)

P	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
	Check it Scriedule O contains a response to any question in this Fait V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		163	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	7		ĺ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	7		
	reportable gaming (gambling) winnings to prize winners?	1c	x	ĺ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 19			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
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		X
b	If "Yes," enter the name of the foreign country			
_	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			7.7
b	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
7	Organizations that may receive deductible contributions under section 170(c).	6b		
a	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?	7.		х
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	-, 5		
_	required to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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			Ė
	organization, have excess business holdings at any time during the year?	8		Ĺ
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>
þ	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			ĺ
а	Initiation fees and capital contributions included on Part VIII, line 12	_		ĺ
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]	_		ĺ
11	Section 501(c)(12) organizations. Enter:			Ė
a	Gross income from members or shareholders	-		ĺ
b	Gross income from other sources (Do not net amounts due or paid to other sources			ĺ
	against amounts due or received from them)	-		ĺ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-		ĺ
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			ļ
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
L	Note. See the instructions for additional information the organization must report on Schedule O			Ė
b	Enter the amount of reserves the organization is required to maintain by the states in which			Ė
_	the organization is licensed to issue qualified health plans	-		Ė
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
O	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2010) NBPC of the AFGE 86-6030872 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. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 9 Enter the number of voting members included in line 1a, above, who are independent 1b b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 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 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X 6 Does the organization have members or stockholders? 6 Does the organization have members, stockholders, or other persons who may elect one or more members X of the governing body? 7a þ Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? 8a X b 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 X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a X 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 X chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b Has the organization provided a copy of this Form 990 to all members of its governing body before filing the X form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a 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," describe in Schedule O how this is done 12c X Does the organization have a written whistleblower policy? 13 13 X 14 Does the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b 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 X with a taxable entity during the year? 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None 17 18 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 Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, 19 and financial statements available to the public. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization > Joseph M. Bradley P.O. Box 2102

Laredo

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

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
- 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, if any 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 neither the organization nor any related organizations compensated any current officer, director, or trustee

(A)	(B)	1		5.55	:)		-	(D)	(E)	(F)
Name and Title	Average	Posi	ition (c all t	hat ap	ply)	Reportable	Reportable	Estimated
	hours per week (describe hours for related organizations in Schedule O)	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
(1) Deborah Wagner								·-		
General Counsel	40.00	Ĺ				l l		86,335	0	8,962
(2) Katherine M Tije	rina	1								
Counsel	40.00	L						81,651	0	9,204
(3) Paul R Schwedle:										
Counsel	40.00	<u>L</u> .						80,600	0	14,922
(4) Richard M Joach:									· · · · · · · · · · · · · · · · · · ·	
Field representative	40.00	<u></u>						53,744	0	6,257
(5) Stephen R Golds		1				lí				
Counsel	40.00	<u> </u>						36,169	0	2,354
(6) Ann Hoffman		1								
Counsel	15.00	<u> </u>						18,000	0	1,892
(7) Ramiro L Gonzale	₽Z									
Executive assistant	5.00	<u> </u>	L_					3,695	0	6,114
(8) Nancy Figueroa	}	1				\				
Executive assistant	5.00	<u> </u>				Ш		1,598	0	1,989
(9) Patricia Nighswa			Į			l l				
Executive Director	40.00	X						34,443	0	17,711
(10) Terrence J Bonne		1				li				
President	40.00			X				41,740	<u> </u>	39,871
(11) George E. McCubl		1								
Vice-President	40.00	<u> </u>		X				19,001	0	33,474
(12) Steve Malpezzi		1								
Vice-President	30.00	L		X				16,204	0	35,383
(13) Paul Perez		1	1			i i				
Vice-President	30.00	<u> </u>		X				12,733	0	17,557
(14) Eric Sparkman										
Vice-President	30.00	$oxed{oxed}$		X				9,461	0	32,966
(15) Joseph Bradley										
Secy/Treasurer	40.00			X				8,460	0	3,394
(16) Brandon L Judd										
Vice-President	30.00			X				2,439	0	8,440
DAA										Form 990 (2010)

Form 990 (2010) NBPC of the AFGE Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (F) (B) (C) (E) Position (check all that apply) Name and Title Average Reportable Reportable Estimated hours per compensation compensation from amount of Officer Individual trustee or director Institutional Key employee week from related other compensation (describe the organizations lest compensated loyee hours for organization (W-2/1099-MISC) from the (W-2/1099-MISC) organization related and related organizations l trustee organizations in Schedule 0) (17) Christopher Bauder Vice-President 30.00 X 1,430 0 8,736 (18) Shawn Moran 30.00 X 0 7,706 Vice-President 855 (19) Richard Pierce 0 Chief of Staff 40.00 X 31,430 61,100 (20) Jerome Pawluk 0 **Executive Assistant** 10.00 3,403 3,490 (21) Daryl P Schermerhorn 25.00 X 0 2,412 Executive assistant 2,842 (22)(23)(24)(25)(26)(27)(28)575,903 294,264 1b Sub-total Total from continuation sheets to Part VII, Section A 575,903 294,264 Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization > 0 Yes No Did the organization list any former officer, director or trustee, key employee, or highest compensated X 3 employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such X individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization (A) Name and business address (B) Description of services (C) Compensation Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization Form 990 (2010)

1 990 rt V	NBPC of the Statement of Reve		i	 -	86-6030872		Pag
,	talement of Revo	enue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
1a	Federated campaigns	1a				······································	
b	Membership dues	1b					
C	Fundraising events	1c					•
d	Related organizations	1d					1
е	Government grants (contributions)	1e					
f	All other contributions, gifts, grants, and similar amounts not included above	1f					
_	Noncash contributions included in lines 1a	-1f \$		•			
h	Total. Add lines 1a-1f						<u> </u>
٥.	_		Busn. Code	4 450 511	4 450 511	w. v.	
2a	Dues		 	4,450,511	4,450,511		
b							
C							
d							
e	A II		 				
	All other program service reve	enue	<u> </u>	A 450 511			<u> </u>
_		duudaada	priorest	4,450,511			<u> </u>
3	Investment income (including	aiviaenas,	interest,	36 051	36,951		1
	and other similar amounts)			36,951			-
4	Income from investment of tax	x-exempt bo	ona proceeas				
5	Royalties	- -	(u) Bernand				ļ
٥-	(i) Real		(II) Personal				
	Gross Rents			1			
	Less rental exps			Ī			1
	Rental inc or (loss)			1	1		†
	Net rental income or (loss) Gross amount from		(3) (2)				<u> </u>
	sales of assets (i) Securitie	-	(II) Other	İ			
	other than inventory						1
b	Less cost or other	1		1			
	basis & sales exps						
	Gain or (loss)			1			1
	Net gain or (loss)						
8a	Gross income from fundraising eve	ents					1
	(not including \$	ł		1			
	of contributions reported on line 10	;).			1		
	See Part IV, line 18	a					1
	Less direct expenses	b		-			1
	Net income or (loss) from fund	T	ents 🕨				<u> </u>
9a	Gross income from gaming activities	es					1
	See Part IV, line 19	a		#			‡
	Less direct expenses	b					<u> </u>
	Net income or (loss) from gan		es 🕨				ļ
10a	Gross sales of inventory, less	1					1
	returns and allowances	a		Ī			
	Less cost of goods sold .	b		-			1
_ <u>c</u>	Net income or (loss) from sale						
	Miscellaneous Revenue	e	Busn. Code				
11a	AFGE rebates			69,749	69,749		
b							
С							
d	All other revenue						
е	Total. Add lines 11a-11d		•	69,749			
	Total revenue. See instruction		\ <u></u>	4,557,211	4,557,211	(1

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)

Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
<u>7b</u>	, 8b, 9b, and 10b of Part VIII.	- Julia Superiode	expenses	general expenses	expenses
1					<u> </u>
	organizations in the U.S See Part IV, line 21				
2	Grants and other assistance to individuals in	}			‡
_	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,	1			‡ ‡
	organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				<u> </u>
4	Benefits paid to or for members	50,500		••••••	
5	Compensation of current officers, directors,				Ī
-	trustees, and key employees		<u></u>		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				1
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	455,126			
8	Pension plan contributions (include section 401(k)		İ		
_	and section 403(b) employer contributions)		-		
9	Other employee benefits	30 672			
10	Payroll taxes	38,672			
11	Fees for services (non-employees) Management				
a b	*	1,125,304			
C		19,150			<u> </u>
	Lobbying	174,500			
е	- 4 · · · · · · · · · · · · · · · · · ·				
f	Investment management fees				
g		705,657			
12	Advertising and promotion				
13	Office expenses	107,000		<u> </u>	
14	Information technology				
15	Royalties				
16 17	Occupancy Travel				
17 18	Payments of travel or entertainment expenses	-			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	185,323			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	7,087			
23	Insurance		······································		<u> </u>
24	Other expenses Itemize expenses not covered				1
	above (List miscellaneous expenses in line 24f. If	Į.			
	line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
-	(A) amount, list line 241 expenses on Schedule (C)				<u>†</u>
a b					
c					
d	1				
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	2,868,319			
26	Joint costs. Check here				
	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column				[
	(B) joint costs from a combined educational			•	1
) AA	campaign and fundraising solicitation			<u> </u>	Form 990 (2010)

Form 990 (2010) NBPC of the AFGE

<u></u>	art)	Balance Sheet		(A)	—т	(B)
				Beginning of year		End of year
	1-1	Cash—non-interest bearing		1,504,262	1	411,606
	2	Savings and temporary cash investments	F	3,214,898	2	5,997,238
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net	į.	 	4	
	5	Receivables from current and former officers, directors, trustees, ke	v t			·····
	-	employees, and highest compensated employees Complete Part II	•		1	
	ŀ	Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section	on i			·····
	l	4958(f)(1)), persons described in section 4958(c)(3)(B), and contribu			I	
	ŀ	employers and sponsoring organizations of section 501(c)(9) volunta	- F		1	
	l	employees' beneficiary organizations (see instructions)	1		6	
Assets	7	Notes and loans receivable, net	··· <u>·</u> ····		7	
286	8	Inventories for sale or use			8	
Ë	9	Prepaid expenses and deferred charges			9	11,317
	_	Land, buildings, and equipment cost or	Ī			
		other basis Complete Part VI of Schedule D	33,668			
	Ь	Less accumulated depreciation 10b	19,077	26,700	10c	14,591
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11	Ī		12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	Ī	4,745,860	16	6,434,752
	17	Accounts payable and accrued expenses			17	
	18	Grants payable	[18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities	[20	
S	21	Escrow or custodial account liability Complete Part IV of Schedule	D [21	
Liabilities	22	Payables to current and former officers, directors, trustees, key				
<u>ā</u>		employees, highest compensated employees, and disqualified personal	ons			
2		Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities Complete Part X of Schedule D	[66,577	25	66,577
_	26	Total liabilities. Add lines 17 through 25		66,577	26	66,577
-Sa		Organizations that follow SFAS 117, check here ▶ ☐ and com	plete			
Balances	l	lines 27 through 29, and lines 33 and 34.	l			
ä	27	Unrestricted net assets			27	
ä	28	Temporarily restricted net assets			28	
Fund	29	Permanently restricted net assets	<u>_</u>		29	
교	l	Organizations that do not follow SFAS 117, check here ▶ X a	nd			
þ	1	complete lines 30 through 34.				
Š	30	Capital stock or trust principal, or current funds	Ĺ		30	
Se.	31	Paid-in or capital surplus, or land, building, or equipment fund	L		31	
AS	32	Retained earnings, endowment, accumulated income, or other fund	s	4,679,283		6,368,175
Net Assets or	33	Total net assets or fund balances	Ĺ	4,679,283		6,368,175
Z	34	Total liabilities and net assets/fund balances		4,745,860	34	6,434,752

		NBPC	<u>of</u>	the	<u>AFGE</u>																											8	1	6	<u> </u>	- 6	5():	3	0	8	37	12												Pa	qe	12
Pa		Reconcili																																															_							_	_
	<u> </u>	Check if S	Sche-	dule (<u>) contair</u>	ns a	a r	<u>Γ</u>	<u>ге</u>	e	<u> </u>	<u>2</u> 5	Ş	<u>s</u> j	ŝΙ	ŗ	ρ	<u>10</u>	<u>n:</u>	<u>se</u>	t to	<u>o</u> a	<u>an</u>	y (qι	<u>je</u>	st	io	n	1 i	in	1	tŀ	h	is	F	٥;	<u>aı</u>	t	>	<u>(1</u>															Γ	
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2		nses (must							<u>2</u>	25	25	5	5)	5)	i))																																2			2	2,	8	68	,	31	L 9
3	Revenue I	ess expense	es Sut	otract li	ne 2 from I	line 1	1																																									3			1	L,	6	88	,	89	92
4	Net assets	or fund bala	ances	at beg	nning of ye	ear (n	(mu	nus	us	st	st	it (ŧ	е	е	e	p:	υĻ	ıal	Pa	art	Χ,	lın	e :	33	, с	οlι	ın	nr	n (Α)))														Γ	4	٦	Γ	4	١,	6	79	,;	28	33
5	Other char	nges in net a	assets	or fund	l balances	(expl	plaı	aın	iIΠ	n	1 1	ır	ın	ın	n	1	8	Sc	che	edi	ule	0)																									5	╗	Γ							
6	Net assets	or fund bala	ances	at end	of year Co	ombii	ine	ne l	e li	lir	lır	ın	n	٦E	١E	e	es	s (3,	4,	an	ıd S	5 (r	ทน	ıst	e	qua	al	Ρ	a	rt	X	٠,	li	ın	е:	33	3,									Γ		╗	Π							
	column (B								_																																							6	-	ĺ	E	5,	3	68	,	17	75
Pa		Financial																												_																											
		Check if S	<u>3che</u>	<u>dule (</u>	<u>) contair</u>	ns a	a r	re	<u>re</u>	<u>e:</u>	<u> 36</u>	<u>:S</u>	S	3[<u> </u>	p	20	0	ns	<u>se</u>	to	3 C	n	<u>y</u> (gι	ıе	st	io	n	<u>i</u>	in	t	tł	<u>1</u> i	is	F	2	ar	t	X	<u>(</u>	L														Γ	٦
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	If the organ	nization chai	nged if	ts meth	od of acco	ountin	ing	g f	j fr	fro	rc	O	01	ınد	n	m	n	a	a p	ιο	гу	ea	r o	rc	h	eck	(e	j "	'C)tl	he	ŀГ,	,	e	ЭХ	pl	aı	n	ın	1									_	_				Ì	,	ì	
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b		organization'																																																	ſ	2	b			7	X.
С	If "Yes" to	line 2a or 2b), does	the or	ganızatıon	have	e a	a	a c	C	C	20	0	or	or	n	m	ım	nıtt	tee	e th	nat	as	su	ım	es	re	s	pc	วท	ISI	ıb	ıl	ıt	у	fo	r	٥,	/e	rs	SIÇ	gh	t														_
	of the aud	it, review, or	r comp	olation	of its finan	cial s	sta	tate	ate	te	er	en	m	m	m	ne	e	∍n'	ıts	ап	ıd :	sel	ec	tio	n	of	an	ır	٦d	le	pε	en	10	ð	er	ıt a	ac	c	o	ur	nta	an	t?									2	С			3	X
	If the organ	nization chai	nged e	ether it	s oversight	t proc	ces	es	:SS	\$ \$	s	; (c	0	0	Эſ	r	S	ele	ect	ior	1 p	roc	es	SS	du	ırır	ıg	tŀ	he	ŧ	a	x)	/e	ar	٠, ١	e>	ф	la	۱۱Г	1 11	1								ſ					[
	Schedule ()																																																					-		
d		line 2a or 2b														h	ıe	etl	he	er th	he	fin	an	CIE	al :	sta	ite	m	e	nt	s	fc	r	rt	th	e :	y€	ea	r	w	eı	ге															
	issued on a	a separate b	asis, c	consoli	dated basis	s, or l	r bo	oot	oth	th	:h	n	1																																										1		
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3а	As a result	of a federal	awarc	i, was i	he organiz	zation	n re	re	rec	eq	:qı	ąυ	Ιu	ui	uı	111	ire	ec	d t	10 U	ınc	der	go	ar	n a	auc	dıt	or	a	au	dı	ıts	S	а	ıs	se	et	fo	ort	th	ı	n									ſ						
		Audit Act an																																																		3	а			3	K
b	If "Yes," did	the organiz	zation	underg	o the requi	ıred a	au	ıud	ıbı	dıt	lit	it i	t	c	C	0) [r a	auc	dits	5?	If t	he	or	ga	anı	za	tıc	n	ıc	lic	ı	n	0	t٠	un	d	er	g	0	tŀ	ıe															_
	required at	idit or audits	s, expla	ain why	ın Schedu	ıle O) aı	an	ınc	nd	d	<u>d (</u>	1	ď	₫	de	<u>le</u>	<u>es</u>	CI	ıbe	a	ny	ste	eps	s t	ak	en	to	<u> </u>	ur	٦d	le	r	g	0	SL	ıc	h	а	u	dı	ts										3	b				
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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, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 Open to Public inspection

Name of the organization Employer identification number NBPC of the AFGE AFGE AFL-CIO Council 083 86-6030872 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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? Conservation Easements. Complete if the organization answered "Yes" to Form 990. Part IV Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a 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 Tax Year 2a Total number of conservation easements Total acreage restricted by conservation easements 2b 2c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 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 easements it holds? 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 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) Yes (i) and section 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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 (ASC 958), 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 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenues included in Form 990, Part VIII, line 1 \$ Assets included in Form 990, Part X \$

33,668

Schedule D (Form 990) 2010

19,077

d Equipment

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

Schedule D (Form 990) 2010 NBPC of the AFGE		86-6030872	Page 3
Part Vil Investments—Other Securities. See Form			
(a) Description of security or category	(b) Book value	(c) Method of valuation	
(including name of security)		Cost or end-of-year market value	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			_
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(I)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. See Forn	n 000 Port V line 12		
(a) Description of investment type	(b) Book value	(c) Method of valuation	
(a) bescription of investment type	(b) Book value	Cost or end-of-year market value	
(1)			
(1)		 	
(2)			
*			
(4)		 	
(5) (6)		 	
(7)			
(8)			
(9)		 	
(10)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. See Form 990, Part X, line 1	_ 	<u></u>	
(a) Description		(h) Pook	

(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)

Other Liabilities. See Form 990, Part X, line 25. Part X

1	(a) Description of liability	(b) Amount
(1)_	Federal income taxes	
(2)	L/P - Local dues	66,577
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total	. (Column (b) must equal Form 990, Part X, col (B) line 25)	66,577

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Sche	dule D (Form 990) 2010 NBPC of the AFGE	86-603087	72	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audited Financial Stater	nents	3
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990 Part IX, column (A), line 25)		2	
3•	Excess or (deficit) for the year. Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		_7	
8	Other (Describe in Part XIV)		_8	
9	Total adjustments (net) Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	9	10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	1	
C	Recoveries of prior year grants	2c	1	
đ	Other (Describe in Part XIV)	2d]	
е	Add lines 2a through 2d		2e	<u></u>
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	_	
b	Other (Describe in Part XIV)	4b	1	
C	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses per	Retu	<u>rn</u>
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1		
а	Donated services and use of facilities	2a	1	
b	Prior year adjustments	2b	1	
С	Other losses	2c	1	
d	Other (Describe in Part XIV.)	2d	1	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	ļ
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	4	
b	Other (Describe in Part XIV)	4b	4	
C	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5]

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

Part XIV

Supplemental Information

Part XIV Supplemental Information (continued)

SCHEDULE J

(Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ► Complete if the organization answered "Yes" to Form 990.

Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open To Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

NBPC of the AFGE

AFGE AFL-CIO Council 083

Employer identification number 86-6030872

Part I **Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization a Receive a severance payment or change-of-control payment from the organization or a related organization? 4a b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? 5a b Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of a The organization? 6a b Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2010

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NBPC of the AFGE

Schedule J (Form 990) 2010 NBPC of the AFGE 8 AFGE PART 86-6030872

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. 86-6030872

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

	Spaces (a)	conference OSIM 6001 solbes C M 30 mobiles (6)	- Contraction C	bus trammited (2)	CHOSCOSCIA (C)	/E) Total of columns	(E) Company
(A) Name	(i) Base compensation	(ii) Bonus & incentive	(iii) Other reportable compensation	other deferred	benefits	(B)(I)+(D)	reported in prior Form 990 or Form 990-EZ
Richard Pierce	(1) (1)	00		0	31,430	92,530	99,432
	(11)	0 0		0 0	. 0] 0	0
Jerome Pawluk	3,4	03		1	3,490	6,893	10,350
	(11)	0		0	0	0	0
Daryl P Schermerhorn	2,8,	42		0	2,412	5,254	3,637
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					_	Schedu	Schedule J (Form 990) 2010

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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

2010 Open to Public

Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

NBPC of the AFGE AFGE AFL-CIO Council 083

Employer identification number 86-6030872

Form 990 - Organization's Mission or Most Significant Activities "The object of this Council shall be to promote the general welfare of civilian governmental employees. The Council shall strive to promote efficiency in the governmental service, and shall advance plans of improvement to be secured by legislative enactment through cooperation with officials and by other lawful means."

Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Form 990, Part III, Line 4d - All Other Achievements Negotiation/arbitration- Each member is covered by a monthly stipend for any negotiation/arbitration needed by the member. In addition, members who have incurred legal expenses due to job situations will also be reimbursed. Training- Locals are reimbursed for training expenses and new equipment purchased in order to carry on for the good of the Council.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders "All locals in good standing with AFGE whose membership includes United States Border Patrol employees shall be eligible for active membership in this Council. Any local that has active members who are under the permanent jurisdiction of a Chief Patrol Agent is defined as a Border patrol local."

Form 990, Part VI, Line 7a - Election of Members and Their Rights "To be qualified as an officer or candidate for office in the National

Employer identification number 86-6030872

Gouncil, an individual must be a member in good standing of an affiliated local; must have been a member for one year of an AFGE local, immediately preceding the closing of the nomination process; and must not be a member in any labor organization not affiliated with the AFL-CIO."

Form 990, Part VI, Line 10b - Policies and Procedures Governing Chapters
"All locals in good standing with AFGE whose membership includes United
States Border Patrol employees shall be eligible for active membership in
this Council. Any local that has active members who are under the
permanent jurisdiction of a Chief Patrol Agent is defined as a Border
patrol local."

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

A copy of the form 990 is provided to the governing body at the national convention. The form is reviewed before it is signed and mailed.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

The National Border Patrol Council AFGE AFL-CIO Council #83 Executive

Committee is discussing the conflict of interest, and whistleblower

policies in Part VI, Section B of the form 990.

The National Border Patrol Council AFGE AFL-CIO follows AFGE's guidelines for its destruction and retention policy mentioned in Part VI, Section B of the form 990. The AFGE's guidelines are in the financial officer's handbook.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

Schedule O (Form 990 or 990-EZ) (2010)

Name of the organization

NBPC of the AFGE

Employer identification number 86-6030872

NBPC pays the executive director for "salary lost" at his current grade and step.

Form 990, Part VI, Line 15b - Compensation Process for Officers

THE NBPC pays the officers and members for "salary lost" at their current grade and step.

The NBPC pays retired officers at their last grade and step.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation The governing documents are made available to the public upon request.

Form 4562

Name(s) shown on return

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return

OMB No 1545-0172

▶ See separate instructions. NBPC of the AFGE

Identifying number

AFGE AFL-CIO Council 083 86-6030872 Business or activity to which this form relates Labor Organization Part [Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Maximum amount (see instructions) 1 2 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,000,000 3 3 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 5 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 7 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 q Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2009 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12 13 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) Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year (see instructions) 15 15 Property subject to section 168(f)(1) election 6,563 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions.) Part III Section A 524 17 17 MACRS deductions for assets placed in service in tax years beginning before 2010 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 2010 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recover (a) Classification of property placed in (business/investment use (e) Convention (f) Method (a) Depreciation deduction penod service only-see instructions) 19a 3-year property 5-year property 7-year property 10-year property e 15-year property 20-year property S/L 25-year property 25 yrs Residential rental S/L 27 5 yrs MM property MM S/L 27 5 yrs Nonresidential real MM 39 yrs S/L property MM S/L Section C-Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs S/L b 12-year c 40-year MM S/L 40 yrs Summary (See instructions.) Part IV 21 Listed property Enter amount from line 28 21 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 22 7,087 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs 23

R005 NBPC of the AFGE 86-6030872

FYE: 12/31/2010

Federal Asset Report Labor Organization

02/25/2011 11:10 AM

Prior MACRS 101 Notebook, Dell	Asset	Description	Date In Service	Cost	Bus Sec Basis % 179Bonus for Depr	PerConv Meth	Prior	Current
Notebook, Dell Mass Sale: 1/01/10 Mass Sale:	D	MACDS.						
105 Notebook, Delld. 800 Mass Sale: 1/01/10 9/01/05 2,229 2,229 5 HY 200DB 1,716 105 107 Fax Cannon Mass Sale: 1/01/10 7/01/06 1,173 1,173 5 HY 200DB 970 68 108 Notebook HP			3/05/05	2,220	2,220	5 HY 200DB	2,092	128
Mass Sale: 1/01/10	103			1.821	1 821	5 HY 200DB	1 716	105
Mass Salic: 101/10		Mass Sale: 1/01/10			•			
Mass Sale: 1/01/10		Mass Sale: 1/01/10					2,101	128
Notebook HP	107		7/01/06	1,173	1,173	5 HY 200DB	970	68
110 Canon printer Mass Sale: 1/01/10 108	Notebook HP		800	800	5 HY 200DB	662	46	
Computer, HP	110	Canon printer	11/01/06	275	275	5 HY 200DB	228	16
Other Depreciation:	111			568	568	5 HY 200DB	470	33
Other Depreciation: 112 Notebook Gateway MP 8708 1/31/07 4.265 1.265 5 MO S/L 738 253 113 Printer HP 1320 1/31/07 425 425 5 MO S/L 248 85 114 Laser HP 3055 1/31/07 500 500 5 MO S/L 242 100 115 Computer HP Pravilion DV490Y 2/28/07 1,354 1,354 5 MO S/L 267 271 116 Canon XH AI HD camcorder 3/31/07 3,957 3,957 5 MO S/L 272 20 116 Canon XH AI HD camcorder 3/31/07 3,957 3,957 5 MO S/L 274 792 122 HP Pavillion DV6000 computer & notebool 3/31/07 1,687 1,687 5 MO S/L 280 0 123 Computer laptop gateway CX210X 4/30/07 1,593 1,593 5 MO S/L 850 318 124 Ha Sa Sale: 1/01/10 1,000 1,000 1,000 MO S/L 5,01 8,00 <td< td=""><td></td><td></td><td></td><td></td><td></td><td>3 111 20000</td><td></td><td></td></td<>						3 111 20000		
Notebook Gateway MP 8708			=	9,086	9,086		8,239	524
Notebook Gateway MP 8708								
113 Printer HP 1320			1/31/07	1 265	1 265	5 MO S/I	738	253
114 Laser HP 3055 1/31/07 500 500 5 MO S/L 292 100 115 Computer HP Pravilion D4790Y 2/28/07 3,957 3,957 5 MO S/L 2,174 792 126 Canon XH AI HD camcorder 3/31/07 3,957 3,957 5 MO S/L 2,174 792 127 HP Pavilion DV6000 computer & notebool 3/31/07 1,687 1,687 5 MO S/L 928 0								
116 Canon XH AI HD camcorder 3/31/07 3,957 3,957 5 MO S/L 2,174 792 122 HP Pavillion DV6000 computer & notebool 3/31/07 1,687 1,687 5 MO S/L 928 0 Mass Sale: 1/01/10						5 MO S/L		
122 HP Pavillion DV6000 computer & notebool 3/31/07 1,687 1,687 5 MO S/L 928 0 Mass Sale: 1/01/10 1,593 1,593 5 MO S/L 850 318 14 scanners 1/01/10 1,284 10,284 5 MO S/L 850 318 14 scanners Mass Sale: 1/01/10 1,717 1,717 5 MO S/L 887 344 126 Copper canno 12020 6/30/07 4,005 4,005 5 MO S/L 2,003 801 1,200								
Mass Sale: 1/01/10 1,593 1,593 5 MO S/L 850 318 124 14 scanners								
123 Computer laptop gateway CX210X	122			1,087	1,08/	3 MO S/L	928	V
10,284 10,284 5 MO S/L 5,314 0	123			1.593	1.593	5 MO S/L	850	318
Mass Sale: 1/01/10 1,717 1,717 5 MO S/L 887 344 126 Copier canon 2020 6/30/07 4,005 4,005 5 MO S/L 2,003 801 127 Notebook 8/31/07 2,050 2,050 5 MO S/L 957 410 128 Laptop, keyboard, mouse, travelcase & softw 8/31/07 1,300 1,300 5 MO S/L 607 260 129 Overhead protector, spare bulb & screen 8/31/07 1,200 1,200 5 MO S/L 560 240 131 Monitor 10/31/07 246 246 5 MO S/L 107 49 132 Notebook 11/30/07 513 513 5 MO S/L 214 103 135 HP Desktop 2/29/08 1,400 1,400 5 MO S/L 513 280 136 Monitor for HP Desktop 3/31/08 1,926 1,926 5 MO S/L 674 385 138 Toshiba Projector 5/31/08 991 991 7 MO S/L 224 142 139 Dell Notebook 11/5/09 2,270 2,270 5 MO S/L 454 140 Dell Notebook 2/12/09 1,064 1,064 5 MO S/L 195 0 141 Computer IMac 8/19/09 814 814 5 MO S/L 150 360 142 Laptop computer 8/19/09 814 814 5 MO S/L 54 163 143 MAC Computer & printer 12/15/09 2,443 2,443 5 MO S/L 0 88 144 Printer 2/01/10 490 490 5 MO S/L 0 88 145 Computer Depreciation 46,703 46,703 18,951 6,563 Total Other Depreciation 46,703 46,703 18,951 6,563 Grand Totals 55,789 55,789 27,190 7,087 Less: Dispositions and Transfers 22,121 22,121 14,676 524 Less: Start-up/Org Expense 0 0 0 0								
126 Copier canon 2020 6/30/07 4,005 4,005 5 MO S/L 2,003 801 127 Notebook 8/31/07 2,050 2,050 5 MO S/L 957 410 128 Laptop,keyboard,mouse,travelcase & softwa 8/31/07 1,300 1,300 5 MO S/L 607 260 129 Overhead protector, spare bulb & screen 8/31/07 1,200 1,200 5 MO S/L 560 240 131 Monitor 10/31/07 246 246 5 MO S/L 107 49 132 Notebook 11/30/07 513 513 5 MO S/L 214 103 135 HP Desktop 2/29/08 1,400 1,400 5 MO S/L 513 280 136 Monitor for HP Desktop 3/31/08 1,926 1,926 5 MO S/L 513 280 138 Toshiba Projector 5/31/08 991 991 7 MO S/L 224 142 139 Dell Notebook 1/15/09 2,270 2,270 5 MO S/L 454 454 140 Dell Notebook 2/12/09 1,664 1,664 5 MO S/L 195 0 Mass Sale. 1/01/10 Mass Sale. 1/01/10 1,800 1,800 5 MO S/L 150 360 141 Computer IMac 7/16/09 1,800 1,800 1,800 5 MO S/L 150 360 142 Laptop computer 8/19/09 814 814 5 MO S/L 54 163 143 MAC Computer & printer 12/15/09 2,443 2,443 5 MO S/L 41 488 144 Printer 2/01/10 490 490 5 MO S/L 0 88 146 Printer 5/01/10 660 660 5 MO S/L 0 88 146 Printer 6/01/10 749 749 5 MO S/L 0 88 146 Printer 6/01/10 749 749 5 MO S/L 0 87 Total Other Depreciation 46,703 46,703 18,951 6,563 Grand Totals 55,789 55,789 27,190 7,087 Less: Dispositions and Transfers 22,121 22,121 14,676 524 Less: Start-up/Org Expense 0 0 0 0 0 0 0 0 0							ŕ	
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Total Other Depreciation 46,703 46,703 46,703 18,951 6,563			2/01/10				_	
Total Other Depreciation 46,703 46,703 18,951 6,563 Total ACRS and Other Depreciation 46,703 46,703 18,951 6,563 Grand Totals 55,789 55,789 27,190 7,087 Less: Dispositions and Transfers 22,121 22,121 14,676 524 Less: Start-up/Org Expense 0 0 0 0								
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Grand Totals 55,789 55,789 27,190 7,087 Less: Dispositions and Transfers 22,121 22,121 14,676 524 Less: Start-up/Org Expense 0 0 0 0		Total Other Depreciation	_	46,703	46,703		18,951	6,563
Grand Totals 55,789 55,789 27,190 7,087 Less: Dispositions and Transfers 22,121 22,121 14,676 524 Less: Start-up/Org Expense 0 0 0 0								
Less: Dispositions and Transfers 22,121 22,121 14,676 524 Less: Start-up/Org Expense 0 0 0 0		Total ACRS and Other Deprec	ciation _	46,703	46,703		18,951	6,563
Less: Dispositions and Transfers 22,121 22,121 14,676 524 Less: Start-up/Org Expense 0 0 0 0		Grand Totals		55.789	55 789		27.190	7.087
Less: Start-up/Org Expense 0 0 0		Less: Dispositions and Transfe	rs					
Net Grand Totals 33,668 12,514 6,563								_
<u> </u>		Net Grand Totals	_	33.668	33.668		12.514	6.563
			=					

R005 NBPC of the AFGE 86-6030872

FYE: 12/31/2010

Federal Statements

2/25/2011 11:10 AM

Taxable Interest on Investments

Description					
	Amount	Unrelated Business Code	Postal Code	Acquired after 6/30/75	US _Obs (\$ o <u>r %)</u>
Commerce Bank #21573					
\$	4,448				
IBC # 8823	160				
TCB CDARS #148376;47222	163				
	26,351		 		
TCB # 301963;46306	,				
	5,914				
TCB CDARS #505348	25				
	75				
Total \$	36.951				

		
2/25/2011 11:10 AM	Fund Raising	
	Management & General	
tements	Total Service (Non-employee) Total Service Service 34, 443 2, 900 315, 080 85, 871 12, 264 44, 040 135, 032 6, 163 6, 922 6, 163 6, 922	
Federal Statements	Fart IX, Line 11g - Other F. Total Expenses \$ 34, 443 2, 900 315, 080 85, 871 12, 264 44, 040 135, 032 62, 884 6, 163 6, 922	
R005 NBPC of the AFGE 86-6030872 FYE: 12/31/2010	Description Bank charges Bonus Contributions Negotiation/arbitration Organization Postage Telephone and telegraph Training rebates Training rebates Training rebates Gonated/scrapped assets	