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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public

Information about Form 990 and its instructions is at www.irs.gov/form990.

- -				naing			
В	Check if a	applicable	C Name of organization AFSCME Council 65		D Employ	yer identifica	tion number
	Address o	change	Doing Business As		j		
	Name cha	2000	Number and street (or PO box if mail is not delivered to street address) Room/suite		41-08548	76	
ᆜ	Maine Cit	ange	118 Central Avenue		E Telepho	ne number	
	Initial retu	ım	City or town State ZIP code		240.005	20.40	
$\overline{}$	T		Nashwauk MN 55769		218-885-	3242	
	Terminate	ed	Foreign country name Foreign province/state/county Foreign postal	code	1		
	Amended	return			G Gross r	eceipts \$	6,982,994
=			P. Name of the state of the sta				
	Applicatio	n pending	F Name and address of principal officer	H(a) is t	his a group retu	rn for subordina	etes? Yes X No
				H(b) A	re all subordin	ates included	? Yes No
1 7	Tax-exem	pt status	501(c)(3) X 501(c) (5) ◀ (insert no) 4947(a)(1) or 527	If	"No," attach a	list (see inst	ructions)
		·					1201
				H(c) G	roup exemption	on number	1301
_		ganization	Corporation Trust X Association Other ► L Year	ar of form	lation 196	5 M State	e of legal domicile MN
P	art l	Sui	mmary				
	1	Briefly d	escribe the organization's mission or most significant activities Coul	ncıl 65	works to in	nprove the	pay and
ည		working	conditions of its members and is committed to winning respect and appre	ciation			
Jai	l	through	strong contracts for the public employees of Greater Minnesota. This is di	one us	ing		
ē	2		nis box If the organization discontinued its operations or disposed			6 of its not	accoto
ó				01 11101	e man 257	1 1	
∞ 5	3		of voting members of the governing body (Part VI, line 1a)			3	
S	4		of independent voting members of the governing body (Part VI, line 1b)			4	12
Ę	5		mber of individuals employed in calendar year 2013 (Part V, line 2a)			5	50
Activities & Governance	6		mber of volunteers (estimate if necessary)			6	60
ĕ	7a	Total uni	related business revenue from Part VIII, column (C), line 12			7a	0
	b	Net unre	elated business taxable income from Form 990-T-line, 34,50		7b	0	
					Prior Year		Current Year
a	8	Contribu	itions and grants (Part VIII, line 1h)		3	62,414	218,929
Revenue	9	_			4,0	99,126	6,566,259
Ş.	10	Investm	ent income (Part VIII, column (A), lines 3(4, and 7d)		1	30,893	196,075
8	11	Other re	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			7,204	1,731
	12	Culculo	enue—add lines 8 through 11 (must equal Part VIII columni (A)-line 12)——		4.5	99,637	6,982,994
				 		0	0,502,554
	13		and similar amounts paid (Part IX, column-(A), lines 1–3)			0	
	14		paid to or for members (Part IX, column (A), line 4)	·-·-			2 270 242
es	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)		3,2	08,274	3,370,212
Expenses	16a		onal fundraising fees (Part IX, column (A), line 11e)			<u> </u>	0
ğ	b		ndraising expenses (Part IX, column (D), line 25)	ļ			
W	17	Other ex	(penses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u></u> .		02,916	3,054,399
	18	Total exp	penses Add lines 13–17 (must equal Part IX, column (A), line 25)		3,9	11,190	6,424,611
	19	Revenue	e less expenses Subtract line 18 from line 12		6	88,447	558,383
- 5 g				Begin	ning of Curre	nt Year	End of Year
Sets	20	Total ass	sets (Part X, line 16)		2,4	09,582	2,967,965
Ass H Ba	21	Total liab	pilities (Part X, line 26)			0	0
Net Assets or Fund Balances	22		ets or fund balances Subtract line 21 from line 20		2,4	09,582	2,967,965
	art II		nature Block				
Und	er penalti	es of perjury	, I declare that I have examined this return, including accompanying schedules and statements	, and to t	the best of my	knowledge	
و <u>and</u>	belief, it is	s true corre	ct, and complete Declaration of oreparer (other than officer) is based on all information of whic	h prepare	er has any kno	wledge	
` .	_		Atame Fall			6-/6-	20
Sig			Signature of officer		Date	•	
He	re		Steve Preble, Executive Sirector				
5			Type or print name and title				
		Print	/Type preparer's name Preparer's signature	Da	te		PTIN
Pai					[Check X	
n a	id		X , , , , , , , , , , , , , , , , , , ,				
=		Gar	y W Paulson Jangh Paul - CPA	6/	13/2014	self-employe	P00484716
Pre	eparer			6/		seir-employe ▲ 41-1643	
Pre		Firm	0 14/2 100 000	6/			3869

	irt III	Statement of Program Consider Association	41-0854876	Page 2
Г		Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly (describe the organization's mission		
•		65 works to improve the pay and working conditions of its members and is committed		
	to winni	ing respect and appreciation through strong contracts for the public employees of		
	Greater	Minnesota This is done using standard negotiation, grievance and arbitration		
	procedu	ures		
2	Did the	organization undertake any significant program services during the year which were not listed on		
	the prio	r Form 990 or 990-EZ?	Yes	X No
_		describe these new services on Schedule O		
3	Did the	organization cease conducting, or make significant changes in how it conducts, any program		
	services	describe these changes on Schedule O	Yes	X No
4		e the organization's program service accomplishments for each of its three largest program services,		
•	expense	es Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allo l expenses, and revenue, if any, for each program service reported	as measured by cations to others,	,
4a	(Code) (Expenses \$ including grants of \$) (Revenue	\$)
		The union through employees, members and specialists negotiated approximately 375 covering 12,700 members. The objective of these contract negotiations are to provide improved working conditions, job protections, better benefits and higher wages. The employees, members and specialists resolved 300+ grievances of which 28+ were referenced or other specialists for assistance. 15 of these grievances were approved for arbitration for pursuing these grievances includes protecting workers jobs, improving the working members, and to ensure the contract terms are enforced. The union through employ volunteers ran 16 separate organizing campaigns. Some of these campaigns are to include strong to improve bargaining strength and expanding union membership into new enforganizations to improve working conditions of people not yet covered by union contract programs include. 1) Member training in contract enforcement, organizing and comm Conferences and convention to ensure member involvement in governance, setting the union, and increasing member involvement.	e members wit union through erred to attorne on The objections of ees and member erease member and creat. Other unity outreach	eys er
				• • • • • • • • • • • • • • • • • • • •
4c	(Code) (Expenses \$ including grants of \$) (Revenue	\$)
	`			· · · · · · · · · · · · · · · · · · ·
				· • • • • • • • • • • • • • • • • • • •
	Other or	ogram services (Describe in Schedule O)		
-	(Expense	0 \ (D) = 0	0)	
4-	Tabelaco	CONTAIN CODUCE BY DEDICES		

Form **990** (2013)

Part IV Checklist of Required Schedules Part IV

			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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		$\hat{}$	
_	candidates for public office? If "Yes," complete Schedule C, Part I	3	x	
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	×	
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		İ	
	"Yes," complete Schedule D, Part I	6		Х
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	1	Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"			
0	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	•		
3	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		Х
10	- · · · · · · · · · · · · · · · · · · ·	-		
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		Х
		-10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		1	
_	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	44.	l	v
		11a		X
D	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	11b		Х
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	1110		
С	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
а	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	110		
u		11d		Х
_	, , ,	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	•		
120		12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"		+	
		12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	····-	X
14a		14a		X
b	5			
_	fundraising, business, investment, and program service activities outside the United States, or aggregate	ļ		
	· -	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
-	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	_	Х
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? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	I	Ī	
	If "Yes," complete Schedule G, Part III	19		Χ
20a		20a		Χ
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules (continued)

_			Г	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Yes	No
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
23	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23	^	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25a	24a		х
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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I			
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	25a		
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or		- 1	
	990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			.,
28	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		_X_
20	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	ĺ	х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete		İ	
	Schedule L, Part IV	28ь		_X_
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>X</u>
29 20	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	}	_X_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	ŀ	Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N</i> ,			
- '	Part I	31]	<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32		_ <u>X_</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22	ſ	v
34	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,	33		_ <u>X</u> _
J -4	III, or IV, and Part V, line 1	34	l	_X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled		ĺ	
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related		1	
27	organization? If "Yes," complete Schedule R, Part V, line 2	36	-+	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37	1	Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
-	19? Note . All Form 990 filers are required to complete Schedule O	38	х	
		Form	990 (2013)

Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 1a 7 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a Statements, filed for the calendar year ending with or within the year covered by this return 50 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) За Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O b 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? Х 4a If "Yes," enter the name of the foreign country b See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a 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? 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 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 as charitable contributions? Х 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? **6**b Organizations that may receive deductible contributions under section 170(c). 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 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с If "Yes," indicate the number of Forms 8282 filed during the year d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e e 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 g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h h 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. 9 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 b 10 Section 501(c)(7) organizations. Enter 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 10b b Section 501(c)(12) organizations. Enter 11a Gross income from members or shareholders а Gross income from other sources (Do not net amounts due or paid to other sources b against amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a 12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year b Section 501(c)(29) qualified nonprofit health insurance issuers. 13 13a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which 13b the organization is licensed to issue qualified health plans Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and

State the name, physical address, and telephone number of the person who possesses the books and records of the

118 Central Avenue, Nashwauk, MN 55769

financial statements available to the public during the tax year

organization ► Linda Kresal

20

•						
Form 990 (2013)	AFSCME Council 65				41-08548	376_ Page 7
Part VII	Compensation of Officers, Dire	ctors, Truste	es, Key Employees, H	lighest Comp	ensated	
	Employees, and Independent C					
	Check if Schedule O contains a r	esponse or no	te to any line in this Pa	art VII		
Section A.	Officers, Directors, Trustees, Key E	mployees, and	Highest Compensated E	mployees		
1a Complete to organization's	his table for all persons required to be tax year	listed Report co	mpensation for the calend	dar year ending	with or within the	
of compensati	of the organization's current officers, d on Enter -0- in columns (D), (E), and (F) If no compens	sation was paid			unt
	of the organization's current key emplo					
who received	organization's five current highest con reportable compensation (Box 5 of For and any related organizations					yee)
	of the organization's former officers, ke eportable compensation from the organ			mployees who r	eceived more that	an
	of the organization's former directors of the organization's former than \$10,000 of reportable compe					the
•	n the following order individual trustees employees, and former such persons	or directors, ins	titutional trustees, officers	, key employees	s, highest	
Check thi	s box if neither the organization nor any	y related organiz	ation compensated any c	urrent officer, dir	ector, or trustee	
	(A) Name and Title	(B) Average hours per	(C) Position (do not check more than one box unless person is both an officer and a director/trustee)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
		week (list any		from	from related	other

(A) Name and Title	(B) Average hours per	box	unles	neck ss pe	rson	e than o	an ee)	(D) Reportable compensation from	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Grace Baltich	2 00									
President		X		X				2,803		
(2) Mark Regar	1 00									ı
Vice-President		Х		X		ļ		0		
(3) Kathy Johnston	1 00		'					Ì		
Recording Secretary		X	<u> </u>	X		ļ	L_	0		
(4) Teresa Kıngsley	2 00					i				
Treasurer		X		X		ļ		980		
(5) Michelle Johnson	0 50								!	
Board Member		X	ļ	ļ		ļ		0		
(6) Cheryl Jones	0 50		1			1		}		
Board Member		X_			<u> </u>			0		
(7) Kathy Beckman	0 50									
Board Member		X			_		L	329		
(8) Carrie Umpierre	0 50									
Board Member		X			<u> </u>		L	0		
(9) Peggy Kınzler	0 50									
Board Member		X			<u> </u>	 	<u> </u>	0		
(10) Kerry Sorenson	0 50					1		_		
Board Member		Х			<u> </u>		<u> </u>	0		
(11) Trent Steward	0 50									
Board Member		X						0		
(12) Todd Larson	0 50									
Board Member		X	\sqcup		<u> </u>	<u> </u>	Щ,	0		
(13) Marcie Witkofsky - non voting	0 25									
Trustee		_X	\sqcup		<u> </u>	L		0		
(14) Elizabeth Jacobson - non votiong	0 25	l								
Trustee		Χ						0		

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_ P	art VII Section A. Officers, Directors, Tru	istees, Key Em	ploye	es,			ghes	t C	ompensated Em	ployees (contir	ued)		
	(A) . Name and title	(B) Average	1 '		Pos neck		than is both	(E) Reportable	 	(F)	ed		
		hours per week (list any hours for related organizations below dotted line)		eran	dad	krecto	Highest compensated employee	tee)	Reportable compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	cor org ar	mount other npensa from th ganizat nd relat janizati	of ation e tion ted
(15) Trus	Kristine Hamm - non voting	0 25	1							-			
(16)	Steve Preble	40 00	X						0'		 -		
	cutive Director Steve Giorgi	40 00				X			120,552		ļ	37	7,185
Assı	st Exec Director					х		_	111,396			36	6,089
	Dean Tharp anizing Director	40 00				x			99,948		<u> </u>	3.5	5,269
(19)													.,
(20)													
(21)												_	
(22)								i					
(23)													
(24)												_	
(25)													
1b c	Sub-total Total from continuation sheets to Part VII, Se	ection A			-			>	336,008	0	<u> </u>	108	3,5 <u>43</u> 0
d	Total (add lines 1b and 1c)					_		>	336,008	0		108	3,543
2	Total number of individuals (including but not lin reportable compensation from the organization	nited to those lis ►	ted a		e) v 3	vho	recer	ved	more than \$100	,000 of			
		otor or truston l	Lau a	mal	0110		r biat	2001	companyated			Yes	No
3	Did the organization list any former officer, dire employee on line 1a? <i>If</i> "Yes," complete Schedu		•		Oye	e, o	riigi	ICS	Compensated		3		X
4	For any individual listed on line 1a, is the sum of the organization and related organizations great									h			İ
	individual	ter triair \$150,00)() · 11	76	3, (COIII	piere	. OC.	nedale 5 for Suci	,	4	Х	
5	Did any person listed on line 1a receive or accrifor services rendered to the organization? If "Yes"									ridual	. 5		
Sec	tion B. Independent Contractors									100.000 (
1	Complete this table for your five highest compe compensation from the organization. Report convear										ax		
	(A) Name and business addr	ess							(B) Description of serv	vices C	(C compen		
	None			_									0
	None												0
													0
2	Total number of independent contractors (included more than \$100,000 of compensation from the contractors)	-	ed to ►	thos	se li	stec	abo 0	ve)	who received				

Form 990 (2013) AFSCME Council 65						41-085	4876 Page 9	
Par	t VIII	Statement of Revenue						- rugo e
		Check if Schedule O contains a respon	se or i	note to any line in	this Part VIII			
			_		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts st	1a	Federated campaigns	1a	0		•		
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b	0		,		
ts, (C	Fundraising events	1c	0				
g g	d	Related organizations	1d	0			[
Sim Sim	e	Government grants (contributions)	<u>1e</u>	0				
ag de	l t	All other contributions, gifts, grants, and				1		
풀호	_	similar amounts not included above	1f	218,929	ľ			
ğ ç	9	Noncash contributions included in lines 1a-1f	\$	0				
	h	Total. Add lines 1a-1f		Business Code	218,929			
Program Service Revenue	2a	Member dues		900099	6,557,919		}	
ě	b	Convention registration fees		900099	8,340	· · ·		
9	C			300033	0,540			
Ξ	d			<u> </u>	0		 	
S	е				0			
g	f	All other program service revenue		-	0			
P.	g	Total. Add lines 2a–2f		•	6,566,259			
	3	Investment income (including dividends, in	terest,	and				
		other similar amounts)		▶	196,075			
	4	Income from investment of tax-exempt bor	nd prod	ceeds ►	0			
	5	Royalties		▶	0	<u> </u>		
		(ı) Re	al	(ii) Personal			1	
	6a	Gross rents						
	b	Less rental expenses			}			}
	C .	Rental income or (loss)	0	0				
	d	Net rental income or (loss) Gross amount from sales of (i) Security	ritias	(II) Other	0			
	7a	Gross amount from sales of assets other than inventory	0	 				
	Ь	Less cost or other basis		├─── ┤				
	"	and sales expenses	0	o				
	c	Gain or (loss)	0		'			ļ
	d	Net gain or (loss)		•	o	-		
]	5 , ,						
ne	8a	Gross income from fundraising						
eu/	ĺ	events (not including \$ 0		1				
æ		of contributions reported on line 1c)						
Other Revenue		See Part IV, line 18	a				-	
\$		Less direct expenses	b	0		•		1
_	C	Net income or (loss) from fundraising even	ts		0			
	9a	Gross income from gaming activities See Part IV, line 19	•	ا ا	i			
	ь	Less direct expenses	a b					1
	C	Net income or (loss) from gaming activities			o			
		Gross sales of inventory, less						
		returns and allowances	а	0	J			1
	b	Less cost of goods sold	b	0				
		Net income or (loss) from sales of inventor	у	>	0			
		Miscellaneous Revenue		Business Code				
	11a			ļ	0			
	b			<u> </u>	0			
	С				0			
	d	All other revenue		L	1,731			
	е	Total. Add lines 11a-11d		▶	1,731			

6,982,994

Total revenue. See instructions

AFSCME Council 65 Statement of Functional Expenses Part IX

00011	Check if Schedule O contains a response or note			complete column (A)	
	not include amounts reported on lines 6b, 8b, 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	ol			
2	Grants and other assistance to individuals in the				
	United States See Part IV, line 22	0			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the	1			
	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	336,008			
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	1,966,091			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	207,695			
9	Other employee benefits	676,303			
10	Payroll taxes	184,115			
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	909		<u> </u>	
С.	Accounting	15,566	 -		_
d	Lobbying Designated fundamental activities See Part IV line 17	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	<u> </u>			
g	Other (If line 11g amount exceeds 10% of line 25, column	24,331		i	
12	(A) amount, list line 11g expenses on Schedule O) Advertising and promotion	24,331			
13	Office expenses	140,975			· · · · · · · · · · · · · · · · · · ·
14	Information technology	0			
15	Royalties	0			
16	Occupancy	18,329			
17	Travel	222,923			
18	Payments of travel or entertainment expenses				· ·
	for any federal, state, or local public officials	o			
19	Conferences, conventions, and meetings	117,230			
20	Interest	792			
21	Payments to affiliates	2,338,460			
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	33,510			
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)	L			 _
а	Home Care campaign	56,779			
b	Contributions / memorials	39,507			
C	Day-on-the-Hill	13,588			
d	Scholarship awards	2,830			
е	All other expenses	28,670		 	
25	Total functional expenses. Add lines 1 through 24e	6,424,611	0	0	0
26	Joint costs. Complete this line only if the	1			
	organization reported in column (B) joint costs	1			
	from a combined educational campaign and fundraising solicitation. Check here	1			
	following SOP 98-2 (ASC 958-720)	<u> </u>		<u> </u>	Form 990 (2013)

Part X Balance Sheet

2 Savings and temporary cash investments 2,409,478 2 2,958,071 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6			Check if Schedule O contains a response or note to any line in this Part X	(
2 Savings and temporary cash investments 3 Pletges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958[0](1)), persons described in section 4958[0](1), play some described in section 4958[0](1),						
3 Pledges and grants receivable, net 0 3 0 0 0 0 0 0 0 0		1	Cash—non-interest-bearing	104	1	9,894
Accounts receivables, net		2	Savings and temporary cash investments	2,409,478	2	2,958,071
Security Security		3	Pledges and grants receivable, net	0	3	0
trustees, key employees, and highest compensated employees Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(i)(1), persons described in section 4958(i)(3)(8), and countruling employers and sponsoring organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net to see the compensation of the complete Part II of Schedule L 10 Thouses and loans receivable and to see the compensation of the co		4	Accounts receivable, net	0	4	0
Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(I)(I)), persons described in section 4958(I)(I)(I), persons described in section 4958(I)(I)(I), persons described in section 4958(I)(I)(I) and contributing employers and sponsoring organizations of section 501(I)(I)(I) voluntary employees beneficiary organizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventiones for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part II of Schedule D 10b Less accumulated depreciation 11 Investments—publicly traded securities 12 Investments—other securities See Part IV, line 11 13 Investments—other securities See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Loans and other payables to current and former officers, directors, trustess, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 22 Cans and other payables to current and former officers, directors, trustess, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortageas and notes payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties 26 Other liabilities (including federal income tax, payables to related third parties 30 (24 0.00) 31 Pard-in or capital surplus, or land, building, or equipment fund 31 Pard-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total liabilities, endowering, accumulated income, or other funds 33 Total net assets 0 fund balances 34 (2409,582) 33 (2,409,582) 33 (2,40		5	Loans and other receivables from current and former officers, directors,			
4958/ft/11), persons described in section 4958(s)(3)(8), and contributing employers and sponsoning organizations of section 501(c)(9) voluntary employees's beneficiary organizations (see instructions) Complete Part I of Schedule L.			· · · · · · · · · · · · · · · · · · ·	-	5	
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9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part IV of Schedule D 10b Less accumulated depreciation 11 Investments—publicly traded securities 12 Investments—publicly traded securities 13 Investments—problecy by traded securities 14 Intensible assets 15 Other assets See Part IV, line 11 16 Total assets See Part IV, line 11 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties 26 Total liabilities. Add lines 17 through 25 27 Organizations that follow SFAS 117 (ASC 958), check here Part N of Schedule D 28 Total liabilities. Add lines 17 through 25 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 24 Undestred net assets 24 (29,9582) 33 2,967,965	Ş		organizations (see instructions) Complete Part II of Schedule L		6	
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17				2,409,582	16	2,967,965
18					17	
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Part X of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Universificated net assets Temporarily restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Salary September 1		25	Other liabilities (including federal income tax, payables to related third			
Part X of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Universificated net assets Temporarily restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Salary September 1			parties, and other liabilities not included on lines 17-24) Complete			
Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances Organizations that do not follow SFAS 117 (ASC958), check here and complete lines 30 through 34. 2,375,096 27 2,921,761 2,375,096 28 46,204 2,396,596 28 46,204 2,396,596 29 29 2,396,596 27 2,921,761 3,486 28 46,204 3,486 28 46,204 3,486 28 46,204 3,486 28 46,204 3,486 28 46,204 3,486 28 30 4,486 28 30 4,486 28 30 4,596			Part X of Schedule D	0	25	0
Complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 2,375,096 27 2,921,761 34,486 28 46,204 39 Parmanently restricted net assets 29 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Settlement assets or fund balances 32 Capital stock or fund balances 33 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Capital stock or trust principal, or current funds 34 Capital stock or trust principal, or current funds 36 Capital stock or trust principal, or current funds 37 Capital stock or trust principal, or current funds 38 Capital stock or trust principal, or current funds 39 Capital stock or trust principal, or current funds 30 Capital stock or trust principal, or current funds 31 Capital stock or trust principal, or current funds 32 Capital stock or trust principal, or current funds 33 Capital stock or trust principal, or current funds 34 Capital stock or trust principal, or current funds 35 Capital stock or trust principal, or current funds 36 Capital stock or trust principal or current funds 37 Capital stock or trust principal or current funds 38 Capital stock or trust principal or current funds 39 Capital stock or trust principal or current funds 30 Capital stock or trust principal or current funds 31 Capital stock or trust principal or current funds 32 Capital stock or trust principal or current funds 33 Capital stock or trust principal or current funds		26	Total liabilities. Add lines 17 through 25	0	26	0
30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 30 31 2,409,582 33 2,967,965	48					
30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 30 31 2,409,582 33 2,967,965	ĕ		complete lines 27 through 29, and lines 33 and 34.			
30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 30 31 2,409,582 33 2,967,965	<u>la</u> n	27	Unrestricted net assets			
30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 30 31 2,409,582 33 2,967,965	Ba	28	Temporarily restricted net assets	34,486		46,204
30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 30 31 2,409,582 33 2,967,965	Б	29	Permanently restricted net assets		29	
30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 30 31 2,409,582 33 2,967,965	or Fu		· · · · · · · · · · · · · · · · · · ·			
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0.007.005	Se			2.409.582		2,967,965
1 27 10101 1101 1101 1101 1101 1101 1101						

Form 9	990 (2013) AFSCME Council 65		11-0854876	Pa	ge 12
Par	Reconciliation of Net Assets	,			
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,982	2,994
2	Total expenses (must equal Part IX, column (A), line 25)	2		6,42	4,611
3	Revenue less expenses Subtract line 2 from line 1	3		558	3,383
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,409	9,582
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		2,967	7,965
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		1		
	Schedule O		:		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				}
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
-	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both				ĺ
	X Separate basis Consolidated basis Both consolidated and separate basis				
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	f	1 1		
С	the audit, review, or compilation of its financial statements and selection of an independent accountant?	1	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in		20		ļ. — ·
	Schedule O				
20	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
3a	the Single Audit Act and OMB Circular A-133?		3a		х
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		Ja		 ^-
b	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
	required addit or addita, explain why in ochedule of and describe any steps taken to undergo such addits		Form	200	(2012)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

► See separate instructions.

- 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-EZ, Part V, line 35c (Proxy Tax), then

	ne of organization	organizations Complete Part III		Employe	er identification number
AFS	SCME Council 65				41-0854876
		the organization is exempt und	ler section 501	c) or is a section 527	organization.
1	Provide a description of t	he organization's direct and indirect p	political campaign a	activities in Part IV	
2	Political expenditures			▶ \$	135,145
3	Volunteer hours				240
Pa	rt I-B Complete if 1	the organization is exempt und	ler section 501	(c)(3).	
1		excise tax incurred by the organization			
2		excise tax incurred by organization m			
3	•	ed a section 4955 tax, did it file Form	-	_	Yes No
4a			•		Yes No
b	If "Yes," describe in Part	IV			_
		the organization is exempt und	ler section 501	c), except section 501	(c)(3).
1		expended by the filing organization f			
	activities			▶ \$	129,845
2	Enter the amount of the f	iling organization's funds contributed	to other organizati	ons	
	for section 527 exempt fu	inction activities		▶ \$	5,300
3	Total exempt function exp	penditures Add lines 1 and 2 Enter h	ere and on Form 1	1120-POL,	
	line 17b			▶ \$	135,145
4	• •	file Form 1120-POL for this year?			Yes X No
5	Enter the names, address	ses and employer identification numb	er (EIN) of all sect	ion 527 political organization	ons to which the filing
	organization made paym	ents For each organization listed, en ntributions received that were prompt	ter the amount par	d from the filing organization	n's funds. Also enter
	as a senarate segregated	d fund or a political action committee	(PAC) If additiona	l space is needed, provide i	information in Part IV
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds If none, enter -0-	promptly and directly delivered to a separate
					political organization If
					none, enter -0-
/1\ ¹	Dayton for Better				
	Minnesota			3,500	
(2)	Senate DFL Caucus			1,000	
	School Board candidates			1,000	
(3) `	School Board Candidates			800	
(4)					
1E\			1		
(5)					

d Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	edule C (Form 990 or 990-EZ) 2013					Page 2
P	art II-A Complete if the organization	on is exempt	under section 5	01(c)(3) and filed	Form 5768 (ele	
	under section 501(h)).					
Α	Check ▶ if the filing organization b	-			_	up member's
	name, address, EIN, exp	•		, , ,	,	
В	Check ▶ if the filing organization of	hecked box A	and "limited cont	rol" provisions ap	ply	
	Limits on Lob (The term "expenditures" n	bying Expendit neans amounts			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence pu	blic opinion (gra	iss roots lobbying)			0
b	Total lobbying expenditures to influence a l	egislative body ((direct lobbying)			0
С	Total lobbying expenditures (add lines 1a a	nd 1b)			0	0
d	Other exempt purpose expenditures					0
е	Total exempt purpose expenditures (add lin	es 1c and 1d)			0	0
f	Lobbying nontaxable amount Enter the am columns	ount from the fo	ollowing table in boti	h	0	0
ſ	If the amount on line 1e, column (a) or (b) is	: The lobbyir	ng nontaxable amou	int is:		
Ī	Not over \$500,000	20% of the a	mount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	us 15% of the excess	over \$500,000		
Ļ	Over \$1,000,000 but not over \$1,500,000		us 10% of the excess			
]	Over \$1,500,000 but not over \$17,000,000		us 5% of the excess of	ver \$1,500,000		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25%				0	0
h	Subtract line 1g from line 1a If zero or less				0	0
İ	Subtract line 1f from line 1c If zero or less,				0	0
j	If there is an amount other than zero on eit	her line 1h or lin	e 1i, did the organiz	ation file Form 472	O reporting	
	section 4911 tax for this year?					Yes No
	(Some organizations that columns below	made a section v. See the instr	uctions for lines 2	not have to comp a through 2f on pa		
	Lobby	ng Expenditure	es During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount	0	0	0	0	0
b	Lobbying ceiling amount (150% of line 2a, column(e))					0
С	Total lobbying expenditures	0	o	O.	0	0

0

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Schedule C (Form 990 or 990-EZ) 2013

0

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0

Par	t II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	i For	n 5768	
For e	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(6	3)	(b)
	e lobbying activity	Yes	No	Amo	unt
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)?				
С	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	Other activities?				
j	Total Add lines 1c through 1i	ł			0
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	1			
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			action	
Par	Complete if the organization is exempt under section 501(c)(4), section 501(c)(4)	C)(3),	, or s	ection	
	501(c)(6).			Ye	s No
4	Were substantially all (90% or more) dues received nondeductible by members?			1 >	
1	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	X
2 3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	X
. <u>-</u>	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," (answered "Yes."	OR (b) Par	t III-A, lir	ne 3, is
1	Dues, assessments and similar amounts from members		_ 1		<u> </u>
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
_			2a		
a	Current year Carryover from last year		2b		
b C	Total		2c		0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the				
7	excess does the organization agree to carryover to the reasonable estimate of nondeductible				
	lobbying and political expenditure next year?	- 1	4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		0
Part	V Supplemental Information				
Provi	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group	list), P	art II-	A, line 2, a	nd
	I-B, line 1 Also, complete this part for any additional information				
Part	-A Line 1 - During 2013 Council 65 mobilized its members in support of it's legislative and				
politic	cal objectives. The legislative objective was to pass legislation to help Council 65 members.				
with t	hings such as public services, job security, right to organize, etc. The political objective				
was t	o have members vote for candidates endorsed by Council 65				
		- 			

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047 2013

Open to Public

Internal Revenue Service

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

Name	of the organization			Employer identification number
AFSC	ME Council 65			41-0854876
Part	Organizations Maintaining Done Complete if the organization answ			ds or Accounts.
		(a) Donor advised funds		(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and do	-		onor advised
	funds are the organization's property, subject	-		Yes No
6	Did the organization inform all grantees, done	-	_	
	used only for charitable purposes and not for		dvisor, or for	
	purpose conferring impermissible private ben	etit?		Yes No
Part				
	Complete if the organization answ			
1	Purpose(s) of conservation easements held to	· —		
	Preservation of land for public use (e g , recr	eation or education) Pres	servation of a	an historically important land area
	Protection of natural habitat	Pres	servation of a	a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organizat	ion held a qualified conservation co	ontribution in	the form of a conservation
	easement on the last day of the tax year			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation ease			<u>2b</u>
C	Number of conservation easements on a cert			2c
d	Number of conservation easements included		ot on a	
_	historic structure listed in the National Regist		d or tormino	tod by the organization
3	Number of conservation easements modified	transierred, released, extiliguisher	u, or termina	ted by the organization
4	during the tax year Number of states where property subject to o	onservation easement is located	•	
5	Does the organization have a written policy re		spection, hai	ndling of
	violations, and enforcement of the conservati		- F	Yes No
6	Staff and volunteer hours devoted to monitor	ng, inspecting, and enforcing conse	ervation ease	ements during the year
	>			
7	Amount of expenses incurred in monitoring, i	nspecting, and enforcing conservat	ion easemer	its during the year
	▶ \$		_	
8	Does each conservation easement reported	on line 2(d) above satisfy the requir	ements of se	
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization re	onts conservation easements in its	revenue and	d expense statement, and
	balance sheet, and include, if applicable, the		IION S IIII al ICI	al statements that describes
Part	the organization's accounting for conservation Organizations Maintaining Colle	ections of Art Historical Trea	sures, or (Other Similar Assets.
rait	Complete if the organization answ	ered "Yes" to Form 990. Part I	V. line 8	
	If the organization elected, as permitted under			nue statement and halance sheet
1a	works of art, historical treasures, or other sim	lar assets held for public exhibition	education	or research in furtherance
	of public service, provide, in Part XIII, the tex	of the footnote to its financial state	ements that o	describes these items
h	If the organization elected, as permitted under	r SEAS 116 (ASC 958), to report in	its revenue	statement and balance sheet
b	works of art, historical treasures, or other sim	ilar assets held for public exhibition	, education	or research in furtherance
	of public service, provide the following amour		,	-
	(i) Revenues included in Form 990, Part VIII.			> \$
	(ii) Assets included in Form 990, Part X			> \$
2	If the organization received or held works of a	art, historical treasures, or other sim	nilar assets fo	or financial gain, provide the
_	following amounts required to be reported un			
а	Revenues included in Form 990, Part VIII, lin			▶ \$
b	Assets included in Form 990, Part X			▶ \$

Part	Organizations Maintaining	Collections of A	<u>Art, Hist</u>	orical Ti	<u>reasures, o</u>	<u>r Othe</u>	<u>er Similar Ass</u>	sets (coi	ntınue	d)
3	Using the organization's acquisition, ac		records,	check any	of the follow	ing that	are a significai	nt		
	use of its collection items (check all tha	t apply)		י						
а	Public exhibition		d	Loan	or exchange	prograr	ns			
b	Scholarly research		e	Other		-				
С	Preservation for future generatio	ns								
4	Provide a description of the organization Part XIII	n's collections and	explain h	ow they fo	urther the org	anızatıc	on's exempt pur	pose in		
5	During the year, did the organization so	licit or receive don	ations of	art, histori	cal treasures	or othe	er sımılar			
	assets to be sold to raise funds rather t	han to be maintain	ed as par	t of the or	ganization's d	ollectio	n?	Y	es 🔙	No
Part	IV Escrow and Custodial Arra	ngements.								
	Complete if the organization	answered "Yes"	to Form	990, Pai	rt IV, line 9,	or repo	orted an amoi	unt on Fo	orm	
	990, Part X, line 21							<u></u>		
1a	Is the organization an agent, trustee, cu	ustodian or other in	termediar	y for cont	ributions or o	ther ass	sets not			,
	included on Form 990, Part X?							Y	es	No
b	If "Yes," explain the arrangement in Par	rt XIII and complete	the follo	wing table	:					
_	Doning halana					4.		Amount		
c d	Beginning balance Additions during the year					10				0
e	Distributions during the year					16				
f	Ending balance					11				0
2a	Did the organization include an amount	on Form 990 Part	X line 2	12					es X	No
b	If "Yes," explain the arrangement in Par				as heen nrovi	ded in l	Part XIII	۰۰ رے		
		TAIII ONCORTICIO	T the expi	anation ne	as been provi					
Part	Complete if the organization	answered "Ves"	to Form	000 Pai	rt IV line 10					
	Complete ii the organization	(a) Current year		or year	(c) Two years		(d) Three years ba	ck (e) Fo	our years	back
1a	Beginning of year balance	0.	(-7:	0	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0	(-)	0	, , , , , , , , ,	0
b	Contributions					Ì				
С	Net investment earnings, gains,			-		Î	<u></u>			
	and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
_	and programs									
f	Administrative expenses	0		0		0		0		
g 2	End of year balance Provide the estimated percentage of the		halance /		lumn (a)) bel			<u> </u>		0
a	Board designated or quasi-endowment	E current year end	%	illie ig, cc	namm (a)) nei	u as				
b	Permanent endowment	%								
С	Temporarily restricted endowment	> %								
	The percentages in lines 2a, 2b, and 2d	should equal 100°	%							
3a	Are there endowment funds not in the p	ossession of the o	rganızatıc	n that are	held and adı	minister	ed for the			
	organization by							0-43	Yes	<u>No</u>
	(i) unrelated organizations							3a(i)	 	
	(ii) related organizations If "Yes" to 3a(ii), are the related organiz	ations listed as roa	urod on 9	Schodulo	D2			3a(ii) 3b		
b 1	Describe in Part XIII the intended uses							0.0	i1	
Part			3 CHOOW	inchit land.						
rait	Complete if the organization		to Form	990. Par	t IV. line 11	a See	Form 990. Pa	art X. line	- 10	
	Description of property	(a) Cost or oth			est or other		Accumulated		ook value	<u> </u>
		(investme		٠,,	s (other)		epreciation			
1a	Land		0		0					0
b	Buildings		0		0		0			0
С	Leasehold improvements		0		0		0			0
d	Equipment		0		0		0			0
<u>e</u>	Other Add lines 1a through 1e (Column (d) m	uet equal Farm 00	0	column "	0)		0			<u>0</u>
rotal.	. Aug iines ta intough te (C <i>olumn (a) m</i>	usi equal <u>r</u> onn 99	u, railX,	COIUIIII (E	J_{j} , $IIII \cup IU(U)$	<u>'</u>				

41-0854876

Page 2

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 AFSCME Council 65

Part VII Investments—Other Securities Complete if the organization an		0, Part IV, line 11b See Forn	n 990, Part X, line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year i	aluation
(1) Financial derivatives	0		
(2) Closely-held equity interests	0		
(3) Other			
(A)			
(B)			
(C)			······································
(D)			
(E)			
(F)			
(G)			
(H)			
Total (Column (b) must equal Form 990, Part X, col. (B) line 12.)	0]		
Part VIII Investments—Program Related Complete if the organization and		0, Part IV, line 11c See Form	n 990, Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year r	
(1)			
(2)			
(3)			
_(4)			
(5)			
(6)			
			
(8)			
(9) Total (Column (b) must equal Form 990, Part X, col (B) line 13)	0		
	swered "Yes" to Form 99 a) Description	0, Part IV, line 11d See Forn	(b) Book value
(1)			
(2)			
(3)			
(4) (5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, co	I (B) line 15)	•	(
Part X Other Liabilities. Complete if the organization and line 25		0, Part IV, line 11e or 11f Se	e Form 990, Part X,
1. (a) Description of liability	(b) Book value		
(1) Federal income taxes	0		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total (Column (b) must equal Form 990, Part X, col (B) line 25)	0		that rangets tha
2. Liability for uncertain tax positions. In Part XIII, provide organization's liability for uncertain tax positions under F	ie tne text of the footnote to the FIN 48 (ASC 740). Check here i	organization's financial statements f the text of the footnote has been t	provided in Part XIII

		1-0854876	Page 4
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue per Financial Statements With Revenu	Return	
1	Total revenue, gains, and other support per audited financial statements	1	11,202,453
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 2b		
С	Recoveries of prior year grants 2c 2c	-	
d	Other (Describe in Part XIII) 2d 4,219,459		
е	<u>▼</u>	2e	4,219,459
3	Subtract line 2e from line 1	3	6,982,994
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	ļ	
b	Other (Describe in Part XIII)	.	
_ C	} -	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	6,982,994
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	Return	
1	Total expenses and losses per audited financial statements	1	10,644,070
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	<u> </u>	10,044,070
a	Donated services and use of facilities 2a 2		
b	Prior year adjustments 2b		
c	Other losses 2c		
d	Other (Describe in Part XIII) 2d 4,219,459		
е		2e	4,219,459
3	Subtract line 2e from line 1	3	6,424,611
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII)		
С	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	6,424,611
	t XIII Supplemental Information		
	de 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		t X, line
2, Pa	rt XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information	on	
Part 2	XII Line 2d - Offset of per capita taxes paid from "Dues Deduction Trust Fund" to		
'Adm	unistrative and Political Funds"	·	
Part 1	XI Line 2d - Offset of per capita taxes paid from "Dues Deduction Trust Fund" to		
- 2011	NI LIIIO 23 Oliock of per capita kanas para from Basis Beautici Mastriana (a		
'Adm	inistrative and Political Funds"		
		·	
		• • • • • • • • • • • • • • • • • • • •	
			

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990. See separate instructions.

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Employer identification number

41-0854876 **AFSCME Council 65 Questions Regarding Compensation** Part I Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990. Part VII. Section A, line 1a Complete Part III to provide any relevant information regarding these items Housing allowance or residence for personal use First-class or charter travel Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No." complete Part III to 1b explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 2 1a? 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III X Written employment contract Compensation committee Independent compensation consultant Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing 4 organization or a related organization Receive a severance payment or change-of-control payment? 4a а 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? h Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990. Part VII, Section A, line 1a, did the organization pay or accrue any 5 compensation contingent on the revenues of 5a The organization? а 5b Any related organization? If "Yes" to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 6 compensation contingent on the net earnings of 6a The organization? а 6b Any related organization? If "Yes" to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 7 payments not described in lines 5 and 6? If "Yes," describe in Part III Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was 8 subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe 8 in Part III If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in 9 Regulations section 53 4958-6(c)?

Schedule J (Form 990) 2013 AFSCME Council 65

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

Note. The sum of columns (B)(I)—(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual 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

Department of the following commence and the following the second of the following the second of the following the second of the following the second of the following the second of the following the second of the following the second of the following the second of the following the second of the following the second of the following the second of the following the second of the	13100	ishe senti langidish	M. O and dimodric of the	200				
		(b) Breakdown or	(b) breakdown of W-2 and/or 1099-MISC compensation	oc compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(I) Base compensation	(II) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits		reported as deferred in prior Form 990
Steve Preble	€	115,152		5,400	11,440	25,745	157,737	
1 Executive Director	€							1 1 1 7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	€							
2	(ii)							
	Ξ							
3	(E)							
	Ξ							
4	Ξ			::				
	€							
5	(E)							1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(:)							
9	(E)						1	1
	(!)							
7	(ii)							
	(!)							
8	<u>(E</u>							
	(!)							
6	(ii)						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1
	(:)							
10	Ξ							
	Θ	1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
11	€							
	ε			,		1	1	
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	Ξ							
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15	€							
;	€ :						1	
16								

Schedule J (Form 990) 2013

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

AFSCME Council 65 41-0854876 Form 990, Part VI, Section A, Line 6 - The Organization has 13,000 members Form 990, Part VI, Section A, Line 7a & 7b - Members elect a Board of Directors every 3 years at the Council's annual convention. The Board makes decisions on behalf of the members unless it involves a constitutional issue Form 990, Part VI, Section B, Line 11 - The 990 is prepared by the Council's external independent auditor and is reviewed and signed by an officer. The auditor discusses the audit and the 990 with the Trustees and Officer Board members when they meet each year. The Trustees then make a report to the full Board Form 990, Part VI, Section B, Line 15 & 16 - The Board sets the salary of the Executive Director and other key employees Form 990, Part VI, Section C, Line 19 - Information is provided upon request only Form 990, Part XII, Line 2C - The executive director, executive officers, and trustees continue to provide financial oversight and select the independent auditor

Form 8868

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

► File a separate application for each return.

Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

► X

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Enter filer's identifying number, see instructions Employer identification number (EIN) or Name of exempt organization or other filer, see instructions Type or 41-0854876 print AFSCME Council 65 Social security number (SSN) Number, street, and room or suite no. If a PO box, see instructions File by the due date for 118 Central Avenue filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions return See instructions Nashwauk, MN 55769 Enter the Return code for the return that this application is for (file a separate application for each return) 01 Application Return Return **Application** Code Is For Is For Code 07 Form 990 or Form 990-EZ 01 Form 990-T (corporation) Form 990-BL 02 Form 1041-A 80 09 03 Form 4720 (other than individual) Form 4720 (individual) 10 Form 5227 Form 990-PF 04 05 Form 6069 11 Form 990-T (sec 401(a) or 408(a) trust) 06 Form 8870 12 Form 990-T (trust other than above) The books are in the care of ► Linda Kresal Telephone No ► 218-885-3242 Fax No ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is and attach a for the whole group, check this box ▶ If it is for part of the group, check this box list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 8/15/2014 , to file the exempt organization return for the organization named above. The extension is for the organization's return for ► X calendar year 2013 or dax year beginning _____, and ending Final return Initial return If the tax year entered in line 1 is for less than 12 months, check reason 2 Change in accounting period If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 3a \$ 0 3a nonrefundable credits. See instructions If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and \$ 0 estimated tax payments made. Include any prior year overpayment allowed as a credit 3b Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using 0 EFTPS (Electronic Federal Tax Payment System) See instructions Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for

payment instructions