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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)

Department of the Treasury

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

Open to Public

OMB No 1545-0047

A	For the	2011 cal	endar year, or tax year beginning , and endin	ng					
-		applicable	C Name of organization AFSCME Council 65	D Employer ide	entification number				
$\overline{}$		s change Doing Business As 41-0854876							
=		e change Number and street (or P O. box if mail is not delivered to street address) Room/suite E Telephone number							
=	nitial retu	-		·					
=			118 Central Avenue City or town, state or country, and ZIP + 4	218-885-3242	·				
=	erminate			C C	0.074.455				
=	mended		Nashwauk MN 55769	G Gross receipt	0,01.1,100				
	Application	on pending	· · · · · · · · · · · · · · · · · · ·	i) is this a group return t	for affiliates? Yes X No				
) Are all affiliates includ					
I T	ax-exem	pt status	501(c)(3) X 501(c) (5) ◀ (insert no) 4947(a)(1) or 527	If "No," attach a list (see instructions)				
JV	J Website: ► H(c) Group exemption number ► 1381								
	M. S								
				formation 1965	M State of legal domicile MN				
P	art l		mmary	GE waste to impres	and the service of				
	1			65 works to impro	ve the pay and				
Ф			conditions of its members and is committed to winning respect and appreciations and appreciations of the members and is committed to winning respect and appreciations of Constant Minnesota. This is de-						
auc			strong contracts for the public employees of Greater Minnesota. This is dor	ne using					
Activities & Governance			d negotiation, grievance and arbitration procedures.						
Š	2		nis box if the organization discontinued its operations or disposed of more than 25	1	1				
•	3		of voting members of the governing body (Part VI, line 1a)		12				
tles	4		of independent voting members of the governing body (Part VI, line 1b) .		12				
棄	5		mber of individuals employed in calendar year 2011 (Part V, line 2a)	—					
¥	6		mber of volunteers (estimate if necessary)	<u> </u>					
	7a		related business revenue from Part VIII, column (C), line 12						
	b	Net unre	elated business taxable income from Form 990-T, line 34						
	l _		stions and grants (Part VIII line 1h)	Prior Year	Current Year				
₽	8		mons and grants (Fart VIII, mie III)						
Revenue	9	Program	service revenue (Part VIII, line 2g)	(n) 3,444,30					
86	10	Investm	ent income (Part VIII, column (A), lines 3, 4, and 7d)? . JUL . 2. 4. 2 12	O 80,9					
_	11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	Š	0 8,120				
	12		enue—add lines 8 through 11 (must equal Part VIII, column (A)-line 12)-	3,737,1					
	13		and similar amounts paid (Part IX, column (A), lines 1–3) OGUEN, UT		0 0				
	14		paid to or for members (Part IX, column (A), line 4)		0 0				
8	15		other compensation, employee benefits (Part IX, column (A), lines 5–10) .	3,003,89					
Expenses	16a		onal fundraising fees (Part IX, column (A), line 11e)	GOVERNMENT OF THE MENT OF THE 188	0 0				
X	b								
-	17		openses (Part IX, column (A), lines 11a–11d, 11f–24e)	646,16					
	18		penses. Add lines 13–17 (must equal Part IX, column (A), line 25) .	3,650,06					
	19	Revenu	e less expenses. Subtract line 18 from line 12	87,13					
ž Š	20 21 22			ginning of Current Yea					
sset Bala	20		sets (Part X, line 16)	1,604,96					
₹ 5	21		bilities (Part X, line 26)		0 0				
			ets or fund balances. Subtract line 21 from line 20	1,604,96	<u>1,721,135</u>				
	rt II		nature Block						
			y, I declare that I have examined this return, including accompanying schedules and statements, ar act, and complete Declaration of preparer (other than officer) is based on all information of which p						
		3 000, 00110	et, and expressed becauser of property (outer areas arrives) is seeded on an information of which p		0-/2				
∌ .Sig	n	🗗 🔻	Signature of officer	Date	<i>y</i> - / 2				
∄leı	re		Steve Preble Executive Director	Date					
_			Type or print name and title						
		Pnnt		Date	PTIN				
ين ح ي ai	d	i		Check	k 🔀 if 📗				
Preparer Gary W. Paulson Gany Lyanson (PA 7/17/2012 self-employed P004847									
	•		's name ► Gary W. Paulson, CPA's	Firm's EIN ▶ 41	-1643869				
W S	OSE OTHER PROPERTY OF THE PROP								
Mar	the I		s this return with the preparer shown above? (see instructions)	,	X Yes No				
ivia)	uie ir	ง นเธยนร	o uno return with the preparer anown above: (acc inatiocions)		· · LATES NO				

Form 9	90 (2011)	AFSCME Council 65	41-0854876	Page 2					
Pa	rt III	Statement of Program Service Accomplishments							
_		Check if Schedule O contains a response to any question in this Part III							
1	Briefly d	escribe the organization's mission:							
	Council	65 works to improve the pay and working conditions of its members and is committed							
	Greater	Minnesota. This is done using standard negotiation grievance and arbitration							
	procedu								
2		organization undertake any significant program services during the year which were not liste	ed on						
		Form 990 or 990-EZ?	· · · · L Yes	X No					
		describe these new services on Schedule O.							
3		organization cease conducting, or make significant changes in how it conducts, any program	,						
		?	· · · · L Yes	X No					
_		describe these changes on Schedule O.							
4		the organization's program service accomplishments for each of its three largest program		ру					
		s. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required							
	grants a	nd allocations to others, the total expenses, and revenue, if any, for each program service re	эропеа.						
4-	(Cada)) (Expenses \$ 0 including grants of \$ 0) (Re							
4a	(Code: .) (Expenses \$ o including grants of \$ o) (Re	venue \$	0)					
	The unio	on through employees, members and specialists negotiated approximately 140 co	ntracts						
		3 5000 members. The objective of these contract negotiations are to provide mer							
	-	ed working conditions, job protections, better benefits and higher wages. The uni							
	•		-						
		ees, members and specialists resolved 300+ grievances of which 50+ were referred							
		specialists for assistance. 18 of these grievances went to arbitration. The object							
	_	ievances includes protecting workers jobs, improving the working conditions of m							
	to ensure the contract terms are enforced. The union through employees and member volunteers ran								
	16 separate organizing campaigns. Some of these campaigns are to increase member density to								
	improve	e bargaining strength and expanding union membership into new employers and c	rganizations to						
	improve	working conditions of people not yet covered by union contract. Other program	s include: 1)						
	Membe	r training in contract enforcement, organizing and community outreach. 2) Confe	rences and						
	convent	tion to ensure member involvement in governance, setting the mission of the unic	on, and						
		ng member involvement.							
		·····							

4-	(Codo:) (Expenses \$ 0 including grants of \$ 0) (Re	2 011701	0)					
4c	(Code:	/ (Expenses # including grants of #) / (Ne	renue #	_0.)					
4d	Other pr	ogram services. (Describe in Schedule O.)							
	(Expense		0)						
4e		ogram service expenses > 0							

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,"			
	complete Schedule A	1	<u> </u>	_X_
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	-		
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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_		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	ا ہ ا		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	7		_ <u>X</u> _
0	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part	٣		
-	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		4	
_	VII, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	63.1	280	(.) Y
а	Schedule D, Part VI	11a		Х
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more		$\neg \neg$	
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	l	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		<u>X</u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	[<u> </u>	}	.,
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	i	$\frac{x}{x}$
	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	11e		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete</i>			
	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
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			^
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	1	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services		ŀ	
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	_		.,
4-	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>X</u>
19	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	l	X_
20°	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		^
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 990 (2011) Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	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			ĺ
23	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			ĺ
	employees? If "Yes," complete Schedule J	00	v	1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23	Х	-
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines</i>			
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
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		
đ	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	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	1 1		
	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		- 1	
27	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled		Ì	
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	1 22		v
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	27	9: 100	<u>X</u>
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	影響	· 医	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b	ĺ	Х
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		<u>X</u>
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		i	
0.4	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		ŀ	.,
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	31		<u>X</u>
JŁ	If "Yes," complete Schedule N, Part II	22		v
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<u>X</u>
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II.	"	\dashv	^
	III, IV, and V, line 1	34	ĺ	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within			
	the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X.
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		- 1	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
00	VI	37		<u>X</u>
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	

Form 9		<u>85487</u>	6	Page
Pai	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V	<u>· · · </u>		Щ
		1.03	Yes	No
1a		12		-
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	의		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			T V
		48	افتداث	- 4-
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2t		ون د
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	(7-1-		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			X
b 4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	. 3t	'	╫
+a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
b	account)?	4a		X
D	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	٠٠ ٠٠ غضت		4
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?	_		1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		l x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	<u>, </u>	
7	Organizations that may receive deductible contributions under section 170(c).	63.63		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	3.8		200
	and services provided to the payor?	7a		-
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	4	├
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	١.,		
4	If "Yes," indicate the number of Forms 8282 filed during the year	7c		10022
d	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		200
e f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		┼
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	. 7g		1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			1
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	739		1
•	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	1	
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	—		27
11	Section 501(c)(12) organizations. Enter:			1
a	Gross income from members or shareholders	一譯		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
420	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	126		
12a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			797
ь 13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
ıs a	Is the organization licensed to issue qualified health plans in more than one state?	138		17,6800
Q.	Note. See the instructions for additional information the organization must report on Schedule O.	237		建 基
ь	Enter the amount of reserves the organization is required to maintain by the states in which			
-	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	148	1	Х
h	If "Yes " has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	141		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management 1a Enter the number of voting members of the governing body at the end of the tax year . . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent . . . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person?... 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a X Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes 10a Χ **b** If "Yes." did the organization have written policies and procedures governing the activities of such chapters. affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?. 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13..... 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 14 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? X 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 16a If "Yes." did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Own website Another's website Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest 19 policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization: ▶ Linda Kresal 118 Central Avenue, Nashwauk, MN 55769

Form 990 (2011)	AFSCME Council 65	41-0854876	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees,	Highest Compensated	<u>-</u>
	Employees, and Independent Contractors		
	Check if Schedule O contains a response to any question in this Parl	t V II	

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 ar		izatio	on c	omp	en:	sated	an	y current officer	, director, or trus	stee.
(A) Name and Title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Donna Arends Recording Secretary	1.00	х		х				840	0	0
(2) Kerry Sorenson Director	0.00	х						0	0	0
(3) Grace Baltich Vice President	1.00	_X		X	<u> </u>			2,285	0	0
(4) Richard Staples Director	1.00	х			_			1,418	0	0
(5) Marcy Witofsky - non-voting Trustee	1.00	х			L			167	0	0
(6) Debra Risberg Director	0.00	х						685	0	0
(7) Frank Hawthorne - non-voting Trustee	0.00	х						254	О0	0
(8) Cheryl Jones Director	0.00	х			_			48	0	0
(9) Peggy Kinzler Director	0 00	х						2,184	0	0
(10) Amber Peratalo Director	0.00	х						1,357	0	0
(11) George Plautz President	0.00	х		Х				2,046	0	0
(12) Mark Reger Secretary/Treasurer	0.00	x		X				971	0	0
(13) Liz Richter - non-voting Trustee	0.00	х						178	0	0
(14) Carrie Umpierre Director	0.00	х						761	0	0

Р	art VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, a	nd	<u>High</u>	<u>est</u>	Compensated	Employees (co	ntinued)
	Name and title Average box, unless person is both an Reportable Report hours per officer and a director/frustee) compensation compensation					(E) Reportable compensation	(F) Estimated amount of				
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Dire		0.00	х						1,287	0	0
Assi	Steve Giorgi st Exec Dir	0.00				х			104,832	0	31,834
Exec	Steven Preble outive Director	0.00				х			118,308	0	33,449
Orga	Dean Tharp nizing Director	0 00				x			98,100	0	31,560
						_					
1b	Sub-total							•	335,721	0	96,843
c d	Total from continuation sheets to Part VII, S Total (add lines 1b and 1c).	Section A						•	0 335,721	0	96,843
2	Total number of individuals (including but not leading to the reportable compensation from the organization	limited to those		ab						<u>~`</u> `	
3	Did the organization list any former officer, dir employee on line 1a? If "Yes," complete Schee	ector, or trustee				•		-	est compensate	ľ	Yes No
4	For any individual listed on line 1a, is the sum the organization and related organizations gre individual	•	•						•		4 X
5	Did any person listed on line 1a receive or acc for services rendered to the organization? If ")										5 X
Sec	tion B. Independent Contractors	, <u>, , , , , , , , , , , , , , , , , , </u>							<u> </u>	<u>· · · · · · · · · · · · · · · · · · · </u>	<u> </u>
1	Complete this table for your five highest compound compensation from the organization. Report of year.										n's tax
	(A) Name and business addr	ress							(B) Description of serv	rices C	(C) ompensation
	NONE							_			0
											0
2	Total number of independent contractors (inclumore than \$100,000 of compensation from the	-	nited	to th	1056	e lis	ted a	bov	e) who received		0

8,120

8.120

3.852.898

3,971,455

All other revenue

Total revenue. See instructions. .

Total, Add lines 11a-11d.

多少的。 第一500年的 第一500年的 1950年 19

AFSCME Council 65 Statement of Functional Expenses Part IX

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.	All other organizations must co	omplete column (A) but are
not required to complete columns (B), (C), and (D).		•

Check if Schedule O contains a response to any question in this Part IX. To not include amounts reported on lines 6b, 100 port of the contained amounts reported on lines 6b, 100 port of the contained amounts reported on lines 6b, 100 port of the contained amounts of the	HOL I	equired to complete columns (b), (c), and (b).				
Total expenses Total expenses		Check if Schedule O contains a response to any	question in this Pa	art IX		<u></u> . 🔲 .
organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(0/1)) and persons described in section 4958(0/3)(8) Compensation not included above, to disqualified persons (as defined under section 4958(0/3)) and persons described in section 4958(0/3)(8) Compensation not included above, to disqualified persons (as defined under section 4958(0/3)) and persons described in section 4958(0/3) and persons described in section 4958(0/3)) and persons described in section 4958(0/3) a				Program service	Management and	Fundraising
United States. See Part IV. line 22 0 0	1				77.7	1860 1873
United States. See Part IV. line 22 0 0		organizations in the United States. See Part IV, line 21	0		が一大学の大	ことがなる 発電子 はいこ
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16. 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(pf)(1)) and persons described in section 4958(pf)(1) and 495	2	Grants and other assistance to individuals in the				弘道,
organizations, and individuals outside the United States. See Part IV, lines 15 and 16. 4 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of included above, to disqualified persons (see fined under section 4986(x)(1)) and persons described in section 4986(x)(1) and 184,037 11 Fees for services (non-employees): 12 Part Authorition and settlements 12 Advertising and promotion 13 Office expenses 110,939 1		United States. See Part IV, line 22	0		्रिप् । स्ट्री व हिंगुला व	· 并加速强
organizations, and individuals outside the United States. See Part IV, lines 15 and 16 . 0	3	Grants and other assistance to governments,				
4 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(n(1)) and persons described in section 4958(n(3)) and persons described in section 4958(n(organizations, and individuals outside the				1
4 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(n(1)) and persons described in section 4958(n(3)) and persons described in section 4958(n(United States. See Part IV, lines 15 and 16	0		The state of the s	
5 Compensation of current officers, directors, trustees, and key employees and wages. 6 Compensation not included above, to disqualified persons described in section 4958(c)(3)(8). 7 Other salaries and wages. 8 Pension plan accruats and contributions (include section 401(k) and 403(b) employer contributions). 9 Other employee benefits. 10 Payroll taxes. 11 Fees for services (non-employees): 1 Management. 0 Legal. 1 Accounting. 1 Lobbying. 1 Accounting. 1 Lobbying. 1 Accounting. 1 Lobbying. 1 Professional fundralising services. See Part IV, line 17. 1 Investment management fees. 1 On the voltration and settlements 2 Other - Arbitration and settlements 3 33.885 4 Advertising and promotion. 1 Office expenses. 1 16,939 1 Information technology. 1 Occupancy. 1 Travel. 1 Travel. 1 Payments of travel or entertainment expenses for any federal, state, or local public officials. 10 Conferences, conventions, and meetings. 10 Conferences, conventions, and meetings. 10 Conferences, conventions, and meetings. 20 Insurance. 21 Payments of affiliates. 22 Depreciation, depletion, and amortization. 23 Insurance. 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount, list line 24e expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 2 Scholarship awards 2 Other expenses. Add lines 1 through 24e. 2 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundrains goolication. Check here \(\bar{\text{List}} \) In combined educational campaign and fundrains goolication. Check here \(\bar{\text{List}} \) In combined educational campaign and fundrains goolication.	4	Benefits paid to or for members	0		The state of the s	CAN A STATE
6 Compensation not included above, to disqualified persons (as defined under section 4958(c)(1)) and persons described in section 4958(c)(3)(B). 7 Other salaries and wages. 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions). 9 Other employee benefits. 10 Payroll taxes. 11 Fees for services (non-employees): a Management. b Legal. c Accounting. 1 L4, 578 d Lobbying. 9 Professional fundraising services. See Part IV, line 17. f Investment management fees. 10 Office expenses. 11 Information technology. 10 Giffice expenses. 11 Information technology. 10 Coupancy. 11 Travel. 10 Payments of travel or entertainment expenses for any federal, state, or local public officials. 10 Coupancy. 11 Travel. 11 Payments to affiliates. 12 Depreciation, depletion, and amortization. 13 Office expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule C.) 2 Scholarship awards. 2 Other organizing. 3 Software development. 4 All other expenses. 30 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	5	Compensation of current officers, directors,				
persons (as defined under section 4958(n)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): a Management b Legal 1 Accounting 1 Lobbying 1 Lobbying 1 Professional fundraising services. See Part IV, line 17 f Investment management fees 10 Other Arbitration and settlements 33,385 4 Advertising and promotion 10 Office expenses 11 Information technology 10 Coupancy 10 Coupancy 10 Coupancy 10 Conferences, conventions, and meetings 10 Conferences, conventions, and meetings 11 Insurance 12 Other expenses Itemize expenses not covered above (List miscellaneous expenses on Schedule O.) 2 Scholarship awards 2 Other organizating 3 Other expenses. Itemize expenses on Schedule O.) 2 Scholarship awards 5 Other organizating 4 Information texpenses on Schedule O.) 2 Scholarship awards 5 Other organizating 1 All other expenses 1 10,150 2 Other organizating 1 3,337 2 Other organizating 4 Incomand list line 24e expenses on Schedule O.) 2 Scholarship awards 5 Other organizating 4 All other expenses 5 Other organizating 5 Other organizating 6 Software development 6 All other expenses 9 0,00 9 0 0 0 0 9 0 0 0 9 0 0 0 0 9 0 0 0 0		trustees, and key employees	335,721			
persons described in section 4958(c)(3)(8)	6	Compensation not included above, to disqualified				
7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payrol taxes 11 Fees for services (non-employees): a Management 10 Legal 11 Fees for services (non-employees): a Management 12 Accounting 13 Lobbying 14 Lobbying 15 Professional fundraising services. See Part IV, line 17 16 Investment management fees 17 Investment management fees 18 Other Arbitration and settlements 19 Other Arbitration and settlements 10 Other Arbitration and settlements 11 Fees for any feed of the feet		persons (as defined under section 4958(f)(1)) and]	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits		persons described in section 4958(c)(3)(B)	0			L
section 401(k) and 403(b) employer contributions). 9 Other employee benefits. 590,812 10 Payroll taxes. 11 Fees for services (non-employees): a Management. b Legal. c Accounting. d Lobbying. e Professional fundraising services. See Part IV, line 17. f Investment management fees. g Other Arbitration and settlements 12 Advertising and promotion. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7	Other salaries and wages	1,842,144			
9 Other employee benefits	8	Pension plan accruals and contributions (include				
10 Payroll taxes 174,678		section 401(k) and 403(b) employer contributions)	184,037			
11 Fees for services (non-employees): a Management. b Legal	9	Other employee benefits	590,812			
a Management b Legal .	10	Payroll taxes	174,678			
b Legal	11	Fees for services (non-employees):		,,,,		
d Lobbying e Professional fundraising services. See Part IV, line 17	а	Management				
d Lobbying e Professional fundraising services. See Part IV, line 17	b	Legal	88,343			
e Professional fundraising services. See Part IV, line 17. f Investment management fees 0 g Other Arbitration and settlements 39,385 12 Advertising and promotion 0 13 Office expenses 116,939 1 14 Information technology 0 15 Royalties 0 16 Occupancy 107,587 0 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 19 Conferences, conventions, and meetings 82,984 1 10 Interest 0 11 Payments to affiliates 0 10 Depreciation, depletion, and amortization 0 11 Insurance 15,930 1 20 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount, list line 24e expenses on Schedule 0.) a Scholarship awards 2,700	C	Accounting	14,578			
f Investment management fees g Chter Arbitration and settlements 39,385 2 Advertising and promotion 0 13 Office expenses 116,939 14 Information technology 0 15 Royalties 0 10 Cocupancy 107,587 17 Travel 194,755 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 19 Conferences, conventions, and meetings 82,984 10 Interest 0 10 Payments to affiliates 0 10 Depreciation, depletion, and amortization 0 10 Insurance 15,930 20 Insurance 15,030 21 Payments to affiliates 0 22 Depreciation, depletion, and amortization 0 23 Insurance 15,930 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 2 Scholarship awards 9,173 2 Contributions/memorials 9,173 2 Contributions/memorials 9,173 3 Colther organizing 13,337 4 Software development 10,150 2 All other expenses Add lines 1 through 24e 3,855,283 0 0 0 0 2 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if	d	Lobbying	0			
f Investment management fees g Chter Arbitration and settlements 39,385 2 Advertising and promotion 0 13 Office expenses 116,939 14 Information technology 0 15 Royalties 0 10 Cocupancy 107,587 17 Travel 194,755 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 19 Conferences, conventions, and meetings 82,984 10 Interest 0 10 Payments to affiliates 0 10 Depreciation, depletion, and amortization 0 10 Insurance 15,930 20 Insurance 15,030 21 Payments to affiliates 0 22 Depreciation, depletion, and amortization 0 23 Insurance 15,930 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 2 Scholarship awards 9,173 2 Contributions/memorials 9,173 2 Contributions/memorials 9,173 3 Colther organizing 13,337 4 Software development 10,150 2 All other expenses Add lines 1 through 24e 3,855,283 0 0 0 0 2 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if	е	Professional fundraising services. See Part IV, line 17	0	。統立、鐵物港工	多维心理心理	
Advertising and promotion 0 0 0 13 Office expenses 116,939 0 0 0 0 0 0 0 15 Royalties 0 0 0 0 0 0 0 0 16 Occupancy 17 Travel 196,755 0 17 Travel 196,755 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	f					
13 Office expenses	g	Other . Arbitration and settlements	39,385			
13 Office expenses	12	Advertising and promotion	0			
14	13		116,939			
16 Occupancy	14		0			
16 Occupancy	15	Royalties	0			
Travel	16		107,587			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . 0	17		196,755			
19 Conferences, conventions, and meetings	18					
19 Conferences, conventions, and meetings		for any federal, state, or local public officials	0			
20 Interest	19		82,984			
Depreciation, depletion, and amortization 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			0			
Depreciation, depletion, and amortization 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	21	Payments to affiliates	0			
15,930 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a Scholarship awards	22	Depreciation, depletion, and amortization	0	0	0	0
above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a Scholarship awards	23	·	15,930			
line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a Scholarship awards b Contributions/memorials c Other organizing d Software development e All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here	24	Other expenses. Itemize expenses not covered		运动 了被数字数数	(基金)(基金)	
line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a Scholarship awards b Contributions/memorials c Other organizing d Software development e All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here		above (List miscellaneous expenses in line 24e. If			· 1000 1000 1000 1000 1000 1000 1000 10	
(A) amount, list line 24e expenses on Schedule O.) a Scholarship awards b Contributions/memorials c Other organizing d Software development e All other expenses Total functional expenses. Add lines 1 through 24e . 3,855,283 5 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if		line 24e amount exceeds 10% of line 25, column				
a Scholarship awards b Contributions/memorials c Other organizing d Software development e All other expenses Total functional expenses. Add lines 1 through 24e. 3,855,283 0 0 0 0 0 0 0 0 0 0 0 0						
b Contributions/memorials 9,173 c Other organizing 13,337 d Software development 10,150 e All other expenses 30,030 25 Total functional expenses. Add lines 1 through 24e 3,855,283 0 0 0 0 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if	а	Cabalambin awarda	2,700			
c Other organizing 13,337 d Software development 10,150 e All other expenses 30,030 25 Total functional expenses. Add lines 1 through 24e . 3,855,283 0 0 0 0 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if	b	Contributions/memorials	9,173			
d Software development 10,150 e All other expenses 30,030 25 Total functional expenses. Add lines 1 through 24e . 3,855,283 0 0 0 0 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if	С	Other conscions	13,337			
e All other expenses 30,030 25 Total functional expenses. Add lines 1 through 24e . 3,855,283 0 0 0 0 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if	d	Cofficer development			7	
Total functional expenses. Add lines 1 through 24e . 3,855,283 0 0 0 0 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if	е					
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here	25				Ω	n
organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if			,			<u> </u>
from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if	-		l			
fundraising solicitation. Check here ▶ ☐ if						

AFSCME Council 65 41-0854876 Form 990 (2011) Page **11** Part X **Balance Sheet** (A) Beginning of year End of year 1 1,414 3.378 1.603.549 2 2 1,717,757 3 3 O 4 Ol 4 Receivables from current and former officers, directors, trustees, key 5 employees, and highest compensated employees. Complete Part II of Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Assets 7 8 8 Prepaid expenses and deferred charges . . 9 9 Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D | 10a | Less: accumulated depreciation 10b 10c b 0 ol 11 0 11 0 12 0 12 Investments—program-related. See Part IV, line 11 ol 13 0 13 ol 14 14 0 ol 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 1,604,963 16 1,721,135 16 17 17 18 18 19 19 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D. . 21 21 22 Payables to current and former officers, directors, trustees, key _iabilities employees, highest compensated employees, and disqualified 22 Secured mortgages and notes payable to unrelated third parties ol 23 23 ol Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Total liabilities. Add lines 17 through 25 ol 26 0 26 Organizations that follow SFAS 117, check here ► X and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 1,572,426 27 1,685,577 27 28 35,558 28 29 Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 30 30

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds . . .

31

32

33

34

1,721,135

1,721,135

31

32

33

34

1,604,963

1,604,963

Form 9	990 (2011) AFSCME Council 65	4	1-085487	'6 P	age 12
Paṛt	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				\Box
			·		<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,97	1,455
2	Total expenses (must equal Part IX, column (A), line 25)	2			5,283
3	Revenue less expenses. Subtract line 2 from line 1	3		11	6,172
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,60	4,963
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6		1,72	1,135
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response to any question in this Part XII				X
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		The state of the s	Yes	No
•	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?		. 2	<u>. </u>	X
b	Were the organization's financial statements audited by an independent accountant?		. 21) X	<u> </u>
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of			1
	the audit, review, or compilation of its financial statements and selection of an independent accountant? .		. 20	:	
	If the organization changed either its oversight process or selection process during the tax year, explain in	1			
	Schedule O.			g.	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		7.3		
	issued on a separate basis, consolidated basis, or both:				
	X Separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		1		
	the Single Audit Act and OMB Circular A-133?		. 3	<u>. </u>	<u> </u>
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.		31		<u> </u>
			For	m 990	(2011)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ.

See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities). then • Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations: Complete Part I-A only. If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B Do not complete Part II-B If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III Name of organization Employer identification number AFSCME Council 65 41-0854876 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. 3 Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 > \$ Enter the amount of any excise tax incurred by organization managers under section 4955 > \$ Yes No b If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function Enter the amount of the filing organization's funds contributed to other organizations Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1) Minnesota House DFL			350	0
(2) Minnesota Senate DFL			250	0
(3)			0	0
(4)			0	0
(5)			0	0
(6)			0	0

P	art II-A Complete if the organiz	ation is exempt	under section 5	01(c)(3) and filed	d Form 5768 (elec	ction
	under section 501(h)).					
A	Check ▶ if the filing organizatio	-			•	p member's
_	name, address, EIN,	•			•	
В	Check ▶ if the filing organization	n checked box A	and "limited cont	rol" provisions ap	ply.	
		Lobbying Expendi			(a) Filing	(b) Affiliated
	(The term "expenditures	s" means amounts	paid or incurred	<u>.)</u>	organization's totals	group totals
1a	Total lobbying expenditures to influence	ce public opinion (g	rass roots lobbying	3)		0
b	Total lobbying expenditures to influence	ce a legislative bod	y (direct lobbying) .			0
С	Total lobbying expenditures (add lines	1a and 1b)			0	0
d	Other exempt purpose expenditures .					0
е	Total exempt purpose expenditures (a	·			0	0
f	Lobbying nontaxable amount. Enter th	e amount from the	following table in b	oth	1	
	columns.				0	0
i	If the amount on line 1e, column (a) or (b		g nontaxable amou	nt is:		
	Not over \$500,000		mount on line 1e			
	Over \$500,000 but not over \$1,000,000		is 15% of the excess			
	Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000		is 10% of the excess of the ex			
	Over \$17,000,000 but not over \$17,000,000	\$225,000 pic	is 5% of the excess t	ver \$1,500,000.		
	Grassroots nontaxable amount (enter			<u></u>	0	0
g h	Subtract line 1g from line 1a. If zero or	•			0	0
"	Subtract line 1f from line 1c. If zero or	•			- 0	
;	If there is an amount other than zero of				<u></u>	
J	section 4911 tax for this year?		· · · · · · · · · · · · · · · · · · ·			Yes No
	(O	4-Year Averaging				
	(Some organizations the	at made a section low. See the instr				
	columns be	IOW. See the mon		a unougn zi on p	age 4.)	
	Lob	bying Expenditure	s During 4-Year	Averaging Period		
						·
	Calendar year (or fiscal year	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
	beginning in)					
				<u> </u>		
2a	Lobbying nontaxable amount		0	ĺ	اه	0
b	Lobbying ceiling amount	THE PERSON				
_	(150% of line 2a, column(e))			建模的操作		0
C	Total lobbying expenditures		0	0	0	0
ام	Grassroots nontaxable amount					
d			0	0	0	0
е	Grassroots ceiling amount					
	(150% of line 2d, column (e))					0
f	Grassroots lobbying expenditures		_			
•	Transfer is a strain and a stra		0	0	0	0

Schedule C (Form 990 or 990-EZ) 2011

Pai	t II-B Complete if the organization is exempt under section 501(c)(3) and has No (election under section 501(h)).	OT filed	l For	m 576	8	
For	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description		a)		(b)	
	e lobbying activity.	Yes	No	A	mour	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local	127	- (3)	11 6 6 7 19	X	THE P
	legislation, including any attempt to influence public opinion on a legislative matter or	\$ 05°	1.13			1
	referendum, through the use of:	ن منتخف	الإستان المستان			No.
a	Volunteers?		ļ			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?	\vdash	 		1 1 1 1	A 4 4 F - 17 E 4
c d	Media advertisements?	+	┼			
e	Publications, or published or broadcast statements?	-				
f	Grants to other organizations for lobbying purposes?		1			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					_
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i	~ ct	1			(
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			مردر کاریاده مردر کاریاده	P. William	**
þ	If "Yes," enter the amount of any tax incurred under section 4912	100	*****			
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	335		2007.00	N. Particon	1 e * 2 ee
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		i		AND LINKS	
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 50	1(c)(5),	or s	ection		
	501(c)(6).				T	1
	114 11 11 11 11 1000/ annual de la casa de destilla bernanda de C			<u></u>	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	X	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				-	X
3 Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 50				i	
ı aı	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."					3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of		188			
	political expenses for which the section 527(f) tax was paid).					
а	Current year		2a		<u> </u>	
b	Carryover from last year		2b			
C	Total		2c			0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	3 ·	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible		200	!		
_	lobbying and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)	• •	5			0
	t IV Supplemental Information	. Dark II	A	10-1		4
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, complete this part for any additional information.	r, Part II	-A; ar	o Pan	II-B, II	ine 1.
	ng 2011, Council 65 mobilized its members in support of its political and legislative objectives. The	nolitical	ohiec	live wa	e to h	21/0
ւրայլ	14 2011, Council do mobilized la membera il support of to golden und logislative objectives. The	onice.	opled	rī vē viā	3.10.11	ave
mem	bers vote for candidates endorsed by Council 65. The legislative objective was to pass legislation to	o help (Counc	il 65 m	embe	rs
je: fu	inding for public services, job security, right to organize, etc.					

A	FSCME Council 65 C (Form 990 or 990-EZ) 2011				41-0854876
					Page 4
Part IV	Supplemental	Information (continued)			
					••••••
				••••	
			••		
				• • • • • • • • • • • • • • • • • • • •	***************************************
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					•••••

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	CME Council 65		41-0854876
Par		or Advised Funds or Other Similar F	Funds or Accounts. Complete if
	the organization answered "Yes" to	(a) Donor advised funds	(b) Eurode and other asserts
1	Total number at end of year	(a) Donor advised failes	(b) Funds and other accounts
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year	<u></u>	
5	Did the organization inform all donors and d	onor advisors in writing that the assets he	eld in donor advised
	funds are the organization's property, subject		
6	Did the organization inform all grantees, dor	nors, and donor advisors in writing that gra	
	used only for charitable purposes and not for		
	purpose conferring impermissible private be		
Part	Conservation Easements. Comp	lete if the organization answered "Yes	s" to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held	by the organization (check all that apply).	
	Preservation of land for public use (e.g., recr		n of an historically important land area
	Protection of natural habitat		n of a certified historic structure
	Preservation of open space		n or a contined motoric structure
2	Complete lines 2a through 2d if the organiza	ation held a qualified consequation contribu	ution in the form of a consequation
_	easement on the last day of the tax year.	adon field a qualified conservation contribu	duon in the form of a conservation
	casemone on the last day of the tax your.		Held at the End of the Tax Year
а	Total number of conservation easements.		
b	Total acreage restricted by conservation eas	sements	
C	Number of conservation easements on a ce		
d	Number of conservation easements include	d in (c) acquired after 8/17/06, and not on	a
	historic structure listed in the National Regis		<u>2d</u>
3	Number of conservation easements modifie	d, transferred, released, extinguished, or t	terminated by the organization
	during the tax year ▶		
4	Number of states where property subject to	••	***********
5	Does the organization have a written policy		
_	violations, and enforcement of the conserva		
6	Staff and volunteer hours devoted to monito	ring, inspecting, and enforcing conservation	on easements during the year
-	Amount of auropean incurred in monitoring	inapacting and enforcing concentration of	page and a dissipation was
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation ea	asements during the year
8	Does each conservation easement reported	on line 2(d) above satisfy the requirement	te of section
U	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	• •	
9	In Part XIV, describe how the organization re		
•	balance sheet, and include, if applicable, the		•
	the organization's accounting for conservation	_	
Part		ons of Art, Historical Treasures, or Othe	er Similar Assets.
	Complete if the organization answered	d "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted und	er SFAS 116 (ASC 958), not to report in it	s revenue statement and balance sheet
	works of art, historical treasures, or other sir		
	of public service, provide, in Part XIV, the ter		The state of the s
b	If the organization elected, as permitted und	er SFAS 116 (ASC 958), to report in its re	venue statement and balance sheet
	works of art, historical treasures, or other sin		
	of public service, provide the following amou		
	(i) Revenues included in Form 990, Part VIII	l, line 1	> \$
	(ii) Assets included in Form 990, Part X		• \$
2	If the organization received or held works of		• • • • • • • • • • • • • • • • • • • •
	following amounts required to be reported un		
а	Revenues included in Form 990, Part VIII, lin		
b	Assets included in Form 990, Part X		• \$

	AFSCME Council 65				41-08	354876	
Sched	ule D (Form 990) 2011			·			Page 2
Part							
3	Using the organization's acquisition, a		er records, chec	k any of the follow	ing tha	at are a significa	int
	use of its collection items (check all the	nat apply):	. — .				
а	Public exhibition		=	an or exchange p	ogram	S	
b	Scholarly research		e [Oth	ier			
C	Preservation for future generati	ons					
4	Provide a description of the organizat Part XIV.	ion's collections and	d explain how th	ney further the org	janizati	ion's exempt pu	rpose in
5	During the year, did the organization sassets to be sold to raise funds rather						Yes No
Part	IV Escrow and Custodial Arra IV, line 9, or reported an amo	_	•		ered "Y	es" to Form 9	90, Part
1a	Is the organization an agent, trustee,	custodian or other i	intermediary for	contributions or o	ther as	ssets not	·
	included on Form 990, Part X?						Yes No
b	If "Yes," explain the arrangement in P	art XIV and comple	te the following	table:		·	
					<u> </u>	Α	mount
C	Beginning balance				1c		0
ď	Additions during the year				1d		
e	Distributions during the year Ending balance				1e	 	0
f	_					1	
2a	Did the organization include an amou		IT X, line 21?.				Yes X No
b	If "Yes," explain the arrangement in P Endowment Funds. Complete the		tion answered	"Ves" to Form	aan D	art IV line 10	<u></u>
Part	Endowment Funds. Comple	(a) Current year	(b) Pnor year	(c) Two years ba		d) Three years back	(e) Four years back
1a	Beginning of year balance	Q O	(2)1 1101 1001	0	0 ,	ay three years back	(c) Four years back
b	Contributions			1	<u> </u>	 	
c	Net investment earnings, gains,						A STATE OF THE STA
_	and losses						
d	Grants or scholarships						
е	Other expenditures for facilities						
	and programs						
f	Administrative expenses						GENERAL SERVICES
g	End of year balance	0		0	0		25484
2	Provide the estimated percentage of			g, column (a)) he	ld as:		
а	Board designated or quasi-endowmer		<u></u> %				
b	Permanent endowment	<u></u> %.					
С	Temporarily restricted endowment	► %	00/				
	The percentages in lines 2a, 2b, and	zc snoula equal 10	U%.				

Describe in Part XIV the intended uses of the organization's endowment funds.

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
	Land	0	0		
b	Buildings	0	0	0	
С	Leasehold improvements	0	0	0	
d	Equipment	0	0	0	
e	Other	0	0	0	
	I. Add lines 1a through 1e. (Column (d) must	equal Form 990, Part >	K, column (B), line 10	(c).) ▶	

Yes

No

Part VII	Investments—Other Securiti	es. See Form 990, Part X,	line 12.
) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
	derivatives	0	
	neld equity interests	0	
		0	
		0	
(B)		0	
(c)		0	
(E)		0	
(F)		0	· · · · · · · · · · · · · · · · · · ·
(G)		0	
(H)		0	
(l)		0	
	must equal Form 990, Part X, col (B) line 12)		。 1. 1000年的中央中央社会的企业。 1. 1000年的中央工会的企业。 1. 1000年的中产工会的企业。 1. 1
Part VIII	Investments—Program Relat	ed. See Form 990, Part X	, line 13.
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)	<u></u>	0	
(2)		0	
(3)		0	
(4)		0	
(5)		0	
<u>(6)</u>		0	
(8)		0	
(9)		0	
(10)		0	
) must equal Form 990, Part X, col (B) line 13)	0	AN RELEASED HOUSE STATE OF THE PROPERTY OF THE
Part IX	Other Assets. See Form 990,	Part X, line 15.	
	(a) Description	(b) Book value
(1)			0
(2)			0
(3)			0
(4)			0
(5)			0
(6)			0
(8)			
(9)			0
(10)			0
	mn (b) must equal Form 990, Part X,	col. (B) line 15.)	
Part X	Other Liabilities. See Form 99		
1.	(a) Description of liability	(b) Book value	
	I income taxes	0	
(2)		0	
(3)		0	
(4)		0	
(5)		0	
		0	
(8)		0	
(9)			
(10) (11)			
	must equal Form 990, Part X, col (B) line 25)	o	

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).

Sched	ule D (Form 990) 2011			Page 4
Par	Reconciliation of Change in Net Assets from Form 990 to	Audited Financial	Statements	3
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	3,971,455
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	3,855,283
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	116,172
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	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines		10	116,172
Par	Reconciliation of Revenue per Audited Financial Statemer		per Return	
1	Total revenue, gains, and other support per audited financial statements			3,971,455
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		£154	.,,
- a	Net unrealized gains on investments	2a	4.2	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c	2.5	
ď	Other (Describe in Part XIV.)	2d		
e	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		}	3,971,455
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
*	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
a b	Other (Describe in Part XIV.)	4b		
_	Add lines 4a and 4b	L	4c	0
С 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			3,971,455
	t XIII Reconciliation of Expenses per Audited Financial Statemen			
	Total expenses and losses per audited financial statements		4	3,855,283
1	Amounts included on line 1 but not on Form 990, Part IX, line 25:		9:42/3	3,033,203
2	Donated services and use of facilities	2a	7.2	
a		2b		
b	Prior year adjustments	26 2c		
C	Other losses			
d	Other (Describe in Part XIV.)	2d		•
е	Add lines 2a through 2d		2e	0.055.000
3	Subtract line 2e from line 1	i · · i · · · · · · ·	3	3,855,283
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		
b	Other (Describe in Part XIV.)		45.4	_
C	Add lines 4a and 4b			0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	3.)	5	3,855,283
	t XIV Supplemental Information			
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; F	Part III, lines 1a and 4;	Part IV, line	s 1b
	2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Pa	rt XIII, lines 2d and 4t	o. Also comp	lete
this	part to provide any additional information.			
	· <u>·</u>			-
		• • • • • • • • • • • • • • • • • • • •		

•	AFSCME Council 65			41-0854876	
Schedule D (Form		n (continued)			Page
Part XIV	Supplemental Informatio	ii (continuea)			
			•••••		
					••••••
				•	

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

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

2011

Open to Public Inspection Employer Identification number

41-0854876 AFSCME Council 65 **Questions Regarding Compensation** Part I Yes N۸ Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 1a 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 Payments for business use of personal residence Travel for companions Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) 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 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?. Indicate which, if any, of the following the filing organization used to establish the compensation of the 3 organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III. X Written employment contract Compensation committee Independent compensation consultant Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization: 4a 4b b 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 5 compensation contingent on the revenues of: The organization?.............. 5a 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 6 compensation contingent on the net earnings of: 6b If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was 8 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 9

Regulations section 53.4958-6(c)?

Schedule J (Form 990) 2011

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

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 instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII. Section A, line 1a, applicable column (D) and (E) amounts for that individual Note. The sum of columns (B)(i)—(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

Note: The sufficient of columns (B)(1) (iii) for each instead individual mass equal tra	וופונים	(B) Brockdown of 1//	W. 2 and/or 1000_MIS	C compensation				
		(a) Dieandowii O	5000	١	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(I) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)+(D)	reported as deferred in prior Form 990
	5	112 008		5 400	11 216	22 233	151 757	0
Steve Preble	€	0	0	0	0	0		0
	€	0			0	0	0	0
7	E	0	0	0	0	0	0	0
	€	0	0		0	0	0	0
2	(II)	0	0	0	0	0		0
	Θ	0	Ö	0	0	O	0	0
4	(11)			0	O	0		0
	€				0	0		0
ı۵	€	0	0	0	0	0	0	0
	ε				0	0	0	0
9	€	0			0	0		
	€				0	0	0	
_	€	0			0	0		
	€	0			0	0	0	0
8	(E)	0			O	0		
	€				0	0	0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
6	€	0			0	0		
	€		0		0	0	O	
10	(E)	0			0	0		
	€	0		0	0	0	0	1
11	<u>(ii)</u>	0	0		0	0		
	€	0			0	0	0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
12	€		0		0	0		
	€	0	O	0	O	0	0	
13	€				0	0		
	€	0	0		0	0	0	
14	Ξ				0	0		
	€	0	0	0	0	O	O	
15	€				0	0		
	€	0	0	0	0	O	ō	0
16	€				0	0		

Schedule J (Form 990) 2011

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. 41-0854876 Also complete this part for any additional information Supplemental Information AFSCME Council 65 Schedule J (Form 990) 2011 Part III

Schedule J (Form 990) 2011

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Attach to Form 990 or 990-EZ. Name of the organization **Employer identification number AFSCME Council 65** 41-0854876

Part VI Sec A #6 - The Organization has 13,750 members.
Part VI Sec A #7a&b - Members elect a Board of Directors every three years at the annual convention. The Board makes decisions
on behalf of members unless it involves a constitutional issue.
Part VI Sec B #11 - 990 is prepared externally and reviewed and signed by an officer. It is not reviewed by the full Board. The
"Audited Financial Statements" are reviewed by the Trustee who report to the Board, however.
Part VI Sec B #15 a&b - Board sets salary of the Executive Director and other key employees.
Part VI Sec C #19 - Information is provided only upon request.
Part XII #2 - The Executive Director, Executive Officers and Trustees provide financial oversight and select the auditor.+
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Form **8868**

(Rev. January 2012)

Department of the Treasury
□Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see Instructions Name of exempt organization or other filer, see instructions. Type or Employer identification number (EIN) or print AFSCME Council 65 X 41-0854876 Number, street, and room or suite no. If a P.O. box, see instructions File by the Social security number (SSN) due date for filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions return. See MN 55769 Enter the Return code for the return that this application is for (file a separate application for each return) 01 **Application Application** Return Return Is For Code Is For Code 01 Form 990 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 990-EZ 01 Form 4720 09 Form 5227 Form 990-PF 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 The books are in the care of ► Linda Kresal Telephone No. ▶ 218-885-3242 FAX No. ▶ • If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) 1381 . If this is list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2011 or ▶ tax year beginning , and ending 2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 3a nonrefundable credits. See instructions. За If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.