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DLN: 93493319004332

Form **990**

Department of the Treasury

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)

2011

OMB No 1545-0047

ZVII

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

Open to Public

A 10	or the 2	2011 ca	lendar year, or tax year beginning 01-01	-2011 and ending 12-31-201	1	D F		
		pplicable	C Name of organization AMERICAN FEDERATION OF STATE COUNTY				identification number	
	dress ch	_	AND MUNICIPAL EMPLOYEES Doing Business As		_	53-0237 E Telephon		
	me char					(202)42	29-1000	
_	tial retur rminated		Number and street (or P O box if mail is not on 1625 L STREET NW	delivered to street address) Room/su	ite		upts \$ 171,567,387	
_	nended r		City or town, state or country, and ZIP + 4		_			
— _{Арі}	plication	pending	WASHINGTON, DC 200365687					
			F Name and address of principal of	ficer	H(a) Is thi	s a droup re	turn for	
			GERALD W MCENTEE 1625 L STREET NW		affilia		⊤Yes ∀ No	
			WASHINGTOND, DC 20036		H(b) Are all	affiliates inc	cluded?	
					If "No	," attach a	list (see instructions)	
		pt status	501(c)(3)) 4947(a)(1) or 527	H(c) Grou	p exemption	number ►	
			afscme org		<u> </u>		1	
			Corporation Trust 🗸 Association Other	r 🏲	L Year of for	mation 1932	M State of legal domicile DO	
Pa	rt I	Sumi	<u> </u>					
<u> </u>	т	ГНЕ АМЕ	escribe the organization's mission or mo ERICAN FEDERATION OF STATE, COU ORGANIZATION REPRESENTING WOR	JNTŸ AND MUNICIPAL EMPL				
Governance	-							
<u>.</u>	-							
3			is box 🔰 if the organization discontinu			1	1	
ණ ග			of voting members of the governing body				3 37 4 0	
Activities &			of independent voting members of the go nber of individuals employed in calendar			_	5 666	
∄			nber of volunteers (estimate if necessar			<u> </u>	6 000	
đ,			elated business revenue from Part VIII		_	/a (
			ated business taxable income from Forr			_	'b 0	
					Prio	r Year	Current Year	
	8	Contrib	outions and grants (Part VIII, line 1h)			(0 0	
E E	9	Progra	m service revenue (Part VIII, line 2g)	1	55,767,57	7 165,899,122		
Revenue	10	Invest	ment income (Part VIII, column (A), line		484,55	5 385,888		
	11		revenue (Part VIII, column (A), lines 5,		5,016,45	2 5,282,377		
	12		evenue—add lines 8 through 11 (must e			61,268,58	4 171,567,387	
	13		and similar amounts paid (Part IX, colu			8,765,51		
	14	Benefit	s paid to or for members (Part IX, colun	nn (A), line 4)		(0 0	
8	15	Salarıe 5–10)	s, other compensation, employee benef	ts (Part IX, column (A), lines		68,726,77	7 72,185,726	
Expenses	16a	•	sional fundraising fees (Part IX, column	(A), line 11e)			0 0	
ੜੇ	Ь	Total fur	ndraısıng expenses (Part IX, column (D), line 25)	▶ .0				
	17	Other	expenses (Part IX, column (A), lines 11	a-11d,11f-24e)	83,628,886 77,320			
	18		xpenses Add lines 13–17 (must equal		1	161,121,178		
	19	Revenu	ue less expenses Subtract line 18 from	line 12		147,40	5,405,347	
900 200						of Current ear	End of Year	
Net Assets or Fund Balances	20	Total a	ssets (Part X, line 16)			88,455,45	1 101,599,858	
4 E	21	Total lı	abilities (Part X, line 26)			70,046,13	3 83,141,103	
žÏ	22	Net as:	sets or fund balances Subtract line 21	from line 20		18,409,31	8 18,458,755	
Pa	rt II	Signa	ature Block					
			rjury, I declare that I have examined this ro , it is true, correct, and complete. Declarat					
	ledge.	ara berei	, it is true, correct, and completes becaute	ion of preparer (other than office	, 15 Buscu 011 (ar mormacio	m or minen property mas any	
		T k			<u> </u>			
C:	_	Signal	** ture of officer		20 Da	12-11-07 te		
Sigr Her		[
			AUNDERS INTL PRESIDENT or print name and title					
		Prenarer	s k	Date	Check If	Preparer's ta	expayer identification number	
Paid		signature DAVID P DORSEY self-				1 ' '		
	arer's	Firm's na	me (or yours BOND BEEBE					
Use		ıf self-em		ITTE 900		EIN 🕨		
	-	Lauricss,	SING EN 1 THE HOUSE EAST-WEST DISTRIBUTION AT SU	Phone no (301) 272-6000				
			BETHESDA, MD 208143423			Phone no 🕨	(301) 272-6000	

Par	t III	Statement of Program S Check if Schedule O contains a				୮
RG AFS	AMER: SANIZA CME SU	ly describe the organization's mis ICAN FEDERATION OF STATE, ITION REPRESENTING APPRO UPPORTS THE ORGANIZING A IT WORKING MEN AND WOMEN	COUNTY AND MUNIC	WORKERS IN THE PU	BLIC SERVICE AND HEALT	H CARE SECTORS
2	the pr	ne organization undertake any sig rior Form 990 or 990-EZ?				es 🗸 No
	If "Ye	s," describe these new services	on Schedule O			
3	servi	ne organization cease conducting ces?			cts, any program	′es ✓ No
	If "Ye	s," describe these changes on S	chedule O			
4	exper	ribe the organization's program s nses Section 501(c)(3) and 501 s and allocations to others, the t	(c)(4) organizations an	id section 4947(a)(1) t	rusts are required to report th	
4a	ORGA	e) (Expenses \$ ORTED AFFILIATED LOCAL UNIONS AND ANIZATIONS BEFORE THE U S CONGRES AREAS OF EDUCATION, PUBLIC POLICY,	DISTRICT COUNCILS IN ORO S, PROVIDED RESEARCH SE	RVICES FOR CONTRACT AN		
4b	(Code	e) (Expenses \$	Inc	luding grants of \$) (Revenue \$)
4 c	(Code	e) (Expenses \$	Inc	luding grants of \$) (Revenue \$)
					_	
			0 1 1 1 6 3			
4d		er program services (Describe ii penses \$	Schedule O) including grants of \$,) (Revenue \$)
4e	Tota	ıl program service expenses►\$				

Dart TV	Checklist	of Pegui	ired Sc	hedules

			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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Νo
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	Yes	
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	Yes	
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 1883	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		N o
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		No
11	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, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	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		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	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, Part I	14b		No
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 U S? If "Yes," complete Schedule F, Part II and IV.	15		No
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 U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	rt IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizathe United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	tions in 21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United S on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	tates 22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10 as of the last day of the year, that was issued after December 31, 2002? <i>If</i> "Yes," answer questions 24b-24 complete Schedule K. If "No," go to line 25			No
b	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? \cdot	· · 24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction a disqualified person during the year? If "Yes," complete Schedule L, Part I	on with 25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a pi year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E "Yes," complete Schedule L, Part I			
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employ disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	yee, or 26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, subscontributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	stantial 27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, I instructions for applicable filing thresholds, conditions, and exceptions)	Part IV		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV </i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereon an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	of) was 28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32		olete 32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulation sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	ns % 33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, II and V, line 1	I, IV, 34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(I	o)(13)? 35a	Yes	
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	the 35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable relations are supported by the section of the section	ited 36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organiza and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI			No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 an Note. All Form 990 filers are required to complete Schedule O	38	Yes	
			orm 99 0	(2011)

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check it Schedule O contains a response to any question in this Part V	<u> </u>	• 1	
			Yes	No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 304			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
a.	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10	163	
	Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	103	
a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b		
a	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 or securities	4a		No
ь	account)?			110
	If "Yes," enter the name of the foreign country ►			
a b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a		No No
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b		
U	11 163 to fine 3a of 3b, and the organization me Form 6000-17	5c		
а	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		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
,	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	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		
1	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the aggregate amount of reserves on hand 13c			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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

Se	ection 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			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	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	9		No
	ection B. Policies (This Section B requests information about policies not required by the Internal			
ке	evenue Code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	140
	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	10b	Yes	
11a	purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990	114		NO
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			
	bla the organization have a written commet or interest ponery. If ho, go to fine 15 i i i i i i	12a	Yes	
	Were officers, directors or trustees, and key employees required to disclose annually interests that could give	12a	Yes	
	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	Yes Yes	
	rise to conflicts?			No
	rise to conflicts?	12b	Yes	No No
c	rise to conflicts?	12b 12c		
c 13	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13	Yes	
c 13 14 15	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	12b 12c 13	Yes	
c 13 14 15	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14	Yes	No
c 13 14 15	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	12b 12c 13 14	Yes	No No
c 13 14 15 a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14	Yes	No No
c 13 14 15 a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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 the	12b 12c 13 14 15a 15b	Yes	No No No
c 13 14 15 a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14 15a 15b	Yes	No No No
c 13 14 15 a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14 15a 15b	Yes	No No No
c 13 14 15 a b 16a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14 15a 15b	Yes	No No No

☐ O wn website ☐ A nother's website ☐ Upon request

- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 CHARLES JURGONIS 1625 L STREET NW WASHINGTON, DC 200365687

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees 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, or 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 or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee
(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Additional Data Table										
				\vdash			_			

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Tıtle	(B) A verage hours per week (describe	A verage hours per week (describe director/trustee) Position (do not check more than one box, unless person is both an officer and a director/trustee)							(D) ortable ensation m the zation (W- 9-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-		(F) Estimated amount of other compensation from the organization and related	
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relat organiza	
See A	dditional Data Table											\dashv		
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1b c	Sub-Total		tion A			•		<u>*</u>				+		
d							•	•		4,738,313		0	!	5,824,854
2	Total number of individuals (inclusion),000 of reportable compens						above) who	o receive	ed more tha	an			
_													Yes	No
3	Did the organization list any form on line 1a? <i>If</i> "Yes," complete Sch					еу е •	mploy •	ee, d	or highes	t compens	ated employee	3		No
4	For any individual listed on line 1													
	organization and related organiza	itions greater tr		•	•	•	• •	, •	ete Scried	• • •		4	Yes	
5	Did any person listed on line 1a services rendered to the organiza										or individual for			
	services rendered to the organiza	acion 11 763, (compree	.c ocn	cuu	C 3 7	or suci	i pei	3011		•	5		No_
	Complete this table for your five		antad .	ından	and	ont 4	- ontro	ator	that rad	anuad mar	a than			
	Complete this table for your five \$100,000 of compensation from or within the organization's tax you	the organizatio ear									ng with			
		(A) ne and business add	dress							Desc	(B) ription of services		Comper	
1701 CHEV	PRESS INC CABIN BRANCH DRIVE ERLY, MD 20785									PRINTING			1	,159,036
1701 CHEV	YENTION SERVICES UNLIMITED CABIN BRANCH DRIVE ERLY, MD 20785 T. AMEDICAN MEDIA INC.									CONVENTIO	N SERVICES			475,232
1010 WASH	T AMERICAN MEDIA INC WISCONSIN AVE NW STE 800 HINGTON, DC 20007 A STRATEGIES RESEARCH									MEDIA PROE	DUCTION			779,355
1580	A STRATEGIES RESEARCH LINCOLN STREET STE 510 ER, CO 80203									MEDIA CONS	SULTANT			700,550
805 F	BREDHOFF KAISER PLLC							680,347						

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization $\blacktriangleright 31$

Part v		Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
松松	1a	Federated campaigns 1a					
듄	ь	Membership dues 1b					
SE .	c	Fundraising events 1c	-				
£e ≝±	d	Related organizations 1d					
हर्≝	e	Government grants (contributions) 1e					
동등	_						
e F	f	All other contributions, gifts, grants, and 1f similar amounts not included above					
들는 '	g	Noncash contributions included in					
Contributions, gifts, grants and other similar amounts		lines 1a-1f \$					
ठॅल	h	Total. Add lines 1a-1f	· · · •	0			
gy.			Business Code				
Ę	2a	REIMBURSEMENTS	900099	274,667	274,667		
92 92	ь	MEMBERSHIP DUES AND ASSESSMENTS	900099	165,624,455	165,624,455		
ъ П	l c			, ,	, ,		
ž	d						
33							
Program Serwce Revenue	e						
8	f	All other program service revenue					
Ě	g	Total. Add lines 2a-2f	` ▶	165,899,122			
	3	Investment income (including dividen		, , .–			
		and other similar amounts)	. F	385,888			385,888
	4	Income from investment of tax-exempt bond		0			
	5	Royalties	· · · · · ·	3,363,445			3,363,445
		(ı) Real	(II) Personal				
	6a	Gross rents	(,				
	ь	Less rental					
		expenses Pontal income					
	C	Rental income or (loss)					
	d	Net rental income or (loss)	•				
		(ı) Securities	(II) Other				
	7a	Gross amount from sales of					
		assets other					
	Ь	than inventory Less cost or					
		other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)		О			
	8a	Gross income from fundraising					
<u>Φ</u>		events (not including					
泵		\$					
ž		of contributions reported on line 1c) See Part IV, line 18					
Other Revenue		a					
Ē	ь	Less direct expenses b					
ᅙ	c	Net income or (loss) from fundraising	events 🕨	О			
	9a	Gross income from gaming activities	ı t				
		See Part IV, line 19					
		a					
	ь	Less direct expenses b					
	С	Net income or (loss) from gaming acti	vities 🟲	0			
	10a	Gross sales of inventory, less returns and allowances .					
	ь	Less cost of goods sold b					
	_ c	Net income or (loss) from sales of inv	entory 📂	О			
	<u> </u>	Miscellaneous Revenue	Business Code				
	11a	MISCELLANEOUS	900099	795,489			795,489
	ь		900099	1,123,443			1,123,443
		EXPENSE REIMBURSEMENTS	200033	_,,			_,,
	°						
	d	All other revenue					
	е	Total. Add lines 11a-11d		1,918,932			
	12	Total revenue. See Instructions .	· .	171,567,387	165,899,122		5,668,265

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)

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

	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	16 545 400			
2	Grants and other assistance to individuals in the	16,545,489			
	United States See Part IV, line 22	110,000			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	3,827,873			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	44,953,434			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,475,982			_
9	Other employee benefits	16,079,155			_
10	Payroll taxes	3,849,282			
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	1,501,566			
c	Accounting	431,162			
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	4,559,156			
12	Advertising and promotion	2,644,901			
13	Office expenses	7,947,323			
14	Information technology	702,516			
15	Royalties	0			
16	Occupancy	3,754,586			
17	Travel	16,886,856			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	3,163,357			
20	Interest	0			
21	Payments to affiliates	32,546,372			
22	Depreciation, depletion, and amortization	1,013,873			
23	Insurance	395,843			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	BAD DEBT EXPENSE	1,181,576			
b	REIMBURSED SALARIES/LOST TIME	238,905			
c	PERSONAL PROPERTY TAXES	167,955			
d	DUES REFUNDS	123,520			
e					
f	All other expenses	61,358			
25	Total functional expenses. Add lines 1 through 24f	166,162,040			
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				orm 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 298,638 397,457 1 6.826.876 14,256,434 2 2 Savings and temporary cash investments 3 3 0 12.052.344 9.859.957 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 0 5 0 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 0 0 6 1,425,000 854,000 7 314.251 8 238.588 708,395 9 9 1,286,361 Prepaid expenses and deferred charges 10a 29,311,693 Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b 26,745,194 b Less accumulated depreciation 2,984,296 10c 2,566,499 60,145,017 11 69,105,551 11 12 12 Investments—other securities See Part IV, line 11 13 13 0 Investments—program-related See Part IV, line 11 . . 0 14 14 3,700,634 15 3,035,011 15 88,455,451 101,599,858 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 4,724,273 17 6,705,493 17 Accounts payable and accrued expenses . 18 18 0 19 1,600,000 19 5,587,648 20 20 Ω 21 21 0 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 0 0 22 0 0 23 Secured mortgages and notes payable to unrelated third parties . . . 23 0 24 Unsecured notes and loans payable to unrelated third parties 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 63,721,860 25 70,847,962 D 26 70,046,133 26 83,141,103 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 18,409,318 27 18,458,755 Unrestricted net assets 0 28 0 28 Temporarily restricted net assets Fund 29 0 29 0 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶

and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 18.409.318 33 18.458.755 34 Total liabilities and net assets/fund balances 88.455.451 34 101.599.858

Pal	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		171,5	567,38
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1	3		5,4	105,34
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		18,4	109,31
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-5,3	355,91
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		18,4	158,75
Par	Check if Schedule O contains a response to any question in this Part XII			୮	
1	Accounting method used to prepare the Form 990			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? \cdot .		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
C	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c		No
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	☐ Separate basis ☐ Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

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DLN: 93493319004332

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Political Campaign and Lobbying Activities

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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-A

If the organization answered "Yes." to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-FZ, line 35c (Proxy Tax), then

Name of the automotion	C
◆ Section 501(c)(4), (5), or (6) organizations Complete Part III	
in the organization answered rest, to rorm soo, raitiv, Line of roxy raxy or rorm soo-Lz,	mic ood (i roxy rax), men

Employer identification number Name of the organization AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES 53-0237789

- Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV
- Political expenditures 3 Volunteer hours
- Part I-B 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
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955
- If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3
- Was a correction made? Yes
- 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 activities 1
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities
- Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- 4 Did the filing organization file Form 1120-POL for this year?
- 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) A mount 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) AFSCME PEOPLE CONTRIBUTIONS CMTE	1625 L STREET NW WASHINGTON, DC 20036	52-1456472		8,643,244
(2) AFSCME SPECIAL ACCOUNT	1625 L STREET NW WASHINGTON, DC 20036	91-2064198		12,765,847
(3) AFSCME FOR ERIE COUNTY	1625 L STREET NW WASHINGTON,DC 20036	45-3641001		222,199

f Grassroots lobbying expenditures

(The term "expenditures" means amounts paid or incurred.) Lia Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 over \$1,000,000 but not over \$1,000,000 \$1,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)	ווטפ	edule C (F	01111 9 9 0 01 9 9 0 - EZ) 2 0 1 1					Page ∠
A Check If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member expenses, and share of excess lobbying expenditures) Check If the filing organization checked box A and "limited control" provisions apply Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures to influence a legislative body (direct lobbying)	Pa	rt II-A		n is exempt under	section 501(c)(3) and fi	iled Form 5768	(election
expenses, and share of excess lobbying expenditures) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures to influence public opinion (grass roots lobbying) Lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total obtaining purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,000 S1	١	Check		an affiliated group (and	lıst ın Part IV ea	ch affiliated gr	oup member's nam	e, address, EIN,
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Total lobbying expenditures to influence public opinion (grass roots lobbying) Total lobbying expenditures (add lines 1 aand 1b) Other exempt purpose expenditures (add lines 1 aand 1b) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line Le, column (a) or (b) is: If the amount on line Le, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S10,000,000 Over \$1,000,000 but not over \$1,000,000 S10,000,000 Fig. Soon over \$1,000,000 Fig. Soon ov			expenses, and share of excess lob	bying expenditures)		_	•	
Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S175,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S175,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S175,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S175,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S175,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$	3	Check	ıf the filing organization checked bo	ox A and "limited contro	ol" provisions app	ly	1	1
(The term "expenditures" means amounts paid or incurred.) Ital Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1225,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but			Limits on Lobbying	Expenditures			(a) Filing	(b) Affiliated
Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S175,000 plus 15% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S100,000 plus 15% of the excess over \$1,000,000 Over \$1,000,000 Over \$1,000,000 Over \$1,000,000 The lobbying nontaxable amount is: Not over \$500,000 Over \$1,000,000 Over \$1,000,00					l.)		Organization's Totals	Group Totals
b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,7000,000 Over \$1,000,000 but not over \$1,7000,000 S225,000 plus 15% of the excess over \$1,000,000 Over \$1,7000,000 Over \$1,7000,000 F17,000,000 S225,000 plus 5% of the excess over \$1,500,000 Over \$1,7000,000 F17,000,000 S1,000,000 F17,000,000 F17,000,		-			1 \		100013	1 ocars
c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 Over \$1,000,000 In over \$1,000				· -				
d O ther exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000					ying)			
Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is:			,	b)				
f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$17,000,000 but not over \$1,7000,000 Over \$17,000,000 but not over \$17,000,000 S225,000 plus 10% of the excess over \$1,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 S225,000 plus 5% of the excess over \$1,000,000 Over \$17,000,000 Over \$17,000,000 S1,000,000 S1,000,0	d	Otherexe	empt purpose expenditures					
Columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,000,000 Over \$1,000,000 Over	e	Total exe	mpt purpose expenditures (add lines 1	.c and 1d)				
Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,000,000 Over \$1,500,000 but not over \$1,000,000 S225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 S1,000,000 Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- Subtract line 1f from line 1c If zero or less, enter -0- If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying celling amount	f		nontaxable amount Enter the amount	from the following table	in both			
Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,000,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,00		If the an	ount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Section \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1ffrom line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount		Not over \$5	500,000	20% of the amount on lii	ne 1e			
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,00		Over \$500,	000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying celling amount		Over \$1,00	0,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1ffrom line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount		Over \$1,50	0,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	000		
h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount		Over \$17,0	00,000	\$1,000,000				
h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount								
i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount		Grassroo	ts nontaxable amount (enter 25% of li	ne 1f)				
i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount	h	Subtract	line 1a from line 1a If zero or less. en	ter -0 -				
Jection 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying ceiling amount								
4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount					organization file	Form 4720 re	portina	
(Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount							F - 1 - 1 - 1 - 1	┌ Yes ┌ No
Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2009 Lobbying non-taxable amount		(Sor	ne organizations that made a	section 501(h) el	ection do not	have to co		ne five
beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying non-taxable amount b Lobbying ceiling amount			Lobbying Exp	enditures During	4-Year Avera	ging Period	d	
b Lobbying ceiling amount				(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
	2a	Lobbyin	g non-taxable amount					
	b							
c Total lobbying expenditures	c	Total loi	obying expenditures					
d Grassroots non-taxable amount	d	Grassro	ots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	e							

	run er
Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

		(6	(a)		(b)	
		Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
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	O ther activities? If "Yes," describe in Part IV					
j	Total lines 1c through 1:					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	01(c)(5), o	rse	ectio	<u> </u>
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		Νo
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		Νo
Pai	tt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".				ectio	1
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		_			

_	baco, abbesoments and similar amounts from members	L
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	Γ
	expenses for which the section 527(f) tax was paid).	l
2	Current year	L

- Carryover from last year
- c Total
- 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues
- 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 lobbying and political expenditure next year?
- Taxable amount of lobbying and political expenditures (see instructions)

Supplemental Information Part IV

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier	Return Reference	Explanation
DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES	PART I-A, LINE 1	CONSISTED OF MEMBER TO MEMBER COMMUNICATIONS

2a 2b

2c

3

4

5

DLN: 93493319004332

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Open to Public Inspection

Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b Internal Revenue Service ► Attach to Form 990. ► See separate instructions. Name of the organization Employer identification number

MERICAN FEDERATION OF STATE COUNTY ND MUNICIPAL EMPLOYEES		53-0237789	
art I Organizations Maintaining Donor A			unts. Complete if th
organization answered "Yes" to Form 99	90, Part IV, line 6. (a) Donor advised funds	(h) Funds	and other accounts
Total number at end of year	(a) Donor advised funds	(b) Tulius	and other accounts
Aggregate contributions to (during year)			
Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and donor advi funds are the organization's property, subject to the		onor advised	□ Yes □ No
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben	donor advisors in writing that grant fund		
conferring impermissible private benefit rt II Conservation Easements. Complete	if the organization answered "Ves"	to Form 990 D	<u> </u>
Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a quality	on or pleasure) Preservation of a	a certified historic	structure
easement on the last day of the tax year			
-			it the End of the Year
Total number of conservation easements		2a	
Total acreage restricted by conservation easements		2b	
Number of conservation easements on a certified his	storic structure included in (a)	2c	
Number of conservation easements included in (c) a	cquired after 8/17/06	2d	
Number of conservation easements modified, transfe	erred, released, extinguished, or termina	ted by the organiz	ation during
Number of states where property subject to conserva	ation easement is located ►		
Does the organization have a written policy regarding enforcement of the conservation easements it holds?		indling of violation	s, and Yes No
Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation ease	ements during the	year ►
A mount of expenses incurred in monitoring, inspecti			
Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2 (d) above satisfy the requirements of s	ection	┌ Yes ┌ No
In Part XIV, describe how the organization reports contained sheet, and include, if applicable, the text of the organization's accounting for conservation easen	the footnote to the organization's financi		
rt III Organizations Maintaining Collection Complete if the organization answered	ons of Art, Historical Treasures	, or Other Sim	ilar Assets.
If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	116, not to report in its revenue stater for public exhibition, education or resea	arch in furtherance	
If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research		
(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, histofollowing amounts required to be reported under SFA			
Revenues included in Form 990, Part VIII, line 1		► \$	

Assets included in Form 990, Part X

	••• Organizations Maintaining Co	llections of Art	t, Hıs	tori	cal Tre	asu	res, or Oti	<u>ner</u>	Similar Asse	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne foll	owing th	at ar	e a significan	ıt us	e of its collection	n	
а	Public exhibition		d	Γ	Loan or	exc	hange progra	ms			
b	Scholarly research		e	Γ	Other						
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ain hov	w they	/ further	the c	organization's	exe	mpt purpose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t									Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						n answered	"Ye	s" to Form 990	Ο,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	edıary	for c	ontrıbutı	ons	or other asse	ts n		Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving ta	able				A		
_								_	Amoi	unt	
q	Beginning balance							.c			
d	Additions during the year						<u> </u>	d			
e f	Distributions during the year						-	e _			
f >-	Ending balance	000 5- : : : :	- 245				<u> </u>	.f		V	
2a	Did the organization include an amount on Fo		e 21?						I	Yes	│ No
	If "Yes," explain the arrangement in Part XIV				ا - ۱۱۷۰ ام	1 4- 1	Fa 000 5)- · ·	TV 1:== 40		
Pa	rt V Endowment Funds. Complete	the organizatio (a)Current Year)Prior \						NEour V	ears Back
la	Beginning of year balance	(a)current rear	(5)	<i>)</i> 1 1101	Cui	(C) 1 W	70 Tedis back	(u),,	ilice reals back (e	. ji Odi 1	Lars Dack
b	Contributions										
c	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as		<u> </u>				l		
а	Board designated or quasi-endowment										
b	Permanent endowment >										
c	Term endowment ►										
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	ation	that a	re held a	and a	dministered	for t	he	Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to $3a(II)$, are the related organizatio	•							3b		
1	Describe in Part XIV the intended uses of th										
Par	t VI Land, Buildings, and Equipme	nt. See Form 99	90, Pa	art X	line 10) <u>. </u>			т		
	Description of property				Cost or of s (investm		(b) Cost or oth basıs (other)		(c) Accumulated depreciation	(d) Bo	ok value
1a	Land										
b	Buildings										
c	Leasehold improvements										
	Equipment						22 277 6	538	20,980,828		1,396,810
d l	Equipment		•	L_			22,377,6	<u> </u>			-,050, 010
	Other	<u> </u>					6,934,0	-	5,764,366		1,169,689

(a) Description of security or category			od of valuation
(including name of security)	(b)Book value		f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	: Form 990, Part X, line :	1	
(a) Description of investment type	(b) Book value		od of valuation f-year market value
		000000000000000000000000000000000000000	, , , , , , , , , , , , , , , , , , , ,
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, lin	e 15.		
(a) Descrip	tion		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.		,	
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability			
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) Amount 0		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes ACCRUED POSTRETIREMENT BENEFIT	, line 25. (b) Amount 0 52,647,000		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes ACCRUED POSTRETIREMENT BENEFIT ACCRUED SEVERANCE PAY	, line 25. (b) Amount 0 52,647,000 9,465,729	, , , , , , ,	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes ACCRUED POSTRETIREMENT BENEFIT ACCRUED SEVERANCE PAY ACCRUED VACATION & SICK PAY	, line 25. (b) Amount 0 52,647,000		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes ACCRUED POSTRETIREMENT BENEFIT ACCRUED SEVERANCE PAY	, line 25. (b) Amount 0 52,647,000 9,465,729		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes ACCRUED POSTRETIREMENT BENEFIT ACCRUED SEVERANCE PAY ACCRUED VACATION & SICK PAY	, line 25. (b) Amount 0 52,647,000 9,465,729 3,541,226		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes ACCRUED POSTRETIREMENT BENEFIT ACCRUED SEVERANCE PAY ACCRUED VACATION & SICK PAY DEFERRED COMPENSATION	, line 25. (b) Amount 0 52,647,000 9,465,729 3,541,226 2,086,000		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes ACCRUED POSTRETIREMENT BENEFIT ACCRUED SEVERANCE PAY ACCRUED VACATION & SICK PAY DEFERRED COMPENSATION ESCROWFUNDS	, line 25. (b) Amount 0 52,647,000 9,465,729 3,541,226 2,086,000 172,789		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes ACCRUED POSTRETIREMENT BENEFIT ACCRUED SEVERANCE PAY ACCRUED VACATION & SICK PAY DEFERRED COMPENSATION ESCROWFUNDS	, line 25. (b) Amount 0 52,647,000 9,465,729 3,541,226 2,086,000 172,789		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes ACCRUED POSTRETIREMENT BENEFIT ACCRUED SEVERANCE PAY ACCRUED VACATION & SICK PAY DEFERRED COMPENSATION ESCROWFUNDS	, line 25. (b) Amount 0 52,647,000 9,465,729 3,541,226 2,086,000 172,789		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes ACCRUED POSTRETIREMENT BENEFIT ACCRUED SEVERANCE PAY ACCRUED VACATION & SICK PAY DEFERRED COMPENSATION ESCROWFUNDS	, line 25. (b) Amount 0 52,647,000 9,465,729 3,541,226 2,086,000 172,789		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes ACCRUED POSTRETIREMENT BENEFIT ACCRUED SEVERANCE PAY ACCRUED VACATION & SICK PAY DEFERRED COMPENSATION ESCROWFUNDS	, line 25. (b) Amount 0 52,647,000 9,465,729 3,541,226 2,086,000 172,789		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1/1,56/,38.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	166,162,04
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	5,405,34
4	Net unrealized gains (losses) on investments	4	-33,68
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	1,193,02
9	Total adjustments (net) Add lines 4 - 8	9	1,159,33
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	6,564,68
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	er Retu	ırn
1	Total revenue, gains, and other support per audited financial statements	1	192,243,29
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	20,675,90
3	Subtract line 2e from line 1	3	171,567,38
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	171,567,38
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Re	
1	Total expenses and losses per audited financial statements	1	185,678,60
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses		
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	19,686,56
3	Subtract line 2e from line 1	3	165,992,04
4	A mounts 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)	1	
c	Add lines 4a and 4b	4c	170,00
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	166,162,04
	t VIV. Supplemental Information		

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Part XIV Supplemental Information

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, 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

Identifier	Return Reference	Explanation
OTHER INCREASES (DECREASES) IN FUND BALANCES	SCHEDULE D, PART XI, LINE 8	\$ (768,227)LOSS RECOGNIZED UNDER THE EQUITY METHOD OF ACCOUNTING \$(4,554,000) POSTRETIREMENT-RELATED CHANGES \$ 6,515,250 RELATED ORGANIZATIONS NET REVENUES OVER EXPENSES \$ 1,193,023 =========
OTHER REVENUE ON FINANCIAL STATEMENT, NOT ON FORM 990	SCHEDULE D, PART XII, LINE 2D	REVENUES - RELATED ORGANIZATIONS - \$20,709,588
OTHER EXPENSES ON FINANICAL STATEMENT, NOT ON FORM 990	SCHEDULE D, PART XIII, LINE 2D	\$ 4,554,000 POSTRETIREMENT-RELATED CHANGES \$ 14,364,338 EXPENSES - RELATED ORGANIZATIONS \$ 768,228 LOSS RECOGNIZED UNDER THE EQUITY METHOD OF ACCOUNTING \$ 19,686,565 ==========
OTHER EXPENSES INCLUDED ON FORM 990, NOT ON FINANCIALS	PART XIII, LINE 4B	\$170,000 CONTRIBUTION TO RELATED ENTITY ELIMINATED FOR FINANCIAL STATEMENT PURPOSES
FIN 48 FOOTNOTE	PART X, LINE 2	Accounting principles generally accepted in the United States of America require management to evaluate income tax positions taken by the Federation and accrue an income tax liability if the Federation has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service Management has evaluated the income tax positions taken and concluded that as of December 31, 2011, there are no uncertain positions taken or expected to be taken that would require accrual of a liability in the consolidated financial statements. The Federation is subject to routine audits by taxing jurisdictions, however, there are currently no audits for any tax periods in progress. Management believes that the Federation is no longer subject to income tax examinations for years prior to 2008.

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

OMB No 1545-0047

DLN: 93493319004332

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

Inspection

Employer identification number

AMERICAN FEDERATION OF STATE AND MUNICIPAL EMPLOYEES						53-0237789	
Part I General Information							
Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?		✓ Yes 🗀 I					
Part II Grants and Other A Form 990, Part IV, Im Part IV and Schedule	e 21 for any recip	ient that received n	nore than \$5,000. Che	eck this box if no one	recipient receive	ed more than \$5,000	. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Addıtıonal Data Table							
2 Enter total number of section 50	O1(c)(3) and governi	nent organizations list	ed in the line 1 table .			.	40
3 Enter total number of other orga	inizations listed in th	e line 1 table				. <u>-</u>	69

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

	•				
(a)Type of grant or assistance	(b)Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) FAMILY SCHOLARSHIP PROGRAM	45	90,000			
(2) JERRY CLARK MEMORIAL SCHOLARSHIP	4	20,000			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING USE OF GRANTS	PART I - LINE 2	THE FEDERATION DOES NOT MONITOR THE USE OF FUNDS GRANTED FOR GENERAL GRANT AND ASSISTANCE PAYMENTS THE AFSCME FAMILY SCHOLARSHIP IS AWARDED TO TEN HIGH SCHOOL SENIORS THAT WILL CONTINUE THEIR STUDIES IN COLLEGE TO OBTAIN THE AWARD, AN APPLICATION MUST BE COMPLETED AND ALL ELIBILITY REQUIREMENTS AS SPELLED OUT IN THE APPLICATION MUST BE PROVIDED ALL APPLICATIONS ARE THEN EXAMINED BY A SCHOLARSHIP SELECTION COMMITTEE THAT MAKES FINAL DETERMINATION OF THE WINNERS THE AWARD IS RENEWABLE FOR A MAXIMUM OF FOUR YEARS, PROVIDED THE STUDENT REMAINS ENROLLED IN A FULL-TIME COURSE OF STUDY AS VERIFIED TO THE COMMITTEE THE JERRY CLARK MEMORIAL
		SCHOLARSHIP IS AWARDED TO TWO STUDENTS THAT MAJORS IN SOCIAL SCIENCES THE APPLICATION IS COMPLETED BY STUDENTS IN THEIR SOPHOMORE YEAR THE APPLICATIONS ARE EXAMINED BY A SELECTED COMMITTEE BASED ON A FULLY COMPLETED APPLICATION AND PROPERLY RECEIVED DATA AS REQUIRED FROM THE COLLEGE OR UNIVERSITY FOR VERIFICATION PURPOSES UPON THE AWARDING OF THE SCHOLARSHIP FOR THE STUDENT'S JUNIOR YEAR OF STUDIES, THEY ARE ELIGIBLE FOR RENEWAL OF THE SCHOLARSHIP PROVIDED THE STUDENTS REMAINS ENROLLED IN A FULL-TIME COURSE OF STUDY AS A SOCIAL SCIENCE MAJOR
		Schedule I (Form 990) 2011

Software ID:

Software Version:

EIN: 53-0237789

Name: AMERICAN FEDERATION OF STATE COUNTY

AND MUNICIPAL EMPLOYEES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Alliance For Retired Americans815 16TH ST NW WASHINGTON, DC 20006	52- 2277805	501(C)(4)	134,228				GENERAL SUPPORT
Leadership Conference On Civil Rights INC1629 K ST NW 10TH FLOOR WASHINGTON, DC 20006	52- 0789800	501(C)(4)	60,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RainbowPush Coalition930 East 50th Street Chicago,IL 60615	36- 4131441		35,000				GENERAL SUPPORT
Labor Council For Latin Amer Advancement815 16th Street NW Washington, DC 20006	52- 1002207	501(C)(3)	6,500				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Congressional Hispanic Caucus Institute Inc911 2ND STREET NE WASHINGTON, DC 20002	52- 1114225	501(C)(3)	8,000				SPONSORSHIP
Congressional Black Caucus Foundation Inc 1720 MASSACHUSETTS AVE WASHINGTON, DC 20036	52- 1160561	501(C)(3)	35,000				SPONSORSHIP

-							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Americans United for Change1015 18TH ST NW STE 204 WASHINGTON, DC 20036	03- 0556312	501(C)(4)	1,000,000				GENERAL SUPPORT
Coalition On Human Needs1015 18th St NW STE 1101 WASHINGTON, DC	26- 5680984	501(c)(3)	11,300				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Committee For Education Funding 1640 Rhode Island Ave WASHINGTON, DC 20036	52- 0891509	501(C)(4)	9,913				GENERAL SUPPORT
Economic Policy Institute1333 H STREET NW STE 300 EAST TOWER WASHINGTON, DC 20005	52- 1368964	501(C)(3)	225,000				THINK TANK

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Health Care For America Now1825 K ST NW STE 400 WASHINGTON, DC 20006	35- 2332813	501(C)(4)	644,000				GENERAL SUPPORT
National Action Network Inc106 WEST 145TH STREET NEW YORK, NY 10039	11- 3269182	501(C)(4)	390,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
National Partnership For Women And Families1875 CONNECTICUT AVE NW STE 650 WASHINGTON, DC 20009	23- 7124915	501(C)(3)	10,000				GENERAL SUPPORT
National Women's Law Center11 DUPONT CIRCLE NW STE 800 WASHINGTON, DC 20036	52- 1213010	501(C)(3)	25,000				SPONSORSHIP

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NCSL Foundation For State Legislatures7700 EAST FIRST PLACE DENVER, CO 80230	74- 2232576	501(C)(3)	22,500				SPONSORSHIP
New Yorkers For Fiscal Fairness INC212 GREAT OAKS BLVD ALBANY, NY 12203	14- 1791695	501(C)(4)	120,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOCUS PROJECT INC DBA Omb Watch 1742 CONNECTICUT AVE NW WASHINGTON, DC 20009	52- 1302617	501(C)(3)	10,000				GENERAL SUPPORT
Progressive States ACTION101 AVE OF THE AMERICAS 3RD FL NEW YORK, NY 10013	20- 3169871	501(C)(4)	30,000				PUBLIC POLICY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR AMERICAN PROGRESS1333 H ST NW 10TH FL WASHINGTON, DC 20005	30- 0126510	501(C)(3)	100,000				GENERAL SUPPORT
United Negro College Fund INC8260 Willow Oak Corp Dr Fairfax, VA 22031	13- 1624241	501(C)(3)	43,600				SCHOLARSHIP SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USAction1825 K ST NW STE 210 WASHINGTON, DC 20006	52- 2143105	501(C)(4)	245,000				GENERAL SUPPORT
Workers Independent News SERVICE520 UNIVERSITY AVE STE 320 MADISON, WI 53703	34- 2032314		15,000				LABOR ISSUES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORKING AMERICA 815 16TH STREET NW WASHINGTON, DC 20006	20- 0263611	501(C)(5)	750,000				general support
UNITE HERE1775 K ST NW WASHINGTON, DC 20006	13- 3142795	501(c)(5)	500,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE NATIONAL LABOR COLLEGE 10000 N HAMPSHIRE AVE SILVER SPRING, MD 20903	52- 0895834	501(C)(3)	6,000				general support
SERVICES EMPLOYEES INTERNATIONAL UNION1800 MASSACHUSETTS AVE NW WASHINGTON, DC 20036	36- 0852885	501(c)(5)	704,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ONE WISCONSIN NOW152 W JOHNSON ST STE 214 MADISON, WI 53703	20 <i>-</i> 3765839	501(C)(4)	25,000				public interest
NEW YORK STATE AFL-CIO100 SOUTH SWAN STREET ALBANY, NY	14- 0923720	501(c)(5)	11,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section If applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW JERSEY STATE AFL-CIO106 WEST STATE STREET TRENTON, NJ 08608	22- 1153990	501(C)(5)	25,000				general support
NATIONAL PUBLIC PENSION COALITION1900 L STREET NW WASHINGTON, DC 20009	20- 5939282	501(c)(4)	160,000				public interest

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NATIONAL EMPLOYMENT LAW PROJECT80 MAIDEN LANE STE 509 NEW YORK, NY 10038	13- 2758558	501(C)(3)	15,000				public policy		
LABOR PROJECT FOR WORKING FAMILIES2521 CHANNING WAY STE 5555 BERKELEY, CA 94720	94- 3284312	501(c)(3)	7,500				general support		

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MISSOURI JOBS WITH JUSTICE2725 CLIFTON AVENUE ST LOUIS,MO 63139	43- 1864844	501(C)(3)	25,000				public interest
JOBS WITH JUSTICE EDUCATION FUND 1325 MASSACHUSETTS AVE NW STE 200 WASHINGTON, DC 20005	52- 1865575	501(C)(3)	55,000				public interest

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HERNDON ALLIANCE3438 EAST FLORENCE COURT SEATTLE, WA 98112	20- 3438789	501(c)(3)	20,000				public interest
FISCAL POLICY INSTITUTE1 LEAR JET LANE LATHAM,NY 12110	14- 1737256	501(c)(3)	55,000				public policy

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAIR ELECTION LEGAL NETWORK1825 K Street NW WASHINGTON, DC 20006	20- 5087102		45,000				public interest
CONGRESSIONAL BLACK CAUCUS INSTITUTE413 NEW JERSEY AVE SE WASHINGTON, DC 20003	52- 2270607	501(C)(4)	10,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITIZENS FOR TAX JUSTICE1616 P ST NW STE 200 WASHINGTON, DC 20036	52- 1156415	501(C)(4)	150,000				public interest
BALLOT INITIATIVE STRATEGY CENTER 1825 K Street NW WASHINGTON, DC 20006	04- 3411708	501(C)(4)	225,000				public policy

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN RIGHTS AT WORK1616 P STREET NW WASHINGTON, DC 20036	45- 0518844	501(C)(4)	50,000				general support
AFSCME CALIFORNIA ISSUES1121 L STREET STE 904 SACRAMENTO,CA 95814	20- 3922479	501(C)(5)	350,000				public interest

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFL-CIO815 16TH STREET NW WASHINGTON, DC 20006	53- 0228172	501(C)(5)	3,390,000				general support
Advancing Wisconsin IncPO Box 1465 Madison,WI 53701	80- 0185628	501(c)(4)	100,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Alliance For Justice 11 Dupont Circle NW Washington, DC 20036	52- 1009973	501(C)(3)	15,000				GENERAL SUPPORT
A merica Votes 1155 connecticut ave NW Washington, DC 20036	26- 4568349	501(C)(4)	300,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
American Constitution Society 1333 H Street NW Washington, DC 20005	52- 2313694	501(c)(3)	25,000				GENERAL SUPPORT
Americans For Democratic Action Inc1625 K Street NW STE 210 Washington, DC 20006	53- 0180733	501(C)(4)	10,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Asian Pacific American Labor Alliance AFL-CIO 815 16th Street NW Washington, DC 20006	52- 1777961	501(c)(5)	70,000		2(8.)		GENERAL SUPPORT
Campaign For America's Future 1825 K Street NW Washington, DC	52- 1861766	501(C)(4)	125,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Harris County Central Labor Council2506 Sutherland Street Houston, TX 77023	74- 1356044	501(C)(5)	7,500				GENERAL SUPPORT
Maine People's Alliance565 Congress Street Portland, ME 04101	01- 0383493	501(C)(4)	5,750				GENERAL SUPPORT

(a) Name and address of	(b) EIN	(c) IRC Code section	(d) A mount of cash grant	non-cash	(f) Method of valuation	(g) Description of	(h) Purpose of grant
organization or government		ıf applıcable		assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
National Institute on Retirement Security1730 Rhode Island Ave NW Washington, DC 20036	20- 8705822	1 501((*)(4)	20,000				GENERAL SUPPORT
Operation SMART PO Box 88140 Houston, TX 77288	76- 0497651	501(C)(3)	7,500				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Private Corrections Working Group Inc 114 Brandt Drive Tallahassee, FL 32308	32- 0290578	1 501((*)(4)	10,000				GENERAL SUPPORT
ProgressNow COLORADO1536 Wynkoop Street Denver,CO 80202	65- 1244918	I 501(C)(4)	50,000				GENERAL SUPPORT

(a) Name and address of organization	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV,	(g) Description of non-cash	(h) Purpose of grant or assistance
or government					appraisal, other)	assistance	
The Nation Institute116 E 16TH ST 8TH FL New York, NY 10003	13- 6216903	501(C)(3)	15,000				general support
We Are Ohio225 e broad st columbus, OH 43215	45- 0713721	501(c)(4)	3,000,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Health Information Campaignc/o lisa lindsey perkins coie Ilp 700 13th st washington, DC 20005	27- 3178984	501(c)(4)	500,000				general support
Alliance for a Better California 2012555 capitol mall sacramento, CA	45- 2827420	I 501(c)(4)	300,000				

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFSCME Fallen Heroes Fund1625 I street nw washington, DC 20036	52- 2344511	501(c)(3)	170,000				general support
Fair Elections Ohio PAC600 vine street cincinnati, OH 45202	45- 2830077	1 527	150,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Illinois AFL-CIO 534 South Second St springfield,IL 62710	36- 2388785	I 501(c)(5)	125,000				general support
Democracy Alliance 1575 Eye St nw washington, DC 20005	20- 2130918		122,500				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
US Student Association1211 connecticut ave NW washington, DC 20036	52- 0823351	501(c)(4)	122,500				general support
Center for Progress Action Fund1333 h street nw washington, DC 20005	30- 0192708	501(c)(4)	120,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Innovation O hio 35 e gay street ste 260 columbus, O H 43215	27- 4562062	501(c)(4)	100,000				general support
Iowa State University Foundation2505 university blvd ames.IA 50010	42- 1143702	501(c)(3)	100,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Tides Foundationpo bo x29903 san francisco, CA 94129	51- 0198509	501(c)(3)	75,000				general support
Wisconsin State AFL-CIO6333 w bluemound rd milwaukee, WI 53213	39- 0941964	501(c)(5)	75,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Greater Wisconsin Committeepo box 861 madison, WI 53701	20- 0938084	501(c)(4)	55,000				general support
911 health watch inc100 south swan street albany,NY 12210	36- 1700889	501(c)(3)	13,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
George Mason University4400 university drive fairfax, VA 22030	54- 0836357	I 501(c)(3)	12,628		ouler)		education
Philadelphia Council AFL-CIO22 s 22nd street philadelphia, PA 19103	23- 1580308	501(6)(5)	12,500				cope support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section If applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Advance Class Inc c/o foley hoag 1875 K ST NW washington, DC 20006	27- 3524792	501(c)(3)	10,000				general support
Citizens for a Stronger St Louispo box 39414 st louis, MO 63139	27- 3819651		10,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Democratic GAIN 1850 m street nw washington, DC 20036	87- 0694232	I 501 (c)(6)	10,000				general support
Denver Together 1100 Bannock Denver, CO 80204	45- 2547023		10,000				general support

(a) Name and address of	(b) EIN	(c) IRC Code	(d) A mount of cash grant	(e) A mount of	(f) Method of valuation	(g) Description of	(h) Purpose of grant
organization or government		ıf applicable	Cash grant	assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
Educating Maryland Kids Inc140 Main Street Annapolis, MD 21401	45- 3966495		10,000				md dream act
Human Rights Defense Centerpo box 2420 west brattleboro, VT 05303	94- 3149411	501(c)(3)	10,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section If applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Pride at Work AFL- CIO 815 16th street nw washington, DC 20006	52- 2217817	501(c)(4)	10,000				general support
Save Kansas City Committeepo box 7205 kansas city, MO 64113	27- 4154860		10,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Bell Action Network1905 Sherman street denver,CO 80203	84- 1550842	1 501 (c)(4)	10,000				general support
Committee on States1575 I St nw washington, DC 20005	26- 3815183		7,500				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Community Voices Heard18 Lander Street Newburgh, NY 12550	13- 3901997	501(c)(3)	7,500				general support
NCCNHR1001 Connecticut Ave NW washington, DC 20036	52- 1122531	501(c)(3)	7,500				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Californians to Protect Schools Universities1818 L ST st 615 sacramento, CA 95811	36- 4718020		50,000				general support
House of Ruth Incpo box 459 claremont, CA 91711	95- 3276033	1 501(6)(3)	50,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
National Civil Rights Museum450 Mulberry memphis,TN 38103	58- 1484027	501(c)(3)	50,000				general support
Ohio Faith and Democracy Collaborative35 E Gay St ste 242 columbus, O H	26- 3067170		50,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Colorado Long View 390 Hudson Street denver, CO 80246	1066385	501(6)(4)	35,000				general support
Public Interest Pictures Inc816 s plymouth blvd los angeles, CA 90005	35- 2201704	501(c)(3)	30,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Californians for Healthcare and Retirement Securit 555 capitol mall ste 1425 sacramento, CA 95814	90- 0331627	501(c)(4)	25,000				general support
Committee for a New Economy1127 11st street ste 242 sacramento, CA	26- 2617501	527	25,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
East-West Center 1601 East-West Rd honolulu, HI 96848	99- 0161603	501(c)(3)	25,000				general support
Netroots Nation60 29th street san francisco, CA 94110	20- 4465717	501(c)(4)	25,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
One Iowa419 SW 8th street des moines,IA 50309	83- 0440260	501(c)(4)	25,000				general support
Planned Parenthood Federation of America1110 Vermont Ave Nw washington, DC 20005	13- 3539048	501(c)(4)	25,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Project New Mexico 6690 corrales rd corrales, NM 87048	27- 0925453		25,000				general support
Protect maine votes pacpo box 18161 portland, ME 04112	45- 2691794	527	25,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Republican Main Street Partnership 325 7th street nw washington, DC 20004	59- 1828852	I 501(c)(4)	25,000				general support
The American Independent News Network1825 connecticut ave washington, DC 20009	31- 1137541	1 501(6)(3)	25,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Richardson Center for Global Engagement216 washington ave sante fe, NM 87501	27- 5083008	1 501(6)(3)	25,000				general support
Partnership for Working Families 1620 eye street nw washington, DC 20006	71- 0914032	501(6)(3)	21,500				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Maryland State Education Association140 Main Street Annapolis, MD 21401	52- 0607919	501(c)(5)	20,000				general support
Colorado Civic Engagement Roundtablepo box 1620 denver CO 80201	02- 0758897	501(c)(3)	15,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Florida Democratic Party214 South Bronough St Tallahassee, FL 32301	59- 0772903	I 527	15,000				general support
Jewish Funds for Justice330 7th ave new york, NY 10001	52- 1332694	I 501(c)(3)	15,000				general support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Florida AFL-CIO 135 south monroe st tallahassee,FL 32301	59- 0832847	501(c)(5)	21,328				general support

DLN: 93493319004332

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization **Employer identification number** AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES 53-0237789

Pa	Questions Regarding Compensation			
			Yes	No
1 a				
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant inform			
		residence for personal use		
		s use of personal residence		
	▼ Tax idemnification and gross-up payments			
	Discretionary spending account Personal services (e	g , maıd, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written poli- reimbursement orprovision of all the expenses described above? If "No," complete		Yes	
2			103	
_	officers, directors, trustees, and the CEO/Executive Director, regarding the items		Yes	
3	, ,,	ensation of the		
	organization's CEO/Executive Director Check all that apply			
	Compensation committee Written employment of			
	☐ Independent compensation consultant ☐ Compensation survey☐ Form 990 of other organizations ☐ Approval by the board	· · · · · · · · · · · · · · · · · · ·		
	Form 990 of other organizations Approval by the board	d or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a without a related organization	th respect to the filing organization		
а	a Receive a severance payment or change-of-control payment?	4a	Yes	
b	b Participate in, or receive payment from, a supplemental nonqualified retirement pla	nn? 4b		Νo
C	c Participate in, or receive payment from, an equity-based compensation arrangeme	nt? 4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts f	or each item in Part III		
	Only $501(c)(3)$ and $501(c)(4)$ organizations only must complete lines 5-9.			
5		ay or accrue any		
	compensation contingent on the revenues of			
а	a The organization?	5a		
b	b Any related organization?	5b		
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization parameters compensation contingent on the net earnings of	ay or accrue any		
а	a The organization?	6a		
b	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 p payments not described in lines 5 and 6? If "Yes," describe in Part III	rovide any non-fixed 7		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a c subject to the initial contract exception described in Regs section 53 4958-4(a)(
	in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption proce	<u> </u>		
	section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

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, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) GERALD W MCENTEE	(ı) (ıı)	387,671 0	0 0	30,997 0	267,053 0	24,354 0	710,075 0	(
(2) LEE SAUNDERS	(ı) (ıı)	310,137 0	0 0	28,202 0	297,856 0	24,354 0	660,549 0	(
(3) PAUL R BOOTH	(ı) (ıı)	239,497 0	0 0	12,366 0	278,885 0	24,354 0	555,102 0	(
(4) JOHN SEFERIAN	(ı) (ıı)	218,666 0	0	18,830 0	107,419 0	24,354 0	369,269 0	
(5) JESSICA WEINSTEIN	(ı) (ıı)	182,310 0	0	6,646 0	54,524 0	8,145 0	251,625 0	
(6) LAWRENCE SCANLON	(ı) (ıı)	186,746 0	0	5,529 0	155,029 0	24,354 0	371,658 0	(
(7) LARRY P WEINBERG	(ı) (ıı)	95,343 0	0	436,336 0	519,052 0	15,846 0	1,066,577 0	(
(8) JACK C DEMPSEY	(ı) (ıı)	228,823	0	10,133 0	221,884	24,354 0	485,194 0	(
(9) CHARLES JURGONIS	(ı) (ıı)	196,651 0	0	8,321 0	193,832	24,354 0	423,158 0	(
(10) JAMES SCHMITZ	(ı) (ıı)	54,468 0	0	267,629 0	1,156,962	1,358 0	1,480,417 0	(
(11) STEPHAN FANTAUZZO	(ı) (ıı)	183,348 0	0 0	13,190 0	302,883	24,354 0	523,775 0	(
(12) GARETH FRANK	(ı) (ıı)	124,802	0	166,425 0	749,909 0	18,917 0	1,060,053	(
(13) DON E SIMPSON	(ı) (ıı)	113,540 0	0	148,227 0	366,133 0	24,354 0	652,254 0	(
(14) GEORGE T JOHNSON	(ı) (ıı)	92,522	0	146,627 0	415,643 0	20,295	675,087 0	(
(15) DAVID PALADINO	(ı) (ıı)	104,078 0	0 0	133,103 0	430,667 0	23,376 0	691,224 0	1

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation
SEVERANCE PAYMENT	· '	LARRY WEINBERG \$352,035 JAMES SCHMITZ \$222,659 GARETH FRANK \$152,419 DON SIMPSON \$117,907 GEORGE JOHNSON \$123,837 DAVID PALADINO \$117,907
ITEMS PROVIDED BY ORGANIZATION TO PERSONS LISTED FORM 990, PART VII	1 A	FIRST-CLASS TRAVEL TWO OFFICERS (AND CERTAIN EXECUTIVE STAFF AS AUTHORIZED) MAY TRAVEL FIRST CLASS ON OFFICIAL UNION BUSINESS WHICH IS NOT DEEMED TAXABLE COMPENSATION TAX INDEMNIFICATION AND GROSS-UP/HOUSING ALLOWANCE REIMBURSEMENT FOR HOUSING, TRANSPORTATION AND PER DIEM (INCLUDING TAX GROSS-UP) FOR OUT OF TOWN ASSIGNMENT GREATER THAN ONE YEAR CONSIDERED TAXABLE COMPENSATION
		\$5,306,726 OF THE AMOUNT IN THIS COLUMN REPRESENTS THE ANNUAL INCREASE IN ACTUARIAL VALUE OF A QUALIFIED DEFINED BENEFIT PLAN, AS CALCULATED BY THE PLAN ACTUARY

Schedule J (Form 990) 2011

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493319004332

OMB No 1545-0047

2011

Open to Public
Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Supplemental Information to Form 990 or 990-EZ

orm 990 or to provide any additional information.
► Attach to Form 990 or 990-EZ.

Name of the organization AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES **Employer identification number**

53-0237789

ldentifier	Return Reference	Explanation
REVIEW PROCESS OF FORM 990	PART VI, SECTION B, LINE 11B	THE FORM 990 IS REVIEWED IN DETAIL BY MANAGEMENT AND STAFF PRIOR TO SIGNATURE AND SUBMISSION TO THE INTERNAL REVENUE SERVICE
PUBLIC DISCLOSURE OF GOVERNING DOCUMENTS, CONFLICT OF INTEREST & F/S	PART VI, SECTION C, LINE 19	THE FEDERATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY NOR CONSOLIDATED FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC
ELECTING OF BOARD MEMBERS	PART VI, SECTION A, LINE 7A	ALL SOVEREIGN POWERS OF THE FEDERATION ARE VESTED IN THE DELEGATION WHO COMPRISE THE CONVENTION, WHEN IN SESSION THE FEDERATION HOLDS A BLANNUAL CONVENTION THAT IS ATTENDED BY DELEGATES THE DELEGATES ELECT THE OFFICERS OF THE FEDERATION EVERY FOUR YEARS THESE OFFICERS COMPRISE THE INTERNATIONAL EXECUTIVE BOARD
MEMBERS	PART VI, SECTION A, LINE 6	AFSCME is comprised of members with the right to elect their delegates, who elect the governing body
ESTIMATED AMOUNT OF OTHER COMPENSATION	PART VII, SECTION A, COLUMN (F)	\$5,306,726 OF COLUMN F AMOUNT REPRESENTS THE INCREASE IN ACTUARIAL VALUE IN DEFINED BENEFITS CALCULATED BY THE PLAN ACTUARY THESE AMOUNTS REPORTED ARE NOT ACTUAL OUTLAYS TO THE OFFICERS, KEY EMPLOYEES AND HIGHLY COMPENSATED EMPLOYEES
EXECUTIVE COMMITTEE	PART VI, SECTION A, LINE 1	The International Executive Board shall create from its membership an Executive Committee. The Executive Committee shall be composed of the International President, who shall serve as Chairperson, the International Secretary-Treasurer, who shall serve as Secretary, and three other members, who shall be elected by and from the members of the International Executive Board. The Executive Committee shall meet on the call of the International President. Except as hereafter limited, the Executive Committee shall have the power to act on all matters on which the International Executive Board is empowered to act, subject to the approval of the International Executive Board at its next meeting. The Executive Committee shall not have the power to levy special assessments or to fill vacancies in the membership of the International Executive Board.
OTHER CHANGES IN NET ASSETS	PART XI, LINE 5	\$(4,554,000) POSTRETIREMENT-RELATED CHANGES \$ (768,227) LOSS RECOGNIZED UNDER THE EQUITY METHOD OF ACCOUNTING \$ (33,684) UNREALIZED LOSS ON INVESTMENTS \$ 1 MISC ADJUSTMENT

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE R**

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

DLN: 93493319004332

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

OMB No 1545-0047

Schedule R (Form 990) 2011

Employer identification number

53-0237789

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part I

Name of the organization

AND MUNICIPAL EMPLOYEES

AMERICAN FEDERATION OF STATE COUNTY

(Form 990)

Related Organizations and Unrelated Partnership

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ▶ See separate instructions.

(d) (a)
Name, address, and EIN of disregarded entity Legal domicile (state Total income End-of-vear assets Direct controlling Primary activity or foreign country) entity (1) AFSCME PUBLIC SERVICE WORKERS LLC 1625 L STREET NW DE INVESTMENT WASHINGTON, DC 20036 20-4455454 Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (c) (d) (e) Section 512(b)(13) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling controlled or foreign country) (if section 501(c)(3)) entity organization See Additional Data Table

Cat No 50135Y

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV,	line 34
	because it had one or more related organizations treated as a partnership during the tax year.)	

al or ging (k)	No				
(j) eneral or anaging partner?	es No				
V—UBI Ge box 20 of m ile K-1 p	Ye				
(i) Code V—UBI amount in box 20 Schedule K-1 (Form 1065)	<u> </u>				
rtionate	No				
(h) Dispropi allocati	Yes				
(g) Share of end-of- year assets					
(f) Share of total Income					
(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)					
,					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					
(a) Name, address, and EIN of related organization					

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) AFSCME PUBLIC SERVICE WORKERS CORP 1625 L STREET NW WASHINGTON, DC 20036 20-4449100	INVESTMENT	DE		C-CORP			

Note. Complete line 1 if any entity is listed in Parts II, III or IV				Y	es	No				
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related orga	anızatıons lısted ın Part	s II-IV?								
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			[:	1a		No				
b Gift, grant, or capital contribution to related organization(s)			[:	1b Y	es					
c Gift, grant, or capital contribution from related organization(s)			[:	1c		No				
d Loans or loan guarantees to or for related organization(s)			[:	1d		No				
e Loans or loan guarantees by related organization(s)			[:	1e		No				
f Sale of assets to related organization(s)			[:	1f		No				
g Purchase of assets from related organization(s)			[:	1g		No				
h Exchange of assets with related organization(s)			[:	1h		No				
i Lease of facilities, equipment, or other assets to related organization(s)				1i		No				
j Lease of facilities, equipment, or other assets from related organization(s)				1j		No				
k Performance of services or membership or fundraising solicitations for related organization(s)			[:	1k		No				
I Performance of services or membership or fundraising solicitations by related organization(s)										
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)										
n Sharing of paid employees with related organization(s)			[:	1n Y	'es					
• Reimbursement paid to related organization(s) for expenses			[:	10		No				
p Reimbursement paid by related organization(s) for expenses			[1p Y	es					
q Other transfer of cash or property to related organization(s)			[:	1q		No				
r Other transfer of cash or property from related organization(s)				1r		No				
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	including covered relat	ionships and transact	ion thresholds							
	(b)	(c)	(c	1)						
Name of other organization	Transaction type(a-r)	Amount involved	Method of deter	rmining Ived	j amo	unt				
(1) AFSCME SPECIAL ACCOUNT	Р	1,123,443	BILLINGS							
(2) AFSCME EMPLOYEES PENSION PLAN TRUST FUND	N	216,155	BILLINGS							
(3) AFSCME EMPLOYEES PENSION PLAN TRUST FUND	В	3,636,534	ALLOCATION							
(4) AFSCME FALLEN HEROES FUND	В	170,000	CASH							
(5)		1,0,000								
(6)										

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	(e) Are all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate alloc		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ener?	(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No	

Schedule R (Form 990) 2011

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Schedule R (Form 990) 2011

Software ID: Software Version:

EIN: 53-0237789

Name: AMERICAN FEDERATION OF STATE COUNTY

AND MUNICIPAL EMPLOYEES

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

Form 990, Schedule R, Part II - Id	·		- xempt or ge				1
(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c) (3))	(f) Direct Controlling Entity	Sectio (b)(contr organi	n 512 13) olled
AFSCME PEOPLE CONTRIBUTIONS COMMITTEE 1625 L STREET NW WASHINGTON, DC 20036	POLITICAL	DC	527		AFSCME	Yes	
52-1456472 AFSCME FALLEN HEROES FUND							-
1625 L STREET NW WASHINGTON, DC 20036 52-2344511	CHARITABLE	DC	501(c) (3)	7	AFSCME	Yes	
AFSCME TRAINING AND EDUCATION INSTITUTE 1625 L STREET NW WASHINGTON, DC 20036	TRAINING	DC	501(c) (3)	7	AFSCME	Yes	
52-1148573 AFSCME BUILDING CORPORATION 1625 L STREET NW WASHINGTON, DC 20036 52-1010116	HOLDING CO	DC	501(c) (2)		AFSCME	Yes	
AFSCME SPECIAL ACCOUNT 1625 L STREET NW WASHINGTON, DC 20036 91-2064198	POLITICAL	DC	527		AFSCME	Yes	
AFSCME PEOPLE - NON FEDERAL 1625 L STREET NW WASHINGTON, DC 20036 91-2066788	POLITICAL	DC	527		AFSCME	Yes	
AFSCME PEOPLE - MICHIGAN NONFEDERAL 1625 L STREET NW WASHINGTON, DC 20036	POLITICAL	DC	527		AFSCME	Yes	
91-2063597 AFSCME EMPLOYEES PENSION PLAN TRUST FUND 1625 L STREET NW WASHINGTON, DC 20036 53-0237789	PENSION PLAN	DC	401(a)		AFSCME		No
AFSCME EMPLOYEES SALARY SVGS PLAN TR FD 1625 L STREET NW WASHINGTON, DC 20036 53-0237789	PENSION PLAN	DC	401(k)		AFSCME		No
AFSCME FOR ERIE COUNTY 1625 L STREET NW WASHINGTON, DC 20036 45-3641001	POLITICAL	NY	527		AFSCME	Yes	

Software ID: Software Version:

EIN: 53-0237789

Name: AMERICAN FEDERATION OF STATE COUNTY

AND MUNICIPAL EMPLOYEES

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) (C) A verage Position (check all that apply) per that apply)							(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
GERALD W MCENTEE INTERNATIONAL PRESIDENT	35 0	Х		Х				418,668	0	291,407
LEE SAUNDERS INT'L SECY-TREAS	35 0	Х		х				338,339	0	322,210
KEN ALLEN INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0
HENRY L BAYER INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0
GEORGE BONCORAGLIO INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0
ANTHONY CASO INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,850	0	0
GREG DEVEREAUX INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0
DANNY DONOHUE INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0
DAVID R FILLMAN INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,900	0	0
MICHAEL FOX INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0
ALBERT GARRETT INTERNATIONAL VICE PRESIDENT	3 0	Х		х				17,200	0	0
RAGLAN GEORGE JR INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0
SHERRYL A GORDON INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0
DANNY J HOMAN INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0
SALVATORE LUCIANO INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0
JOHN A LYALL INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0
ROBERTA LYNCH INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0
GLENARD S MIDDLETON SR INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0
VERONICA MONTGOMERY-COSTA INTL VICE PRESIDENT (RETIRED)	3 0	Х		х				2,800	0	0
LILLIAN ROBERTS INTERNATIONAL VICE PRESIDENT	3 0	Х		Х				12,600	0	0
HENRY NICHOLAS INTERNATIONAL VICE PRESIDENT	3 0	Х		Х				16,800	0	0
EDDIE L PARKS INTERNATIONAL VICE PRESIDENT	3 0	Х		Х				16,800	0	0
GEORGE E POPYACK INTERNATIONAL VICE PRESIDENT	3 0	Х		Х				16,800	0	0
GREGORY POWELL INTERNATIONAL VICE PRESIDENT	3 0	Х		Х				16,800	0	0
LAURA M REYES INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per		tion that a		/)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
EDWARD RODRIGUEZ INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0		
JOSEPH RUGOLA INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0		
KATHY SACKMAN INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0		
ELIOT SEIDE INTERNATIONAL VICE PRESIDENT	3 0	X		х				16,800	0	0		
MARY E SULLIVAN INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0		
DAVID WARRICK INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0		
JEANETTE WYNN INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0		
LAKESHA HARRISON INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0		
LAWRENCE A ROEHRIG INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0		
DOUGLAS MOORE JR INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0		
RANDOLPH P PERREIRA INTERNATIONAL VICE PRESIDENT	3 0	Х		Х				16,800	0	0		
BRAULIO TORRES INTERNATIONAL VICE PRESIDENT	3 0	Х		Х				16,800	0	0		
GARY MITCHELL INTERNATIONAL VICE PRESIDENT	3 0	Х		х				16,800	0	0		
PAUL R BOOTH EXEC ASSISTANT TO PRESIDENT	35 0				х			251,863	0	303,239		
JESSICA WEINSTEIN ASSISTANT TO THE PRESIDENT	35 0				х			188,956	0	62,669		
LAWRENCE SCANLON DIRECTOR POLITICAL ACTION	35 0				х			192,275	0	179,383		
LARRY P WEINBERG GENERAL COUNSEL (RETIRED)	35 0				х			531,679	0	534,898		
JACK C DEMPSEY GENERAL COUNSEL	35 0				х			238,956	0	246,238		
CHARLES JURGONIS DIRECTOR FINANCIAL SERVICES	35 0				х			204,972	0	218,186		
JAMES SCHMITZ DIRECTOR, ORG & FLD(RETIRED)	35 0				х			322,097	0	1,158,320		
STEPHAN FANTAUZZO DIRECTOR, ORG & FLD SERVICES	35 0				х			196,538	0	327,237		
JOHN SEFERIAN CHAIRPERSON JUDICAL PANEL	35 0					х		237,496	0	131,773		
GARETH FRANK ASSOC DIR, ORG & FLD(RETIRED)	35 0					х		291,227	0	768,826		
DON E SIMPSON POLITICAL ACTION REP(RETIRED)	35 0					х		261,767	0	390,487		
GEORGE T JOHNSON AREA FLD SVC DIRECTOR(RETIRED)	35 0					x		239,149	0	435,938		

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) (C) A verage hours per 中中 中央							(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
DAVID PALADINO STRATEGIC COMM SPEC (RETIRED)	35 0					Х		237,181	0	454,043